



# VAN BUREN POLICE DEPARTMENT

800 Fayetteville Road  
 Van Buren, AR 72956  
 479-474-1234



## APPLICATION FOR EMPLOYMENT POLICE OFFICER

The City of Van Buren is an equal opportunity employer and does not discriminate against any individual in any phase of employment in accordance with the requirements of local, state and federal law. The City of Van Buren also provides reasonable accommodations to qualified individuals with disabilities in accordance with the Americans with Disabilities Act and applicable state and local law. Please advise us if you require an accommodation in the application process.

### PERSONAL

Last Name		First Name		Middle Name		Suffix	
Address:	Number	Street	City	State	Zip Code		
Telephone Number		Alternate Number		Email Address (Print neatly)			
Driver's License Number			State DL Issued				

Are you a certified law enforcement officer? If yes, which state? _____	Y	N
Have you even been employed as a law enforcement officer? If yes, list dates: _____	Y	N
Have you ever filed an application for employment with the City of Van Buren? Date of application: _____	Y	N
Have you ever been employed with the City of Van Buren?	Y	N
Do you have any relatives that are currently employed by the City of Van Buren? Employee name: _____	Y	N
Are you legally authorized to work in the United States? <i>You will be required upon employment to submit verification of your legal right to work in the United States.</i>	Y	N

### EDUCATION

High School	City and State	Course of Study	Did you graduate?	
			Y	N
Undergraduate College	City and State	Course of Study	Did you graduate?	
			Y	N
Graduate School	City and State	Course of Study	Did you graduate?	
			Y	N
Specialized School	City and State	Course of Study	Did you graduate?	
			Y	N

List any additional information you feel may be helpful to us in considering your application:

---



---



---



---

### EMPLOYMENT EXPERIENCE

Start with your present or most current job. Include any job-related military service assignments and volunteer activities. Exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates Employed		Work Performed
Address	From	To	
Phone Number			
Job Title	Salary		
Supervisor	Starting	Ending	
Reason for Leaving			

Employer	Dates Employed		Work Performed
Address	From	To	
Phone Number			
Job Title	Salary		
Supervisor	Starting	Ending	
Reason for Leaving			

Employer	Dates Employed		Work Performed
Address	From	To	
Phone Number			
Job Title	Salary		
Supervisor	Starting	Ending	
Reason for Leaving			

*If extra space is needed, list additional jobs/information on a separate sheet.  
All information should be printed neatly.*

I hereby understand and acknowledge that, unless otherwise defined by applicable law or Civil Service Regulation, any employment relationship with the Van Buren Police Department is of an *at will* nature, which means I may resign at any time, and the City of Van Buren may discharge me with or without cause. In the event of employment, I understand that false or misleading information given by me in my application or hiring process may result in termination.

By my signature below, I certify that all information given is true and complete.

Signature of Applicant
Date

**PHYSICAL AGILITY RELEASE IS REQUIRED AND MUST BE SIGNED AND NOTARIZED  
BEFORE IT IS SUBMITTED WITH YOUR APPLICATION**

**VAN BUREN POLICE DEPARTMENT**

**PRE-EMPLOYMENT PHYSICAL AGILITY RELEASE FORM**

I,      \_\_\_\_\_, do hereby release indemnify, and agree to hold harmless, the City of Van Buren, the Van Buren Police Department, its employees and agents, and assigns from and against any and all claims, liability, and causes of action which may have accrued or in the future accrue to me as a result of my taking of a test to determine my physical fitness.

I understand that the said skills assessment is required as a part of the application process for consideration for employment with the Van Buren Police Department.

I acknowledge that during the taking of the said test, my physical strength and general physical condition will be measured, and in conjunction therewith, I will be required to exert myself physically, and that such exertion is only intended to measure my physical strength and condition to be considered for employment by the Van Buren Police Department.

I voluntarily agree to participate in the said physical test and realizing the possible consequences of liability that I may presently have or which I may attain in the future as a result of, or with regard to the said physical test.

     \_\_\_\_\_

Signature of Applicant

I,      \_\_\_\_\_, do hereby acknowledge that the foregoing instrument was executed by me for the purpose expressed herein and I acknowledge that I have voluntarily executed the foregoing instrument and that the contents thereof are true and correct.

     \_\_\_\_\_

Signature of Applicant

***The section to be completed and stamped by a Notary Public.***

SWORN AND SUBSCRIBED TO ME ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 2024

\_\_\_\_\_, NOTARY PUBLIC

MY COMMISSION EXPIRES \_\_\_\_\_