

NAME: _____

Last

First

Middle

DATE: _____

POSITION: _____



CHANDLER POLICE DEPARTMENT Background Questionnaire



INSTRUCTIONS:

1. MAKE SINGLE SIDED COPIES ONLY
2. PRINT **LEGIBLY** IN BLACK INK IN YOUR OWN HANDWRITING
3. ONLY THE APPLICANT WILL FILL OUT THIS QUESTIONNAIRE
4. IF YOU NEED ADDITIONAL SPACE, MAKE A COPY OF THE “FURTHER EXPLANATIONS” SHEET, UNLESS OTHERWISE DIRECTED (Sections B and C)
5. PER PAGE 42, ATTACH ALL NECESSARY COPIES
6. YOU WILL RECEIVE INSTRUCTIONS ON WHEN TO SUBMIT YOUR **FULLY COMPLETED PACKET**.

**ANY OMISSION, DECEPTION, OR FAILURE TO FOLLOW THE INSTRUCTIONS
IN YOUR PACKET COULD DISQUALIFY YOU FROM FURTHER CONSIDERATION.**

Chandler Police Department
Professional Standards Section
250 E. Chicago St.
Chandler, AZ 85225

Questions?
CPDrecruiting@ChandlerAZ.gov | 480-782-3960

Background Packet



Chandler Police Department

ORI - AZ0070500

AUTHORITY FOR RELEASE OF INFORMATION

Last Name	First Name	Middle Name	Sex	Race	Date of Birth	SSN

City of Birth	County	State	Country

I, _____,
Applicant Name

do hereby authorize a review of and full disclosure of all records, or any part thereof, concerning myself, by and to ANY duly authorized agent of the Chandler Police Department, Professional Standards Section, whether said records are of public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions; financial or credit institutions (including records of deposits, withdrawals, balances of checking and savings accounts, and loans) and also the records of commercial or retail credit agencies (including credit reports and/or ratings); public utility companies; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me, and salary records; real and personal property tax statements and records, and other financial statements and records wherever filed; records of complaint, arrest, trial, and/or convictions for alleged or actual violations of law, including criminal, civil, and/or traffic records; the results of any polygraph examinations; records of complaints of a civil nature made by or against me, wherever located, including the records and recollections of attorneys at law, or of other counsel, whether representing me or another person in any case in which I presently have or have had an interest.

I reiterate and emphasize that the intent of this authorization is to provide full and unobstructed access to the background and history of my personal life for the specific purpose of pursuing a background investigation, which may provide pertinent data for the Chandler Police Department to consider in determining my suitability for employment by that department. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be, and the sources of information specifically identified herein.

I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the Chandler Police Department. I understand that all materials pertaining to this background investigation become the property of the Chandler Police Department, Professional Standards Section, and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees, from and against all claims, damages, losses, and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request. I further understand that in the event my application is disapproved, the sources of confidential information cannot be revealed to me.

A photocopy of this release form will be valid as an original hereof, even though said photocopy does not contain an original writing of my signature.

MUST BE SIGNED IN THE PRESENCE OF A NOTARY:

Subscribed and sworn to before me this _____ day of _____, 20____.

My commission expires: _____

Notary Public

Applicant Signature Date

Street Address City State Zip

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Note: Where necessary, use a separate page to complete answers throughout this questionnaire.

A. Personal Data

Full Name _____ Date of Birth _____
LAST FIRST MIDDLE MM/DD/YYYY

AKA/Maiden Name _____

DL # _____ State _____ Gender _____ Marital Status _____ SSN _____

Height _____ Weight _____ Age _____ Eye Color _____ Hair Color _____ Race _____

Address _____
NO./STREET APT. # CITY STATE ZIP

Phone (_____) _____ (_____) _____
HOME CONTACT EMAIL

1. Have you ever used or been known by any other name other than the one you listed on this questionnaire (including your maiden name)? Yes No
If yes, list name(s): _____
2. Have you ever used a social security number other than the one you have listed? Yes No
If yes, list number(s): _____

B. Residences

Starting with the present and proceeding backwards, list all residence addresses, including school, military, and personal residences. ACCOUNT FOR ALL TIME. DO NOT LEAVE ANY TIME FRAME BLANK. LIST EVERYTHING IN PROPER SEQUENCE. If you need additional space, copy this blank page and attach as Page 5(a).

From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code

C. Employment History

List all places of employment—including internships and long-term volunteer service—beginning with your most recent employer and working backwards. List any periods of school, military service, and unemployment. ***Do not omit any employers.*** If you need more space, attach extra copies of this page.

From (MM/YY)	Job Title	Ending Salary
To (MM/YY)	Employer	
Employer's Address (Street, City, State Zip)		Contact Email
Supervisor	Contact Phone	
Description of duties:		
Reason for leaving:		

From (MM/YY)	Job Title	Ending Salary
To (MM/YY)	Employer	
Employer's Address (Street, City, State Zip)		Contact Email
Supervisor	Contact Phone	
Description of duties:		
Reason for leaving:		

From (MM/YY)	Job Title	Ending Salary
To (MM/YY)	Employer	
Employer's Address (Street, City, State Zip)		Contact Email
Supervisor	Contact Phone	
Description of duties:		
Reason for leaving:		

From (MM/YY)	Job Title	Ending Salary
To (MM/YY)	Employer	
Employer's Address (Street, City, State Zip)		Contact Email
Supervisor		Contact Phone
Description of duties:		
Reason for leaving:		

From (MM/YY)	Job Title	Ending Salary
To (MM/YY)	Employer	
Employer's Address (Street, City, State Zip)		Contact Email
Supervisor		Contact Phone
Description of duties:		
Reason for leaving:		

From (MM/YY)	Job Title	Ending Salary
To (MM/YY)	Employer	
Employer's Address (Street, City, State Zip)		Contact Email
Supervisor		Contact Phone
Description of duties:		
Reason for leaving:		

1. Have you ever been terminated or asked to resign from any employment? Yes No
If yes, complete the following:

Employer's Name: _____ Phone: _____

Explanation: _____

2. Have you ever resigned from a job to avoid being fired or terminated? Yes No

If yes, name of employer: _____

Explanation: _____

3. Are you currently employed? Yes No

4. If your work performance has been evaluated in the past, what is the latest evaluation you received?

Exceptional

Below average

Above average

Never been evaluated

Average

5. Have you been tardy or late for work because of circumstances within your control?
Yes No

If yes, how often? _____ Last time: _____

Explanation: _____

6. During the past year, have you falsified sick time by calling in sick when you were not ill?
Yes No If yes, when? _____

Explanation: _____

7. Have you been unemployed anytime during the past three years? Yes No
If yes, when? _____

Explanation: _____

8. Have you ever been written up, counseled, or disciplined in any manner, by any of your employers for failure to comply with required rules or regulations, or for any other reason? Yes No

If yes, explain: _____

9. Have you ever been suspended or served an "Intent to terminate" by any employer? Yes No

If yes, explain: _____

10. Have you ever quit a job without giving notice required by an employer? Yes No

If yes, explain: _____

11. Would you be eligible to be rehired by all your former employers (assuming there was a job available)? Yes No

If no, explain: _____

12. Did you ever work without reporting it (even on the side) while collecting unemployment benefits? Yes No

If yes, explain: _____

13. Have you ever taken merchandise or goods that you were not authorized to take from a company where you worked? Yes No

If yes, what? _____

How many times? _____ Last time: _____

Explain: _____

14. Have you ever taken money that you were not authorized to take from a company where you have worked or volunteered? Yes No

If yes, how much? _____

How many times? _____ Last time: _____

Explanation: _____

15. Have you ever purposely taken anything from a fellow employee that you were not authorized to take? Yes No

If yes, what? _____ When? _____

Explanation: _____

16. Have you ever taken anything from a job site or crime scene that you were not authorized to take? Yes No

If yes, what? _____ When? _____

Explanation: _____

17. While employed, have you ever been involved with another employee or outside person in a scheme to defraud your employer? Yes No

If yes, explain: _____

18. Have you ever falsified a timesheet? Yes No

If yes, explain: _____

19. Has an employer ever accused you of being dishonest? Yes No

If yes, explain: _____

20. Indicate whether you have been rejected as an applicant (for a job or internship) for any of the following reasons:

a. Issues raised by a background investigation? Yes No N/A

b. Issues raised by a polygraph? Yes No N/A

c. Issues raised by an oral board? Yes No N/A

d. Issues raised by a physical agility test? Yes No N/A

e. Other _____

If yes, explain: _____

21. Have you ever failed to successfully complete a probationary period with a law enforcement agency (or any other employer)? Yes No

If yes, explain: _____

22. Did you ever sell or give confidential information you received through your employment to anyone for financial gain or for any other reason? Yes No

If yes, explain: _____

23. Have you ever or are you now making payments to any employer or bonding company for merchandise taken, stolen, or lost? Yes No

If yes, explain: _____

D. References

1. List at least five (5) references (not relatives or romantic partners) who are responsible adults and who have known you well during the past five (5) years. **You must provide complete address including zip code, current telephone number, and email.**

Name	Residence Address:
Relationship	City, State, Zip
How long acquainted?	Phone: (H) (C)
Occupation:	Email Address:

Name	Residence Address:
Relationship	City, State, Zip
How long acquainted?	Phone: (H) (C)
Occupation:	Email Address:

Name	Residence Address:
Relationship	City, State, Zip
How long acquainted?	Phone: (H) (C)
Occupation:	Email Address:

Name	Residence Address:
Relationship	City, State, Zip
How long acquainted?	Phone: (H) (C)
Occupation:	Email Address:

Name	Residence Address:
Relationship	City, State, Zip
How long acquainted?	Phone: (H) (C)
Occupation:	Email Address:

2. Are you acquainted with any employees of this department or any employees of the City of Chandler? Yes No

If yes, list them: _____

E. Education and Training

1. List all schools you have attended (high schools, trade schools, colleges, and universities).
List GED if it applies

From MM/YY	To MM/YY	Name and city/state	Credit Hours	Graduate?		Type of Degree
				Yes	No	

2. List all professional societies, organizations, licenses (date and number), registrations (date), special skills, knowledge, or abilities.

3. Do you speak, read, or write a language other than English? Yes No

If yes, what language? _____ How well? _____

4. Have you ever received any law enforcement training? Yes No

Name of organization: _____

Month and year you attended: _____

What type of training? _____

F. General Background

1. Have you ever taken a polygraph before? Yes No

Date (MM/YY)	Agency:	Result:

2. Have you ever applied for a permit to carry a concealed weapon? Yes No
If yes, explain: _____

3. Have you ever been the subject of a court order of protection or injunction prohibiting harassment? Yes No
If yes, explain: _____

4. Have you ever been the subject of an investigation by child protective services (child welfare agency)? Yes No
If yes, explain: _____

5. Have any of your relatives (including your spouse and your spouse’s relatives) ever been convicted or imprisoned for a crime? Yes No
If yes, please list name and relation: _____
Charge: _____

6. Do you enjoy inflicting pain on humans or animals? Yes No
If yes, explain: _____

7. Did you ever offer anyone a bribe? Yes No
If yes, explain: _____

8. Have you ever observed, been present, participated in, or concealed the commission of any crime? Yes No
If yes, explain: _____

9. Have you ever committed a felony or an offense that would be a felony if committed in Arizona?
Yes No

If yes, explain: _____

10. Do you have any prejudices against any group? Yes No

If yes, explain: _____

11. Have you ever had a physical confrontation (i.e. pushed, slapped, punched, etc.) with a romantic/intimate partner (i.e. spouse, girlfriend/boyfriend, date)? Yes No

If yes, explain: _____

12. Have you ever had an argument with a romantic/intimate partner where property was damaged? (e.g. a wall, a cell phone, etc.) Yes No

If yes, explain: _____

13. Have you ever been a member of any organization that advocates, advises, or supports the use of force or other unlawful means to deny other person their rights under the constitution of the United States? Yes No

If yes, explain: _____

14. Have you ever stolen or taken without permission any property from a business or other people (e.g. shoplift or switched price tags)? Yes No

If yes, what was the value? _____

How many times? _____ Last time: _____

Explain: _____

15. When was the last time you stole or took, without permission, any property from a business or other person? _____ Age: _____

Explain: _____

16. Did you ever buy anything that you suspected was stolen? Yes No

If yes, explain: _____

17. Did you ever sell anything that you knew was stolen? Yes No

If yes, explain: _____

18. Are you now in possession of any stolen property? (i.e., on person, at residence, in car, etc.)
Yes No

If yes, explain: _____

19. Have you ever paid, or been paid, to participate in any sexual act? Yes No

If yes, explain: _____

20. Have you ever sought out or viewed child pornography, including via the Internet?
Yes No

If yes, explain: _____

21. Have you been involved ***IN ANY WAY*** with any of the following offenses? This includes: committing, witnessing, participating in, being a victim to, being a suspect of, or being a reporting party for the offense.

- | | |
|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <u>ARSON</u> – Intentionally setting a fire to destroy something or cause damage. | <input type="checkbox"/> <u>BURGLARY, THEFT, BREAKING AND ENTERING</u> |
| <input type="checkbox"/> <u>FORGERY</u> – Signing another person’s name to a document without their permission. | <input type="checkbox"/> <u>CRIMINAL DAMAGE</u> – i.e. vandalism or graffiti |
| <input type="checkbox"/> <u>EMBEZZLEMENT</u> – Theft of money or valuables entrusted to you. | <input type="checkbox"/> <u>ROBBERY (ARMED/STRONG ARMED)</u> |
| <input type="checkbox"/> <u>RAPE OR ATTEMPTED RAPE</u> – A forcible sex act other than child molest, including sexual abuse. | <input type="checkbox"/> <u>CHILD ABUSE</u> |
| <input type="checkbox"/> <u>SEXUAL CHILD ABUSE OR MOLEST</u> | <input type="checkbox"/> <u>CHILD NEGLECT</u> |
| <input type="checkbox"/> <u>ASSAULT, RESISTING ARREST,</u> | <input type="checkbox"/> <u>SEXUAL CRIMES</u> – i.e. self-exposure, obscene phone calls, peeping tom, sex in a public place, bestiality (sex with animals), etc. |
| <input type="checkbox"/> <u>HOMICIDE</u> | <input type="checkbox"/> <u>DRIVING UNDER THE INFLUENCE OF ALCOHOL OR DRUGS</u> |
| <input type="checkbox"/> <u>SEXUAL IMAGE SHARING</u> – sharing nude photos | |

If you checked the box for any of the above, describe the incident and your involvement ***in detail***. If you need additional room, use the “Further Explanations” page at the end of this packet.

G. Police Contacts

- 1. Yes No Have you ever had any contact at all with a police officer?
(This includes being a victim, reporting party, witness, ride-a-longs, etc.)
- 2. Yes No Have you been warned for anything by a police officer?
- 3. Yes No Have you ever been detained by a police officer?
- 4. Yes No Have you ever been accused of a crime?
- 5. Yes No Have the police ever been called to your home for any reason?
- 6. Yes No Have you ever been questioned as a suspect in a crime?
- 7. Yes No Have you ever been connected with a criminal investigation of any kind?

If you answered “yes” to any of the questions above, explain each incident in detail below. If you need additional room, use the “Further Explanations” page at the end of this packet.

H. Arrest History

22. Have you ever been arrested or issued a criminal citation (convicted or not) for any offense or violation of any statute, ordinance, law, or regulation by any civil or military authority, either in this country or any other country? (Include detentions as a juvenile or minor by court adjudication or guilt.)

Yes No

If yes, explain: _____

23. Yes No Have you ever been charged with a crime?

24. Yes No Have you ever been arrested (or issued a criminal citation)?

If yes, how many times? _____

25. Yes No Have you ever had a warrant issued for your arrest?

26. Yes No Have you ever had to appear before a juvenile court for an act which would have been a crime, if committed as an adult?

If yes to any, explain: _____

I. Conviction Record

- 1. How many times have you been convicted of, pled guilty to, or plead no contest to misdemeanor charges? _____
- 2. How many times have you been convicted of, pled guilty to, or pled no contest to felony charges? _____

3. Have you ever been on court-ordered probation? Yes No
If yes, explain: _____

4. Have you ever been convicted (pled guilty or no contest) of any offense, domestic violence, or violation of any statute, ordinance, law, or regulation by any civil or military authority, either in this country or any other country? (Include detentions as a juvenile or minor by court adjudication of guilt. Include all situations, even if expunged) Yes No

If yes, explain: _____

J. Driving History

1. Have you ever had a driver’s license cancelled, refused, revoked, or suspended? Yes No

If yes, explain in detail: _____

If yes, how many times did you drive while your license was suspended or revoked? _____

2. Have you ever attended a driver improvement school? Yes No

If yes, explain in detail: _____

3. Do you currently have an Arizona Driver’s License? Yes No

License # _____ Restrictions: _____

4. Do you have, or have you ever had, a driver’s license from another state or country?

Yes No If yes, where? _____

5. How many automobile accidents have you been involved in as a driver (regardless of fault)? _____

List each incident in detail, using the further explanations page if necessary.

Date	PD called?	Location (City, State)	Law Enforcement Agency	Citation Yes/No

6. Have you ever been a driver or passenger in an accident where injuries or damage occurred and you left the scene of the accident (hit and run)? Yes No

If yes, explain: _____

7. Have you ever falsified information on an accident report or given police false information during a traffic stop or accident investigation? Yes No

If yes, explain: _____

8. Have you ever been involved in a “road rage” situation? Yes No

If yes, explain: _____

9. Have you ever had a warrant issued for your arrest for failure to pay a citation or failure to appear in court? Yes No

If yes, explain: _____

10. Do you have any outstanding warrants for your arrest right now? Yes No

If yes, what state issued it? _____

If yes, explain: _____

11. Do you currently have automobile insurance as mandated by the state? Yes No

If no, explain why not: _____

12. Has your insurance ever been canceled? Yes No

If yes, explain: _____

13. Has your insurance ever been placed under a "high risk" status? Yes No

If yes, explain: _____

14. Have you ever let your vehicle registration expire? Yes No

If yes, explain: _____

15. List **EVERY** traffic citation and warning you have received in chronological order, beginning with the most recent and working backwards.

Date	Agency	Violation	Ticket or Warning

16. Have you ever been charged with driving under the influence of alcohol or drugs? Yes No

If yes, explain: _____

17. Have you ever driven a vehicle under the influence of alcohol or drugs and not been caught?

Yes No

If yes, explain: _____

K. Alcohol and Drugs

Be sure to answer *ALL* questions below.

If the question does not apply to you, write "DNA" in the space provided.

1. Do you drink alcohol? Yes No

a. How often during the week do you drink alcohol? _____

b. When was the last time you were drunk? _____

c. Have you ever had difficulty within your family due to your alcohol consumption?

Yes No If yes, explain: _____

2. Have you ever possessed, used, purchased, or sold **marijuana**? Yes No

If yes, explain: _____

a. What form was the marijuana? (e.g. joint; bong; edible with cannabis oil such as brownies, gummies, lollipops; etc.) _____

b. Estimate your *total* marijuana usage throughout your entire life, remembering that once a month for a year is 12 times, once a week for a year is about 52 times, and almost every day for a year is about 365 times. _____

c. When was the last time you used marijuana?

Date last used: _____ Age at time of use: _____

d. Since the age of 21, how many times have you used marijuana? _____

e. Are you currently using marijuana for any reason? Yes No

If yes, explain: _____

3. Have you ever possessed, used, purchased or sold **cocaine** in any form? Yes No

If yes, explain: _____

a. How many times have you possessed, used, or sold cocaine? _____

b. When was the last time you used cocaine in any form?

Date last used: _____ Age at time of use: _____

c. Since the age of 21, how many times have you used cocaine in any form? _____

d. Are you currently using cocaine in any form? Yes No

4. Have you ever used **ANY** drug (whether over-the-counter or prescribed) in a manner not suggested by the label? Yes No

If yes, explain: _____

5. Have you ever used a drug **prescribed to someone else** (for the drug's intended purpose or any other reason)? Yes No

If yes, explain: _____

6. Have you ever given a drug **prescribed to you** to someone else? Yes No

If yes, explain: _____

7. Have you ever **illegally** possessed, used, purchased, or sold **prescription drugs** (e.g. OxyContin[®], Fentanyl, Soma, morphine, etc.)? Yes No

If yes, explain: _____

a. How many times? _____

b. When was the last time you used illegal prescription drugs in any form?

Date last used: _____ Age at time of use: _____

c. Since the age of 21, how many times have you used illegal prescription drugs in any form? ____

d. Are you currently using illegal prescription drugs in any form? Yes No

8. Have you ever possessed, used, purchased or sold any **hallucinogens** (i.e., LSD, mescaline, peyote, acid, mushrooms, angel dust, PCP, etc.)? Yes No

If yes, explain: _____

a. How many times? _____

b. When was the last time you used hallucinogens in any form?

Date last used: _____ Age at time of use: _____

c. Since the age of 21, how many times have you used hallucinogens in any form? ____

d. Are you currently using hallucinogens in any form? Yes No

9. Have you ever illegally possessed, used, purchased or sold **opiates or dangerous drugs** (e.g. opium, morphine, heroin Ecstasy, GHB, etc.)? Yes No

If yes, explain: _____

- a. How many times? _____
- b. When was the last time you used opiates or dangerous drugs in any form?
Date last used: _____ Age at time of use: _____
- c. Since the age of 21, how many times have you used opiates or dangerous drugs in any form? _____
- d. Are you currently using opiates or dangerous drugs in any form? Yes No

10. Have you ever illegally possessed, used, purchased or sold **amphetamines** (e.g. meth, Dexedrine, speed, crank, crystal meth, ice, glass, cross tops, etc.)? Yes No

If yes, explain: _____

- a. How many times? _____
- b. When was the last time you used amphetamines in any form?
Date last used: _____ Age at time of use: _____
- c. Since the age of 21, how many times have you used amphetamines in any form? _____

11. Have you ever illegally possessed, used, purchased or sold **illegal steroids**? Yes No

If yes, what kind? _____

Explain the type of cycle followed: _____

- a. How many times have you possessed/used/purchased/sold illegal steroids? _____
- b. When was the last time you used illegal steroids in any form?
Date last used: _____ Age at time of use: _____
- c. Since the age of 21, how many times have you used illegal steroids in any form? _____
- d. Prior to 1994, how many times did you use illegal steroids in any form? _____
- e. Since 1994, how many times have you used illegal steroids in any form? _____
- f. Are you currently using illegal steroids in any form? Yes No

13. Have you ever used any other substance (**legal or not**), for the purpose of getting high? (salvia, spice, whip its, paint, bath salts, etc.) Yes No

If yes, explain: _____

14. Have you ever **illegally** possessed, used, purchased or sold **depressants or tranquilizers** such as barbiturates, Valium, Quaaludes, etc.? Yes No

If yes, explain: _____

a. How many times? _____

b. When was the last time you illegally used depressants or tranquilizers in any form?

Date last used: _____ Age at time of use: _____

c. Since the age of 21, how many times have you illegally used depressants or tranquilizers?

15. Have you ever illegally possessed or used any other controlled drug besides those already described? Yes No

If yes, explain: _____

How often? _____ Last time: _____

16. How many times in your entire life have you driven a vehicle after using any illegal or controlled drug? _____

17. Have you ever provided any illegal or controlled drug to friends or others in exchange for money or goods? Yes No

If yes, explain: _____

Most recent time: _____

18. Have you ever grown, manufactured, or processed any controlled substance? Yes No

a. If yes, explain: _____

19. Do you know of any relatives or close friends that are currently using illegal drugs? Yes No

If yes, explain: _____

20. Are you aware that the employment environment within this agency is a **DRUG-FREE ENVIRONMENT**, and **any** violation of that policy can lead to termination? Yes No

L. Organizational Membership

1. Are you now, or have you ever been, a member of any foreign or domestic organization, association, movement, group, or combination of persons which is totalitarian, fascist, communist, or subversive, or which has adopted or shows a policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States or the State of Arizona or which seeks to alter the form of Government of the United States or the State or Arizona by any unlawful or unconstitutional means? Yes No

If yes, explain: _____

2. Have you ever been a member of any crime group or gang? Yes No

If yes, explain: _____

M. Military Experience

1. Have you ever registered with the Selective Service (the draft)?

- No, although I was legally required to do so.
- No, I was not required to do so (females).
- Yes, in _____ (State)

2. Have you ever been rejected or disqualified—for *ANY* reason—for military or civil service?

- N/A
- No
- Yes

If yes, explain: _____

IF YOU HAVE NO MILITARY EXPERIENCE, MARK THE “N/A” BOX AND GO TO THE NEXT SECTION

N/A

3. Have you ever served in the Army, Navy, Marine Corps, Air Force, Coast Guard, R.O.T.C., or any other military or para-military organization? Yes

Branch of Service	Serial #	Date Entered	Date Separated

a. If yes, give type of separation: _____

b. How long were you in the military, on active duty: _____ years _____ months

c. What type of discharge did you receive? Check all that apply

- Honorable
- Honorable with hardship reasons
- General
- Less than honorable
- Retirement length of service _____
- Still on full-time active duty
- Still on reserve status
- Other: _____

4. Did you ever fail to complete any term of enlistment for any reason? Yes No

If yes, explain: _____

5. Did you ever receive any disciplinary action while in the military (e.g. Court Martial, Article 15, Captain's Mast, Company Mast, Company punishment, reduction in rank, etc.)? Yes No

If yes, list **all** discipline in the table below, using the "Further Explanations" page if needed.

Date	Type of Discipline	Reason for Discipline

6. While in the military, were you ever incarcerated (brig or guardhouse)? Yes No

If yes, explain: _____

7. Were you ever UA, AWOL, missing from formation or ship movement? Yes No

If yes, explain: _____

8. Do you still possess any military equipment that you are not authorized to have? Yes No

If yes, explain in detail: _____

9. Are you currently a member of the U.S. Reserve or National Guard? Yes No

If yes, what unit? _____

Commander's Name: _____

Contact Number: _____

N. Financial Status

1. Are you currently able to pay all of your bills on time? Yes No

2. Have you ever been referred to a collection agency? Yes No

If yes, explain: _____

3. Do you presently have any debts in collections? Yes No

If yes, explain: _____

4. Have you ever had anything repossessed? Yes No

If yes, explain: _____

5. Are you purposely avoiding any creditors? Yes No

If yes, explain: _____

6. Are you currently delinquent with any child support obligations? Yes No

If yes, explain: _____

7. Have you ever failed to make child support payments you were legally required to make?

Yes No

If yes, explain: _____

8. Have you ever had your wages garnished regarding any of your financial obligations?

Yes No

If yes, explain: _____

9. Have you ever failed to file an IRS statement? Yes No

If yes, list year(s): _____ Why? _____

10. Have you ever had any issues, or do you currently have any unresolved issues with the Internal Revenue Service or any revenue department in any state? Yes No

If yes, explain: _____

11. Have you ever made false or exaggerated claims on insurance policies? Yes No

If yes, explain: _____

12. Have you ever had a bad credit rating? No

If yes, explain: _____

13. Have you ever filed for bankruptcy? Yes No

If yes, when? _____ Court: _____ Chapter 7 11 13 (circle one)

Explain: _____

14. Did you ever write a check with the intentions of cheating someone, or cash a check you knew was bad? Yes No

If yes, explain: _____

15. How many times in your life have you had a check returned for insufficient funds? _____

List the dates of all returned checks: _____

16. Has a landlord ever served you with an eviction notice? Yes No

If yes, explain: _____

17. Have you ever been sued in court for anything? Yes No

If yes, give date, court, and disposition: _____

18. List ALL present outstanding loans, mortgages, credit card debt, etc. (including bills in collections)

Company	Type of loan/debt	Monthly Payment	Debt balance

19. Are you a co-signer of someone's outstanding loan? Yes No

If yes, explain: _____

20. If employed, do you anticipate income other than salary? Yes No

If yes, explain: _____

21. Can you keep up with your present financial obligations on what you will earn here?

Yes No

If no, explain: _____

22. Do you gamble? Yes No

23. Do you owe any gambling debts? Yes No

If yes, explain: _____

O. Social Networking

1. Have you ever been a member of a social networking site of any kind? This includes hosting, posting, or visiting any network under your real name, assumed name or moniker used in connection with the site. Yes No

2. List the social network and your user name(s) for each

Name of social network:

User name:

Name of social network:	User name:

3. List all email addresses you have ever used:

4. Have you ever posted any comments or pictures on a social networking site, whether yours or another person's, that may contain material considered inappropriate based on race, color, sex, religion, national origin, age or disability? Yes No

If yes, explain: _____

5. Have you ever posted any comments, sexually explicit pictures, or pictures of conduct that may be considered publicly embarrassing on a social networking site, whether yours or another person's?

Yes No If yes, explain: _____

6. Have you ever posted or viewed pictures or images of juveniles engaged in any activity that is unlawful? Yes No

If yes, explain: _____

7. Did you clean your site in preparation for this interview or job search? Yes No

If yes, what material was removed? Why? _____

P. Law Enforcement Experience

IF YOU HAVE NEVER SERVED IN ANY CAPACITY WITHIN A LAW ENFORCEMENT ENTITY, MARK THE "N/A" BOX AND GO TO THE NEXT SECTION.

N/A

1. Indicate whether you have any of the following law enforcement experience: (answer each question)

- a. Sworn/commissioned weapon carrying officer Yes No
- b. Police reserve Yes No
- c. Military police officer Yes No
- d. Corrections/detention Yes No
- e. Civilian job title: _____

2. Number of years' experience as a sworn police officer: _____

3. How many law enforcement agencies have you worked for as a sworn police officer? _____

4. How many law enforcement agencies have you worked for as a civilian? _____

5. How many citizen complaints have been filed against you? _____

If any, explain: _____

6. How many of these complaints were sustained or found to be true? _____

If any, explain: _____

7. How many reprimands (written or oral) have you received? _____

Explain and list dates: _____

8. How many times have you been suspended, demoted, or dismissed? _____

Explain and list dates: _____

9. Were you ever the subject of a civil or criminal prosecution (lawsuit)? Yes No

If yes, explain: _____

10. Other than while on training status, have you ever had any unsatisfactory personnel ratings?

Yes No

If yes, explain: _____

11. As a sworn officer, have you ever violated any controlled substance (illegal narcotic) laws? Yes No
If yes, explain: _____
12. Have you ever used illegal drugs while on duty? Yes No
If yes, explain: _____
13. Have you ever used illegal drugs while employed with a law enforcement agency? Yes No
If yes, explain: _____
14. Have you ever consumed alcohol while on duty? Yes No
If yes, explain: _____

15. Have you ever lied or distorted the facts in a police report? Yes No
If yes, explain: _____
16. Did you ever cover up a violation for a fellow officer or fellow employee? Yes No
If yes, explain: _____
17. Did you ever lie or commit perjury in court testimony or any official proceeding, including an internal affairs investigation? Yes No
If yes, explain: _____
18. Have you ever been terminated or forced to resign from a law enforcement position **during** the probation period? Yes No
If yes, explain: _____

19. Have you ever been terminated or forced to resign from a law enforcement position **after** the probation period? Yes No
If yes, explain: _____

20. Have you ever been involved, in any manner, with an Internal Affairs investigation? Yes No
If yes, explain: _____

21. Have you ever falsified information regarding damage to departmental equipment/vehicles?

Yes No

If yes, explain: _____

22. Have you ever failed to report damage to departmental equipment/vehicles you were responsible for?

Yes No

If yes, explain: _____

23. Have you ever used “excessive force” or more force than was necessary to affect an arrest?

Yes No

If yes, explain: _____

24. How many on-duty traffic collisions have you been involved in? _____

In how many of those were you cited and/or deemed out of policy? _____

25. While on duty or on work premises, have you engaged in **any** type of sexual activity? Yes No

If yes, explain: _____

26. Did you ever accept a gratuity in violation of your department’s policy? Yes No

If yes, explain: _____

27. Have you ever converted items of evidence or property to your personal use in violation of your department’s policy? Yes No

If yes, explain: _____

28. Do you know of any crimes committed by other officers that have not been discovered?

Yes No

If yes, explain: _____

Q. Prior Applications

Please list the names of any law enforcement agencies at which you have applied for any position. If you have applied with an agency more than once, include all dates and positions applied for with that agency. If necessary, make a copy of this page or use the “Further Explanations” page.

Agency	City/State	Position Applied For	MM/YY	How far in the process did you get?

R. Summary Questions

28. Did you give any answers on this questionnaire that you know are false? Yes No

If yes, explain: _____

29. Are you concealing any information, which would prevent you from being employed by this department? Yes No

If yes, explain: _____

30. Did you cheat, lie, or commit fraud in any way on your application or evaluation process for this job? Yes No

If yes, explain: _____

31. Have you made application to this department at the request of any subversive organizations?

Yes No

If yes, explain: _____

32. Have you had any other involvement in illegal activities or committed any crimes that have yet to be disclosed? Yes No

If yes, explain: _____

**POLICE OFFICER AND DETENTION OFFICER
APPLICANTS ONLY**

If, during the course of your duties as a police officer (detention officer), a situation arose whereby you were faced with the lawful and necessary taking of a human life, would you be **able** to do so?

Yes _____ No _____ If No, explain: _____

CERTIFICATION

I hereby certify, under penalty of A.R.S. 13-2701 and 39-161, that the entries on this questionnaire are true, complete, and correct to the best of my knowledge and belief. These entries are made in good faith. I understand that knowingly and willfully making a false statement on this form constitutes a violation of the law and is cause to initiate action to suspend or revoke certified peace officer status.

Signature _____ Date _____

T. Required documents

Initial each box

- Make **copies** of all the documents listed below and **attach them to the back of this packet**

- You will later need to bring **originals** of all documents if you are invited to a background interview
 - Birth certificate
 - Driver license
 - Social security card
 - High school diploma or GED
 - Proof of citizenship if a naturalized citizen
 - Marriage certificate(s) or divorce decree(s), if applicable
 - Military Service Record Form DD214 (**Must be Copy 4**), if applicable
 - College diploma(s), if applicable
 - Bankruptcy papers, if applicable

➤ IF you cannot locate a required document, list on the further explanations page what first step you have taken to reacquire that document.

I certify that the above entries are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that knowingly and willfully making a false statement on this form constitutes cause to revoke, refuse, or suspend employment with the City of Chandler.

Signature of Applicant: _____ Date: _____

Revised 3/16/2021

Final Checklist

Ready to turn in your packet? Make sure the following are complete:

- Authority for Release of Information is completed, signed, and notarized
- All required copies are attached
- Pages are clipped neatly together

When turning in your background packet, make sure that it is **NOT**:

- Double-sided
- Stapled
- In a folder or envelope

If you have any questions, please contact the Hiring Unit at **CPDrecruiting@ChandlerAZ.gov** or **480-782-3960**.