



VILLAGE OF CORRALES POLICE DEPARTMENT APPLICATION FOR EMPLOYMENT

The Village of Corrales is an equal employment opportunity employer who considers applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

Please Type or Print

Date: _____

PERSONAL INFORMATION

Name: _____
Last First Middle

Address _____
Street City State Zip

Telephone Numbers/Email: Social Security Number: _____ / _____ / _____
Home: _____ *Driver's License # _____ *Attach Copy
Cell: _____ Issuing State _____
Email: _____

EMPLOYMENT DESIRED

Position: _____

If you are less than 18 years of age, can you provide required proof of your eligibility to work?
☐ Y ☐ N/A

Have you filed an application with the Corrales Police Department before? ☐ Y ☐ N
If yes, give date _____

Are you certified as NM State Police Officer? ☐ Y ☐ N
If yes, give date _____

Cert# _____ (attach Copy)

Are you currently employed? ☐ Y ☐ N
If yes, may we contact your present employer? ☐ Y ☐ N

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? ☐ Y ☐ N

Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work? _____

Are you available to work ☐ Full Time ☐ Part Time ☐ Shift Work ☐ Temporary

Are you currently on "lay-off" status and subject to recall? ☐ Y ☐ N

Can you travel if a job requires it? ☐ Y ☐ N

EDUCATION

	Name and Location of School	Number of years completed	Did you Graduate?	Subjects studied Degrees Received
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Police Academies			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Describe any honors you have received.

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

State any additional information you feel may be helpful to us in considering your application.

List professional, trade, business or civic activities and offices held. You may exclude those activities that indicate your union status, race, creed, color, sex, marital status, age, national origin, religion, citizenship or handicap.

Indicate any foreign languages you can speak, read and/or write.

	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

Have you ever had any job-related training in the United States Military? ☐ Y ☐ N

If yes, please describe and attach copy of DD214: _____

REFERENCES

Give name, address and telephone number of three references who are not related to you.

	Name	Address	Phone
1.			
	Email:		
2.			
	Email:		
3.			
	Email		

Village of Corrales Police Department Application

EMPLOYMENT EXPERIENCE

Please provide a full accounting of your Work Experience in the past 10 years including U. S. Military Service, if job related. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

You may attach a copy of your resume to your completed Village of Corrales application; however, information from your resume will not be used to determine if minimum qualifications are met.

(1) Present or last Employer: _____
Address: _____
Dates: From: _____ To: _____
Title: _____ Supervisor: _____
Starting Salary: _____ Present Salary: _____
Reason for Leaving: _____
Phone Number: _____ EMAIL: _____
Position Responsibilities: _____

(2) Present or last Employer: _____
Address: _____
Dates: From: _____ To: _____
Title: _____ Supervisor: _____
Starting Salary: _____ Present Salary: _____
Reason for Leaving: _____
Phone Number: _____ EMAIL: _____
Position Responsibilities: _____

(3) Present or last Employer: _____
Address: _____
Dates: From: _____ To: _____
Title: _____ Supervisor: _____
Starting Salary: _____ Present Salary: _____
Reason for Leaving: _____
Phone Number: _____ EMAIL: _____
Position Responsibilities: _____

(4) Present or last Employer: _____
Address: _____
Dates: From: _____ To: _____
Title: _____ Supervisor: _____
Starting Salary: _____ Present Salary: _____
Reason for Leaving: _____
Phone Number: _____ EMAIL: _____
Position Responsibilities: _____

Application Form Disclaimer

Neither the applicant of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Village of Corrales practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of the Village of Corrales, or otherwise to change in any respect the employment relationship between it and the undersigned, and that relationship cannot be altered except by the Personnel Ordinance as approved by the Governing Body of the Village of Corrales.

I authorize investigation of all statements contained in this application, in any other documentation related to this application, or made by me in any interview relating to potential employment in connection with this application. **I understand that misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice.** I authorize the investigation of all matters contained in this application and hereby give the Village of Corrales permission to contact schools, previous employers, references, and others, and hereby release the Village of Corrales from any liability as a result of such contact.

I further understand that my employment with the Village of Corrales shall be probationary for a period of one (1) year, and further that at any time during the probationary period, my employment relation with the Village of Corrales is terminable at will for any reason by either party.

Signature of Applicant: _____

The Village of Corrales is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religions sex, national origin, citizenship, age or disability. We assure you that your opportunity for employment with the Village of Corrales depends solely on your qualifications.



Thank you for completing this application form and for your interest in the Village of Corrales Police Department.

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**AUTHORIZATION RELEASE OF
INFORMATION**

Last Name: _____ First Name: _____ MI: _____ DOB: _____

This release. When presented by a duly authorized representative of the Village of Corrales Police Department constitutes my consent and authority to examine and obtain copies and abstracts of records and to receive statements and information regarding my background.

Specifically, I authorize the release of the following data of records to the Village of Corrales Police Department.

- Employment Records
- Training Records
- Police and Criminal
- Motor Vehicle and Driving
- Educational
- Medical

The authorizations given in connection with the background investigation being conducted relative to my application for employment with, the Corrales Police Department. The intent of this authorization is to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing an investigation, which will provide pertinent data for the Village of Corrales Police Department, to consider my suitability for employment.

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

I agree to indemnify and hold harmless the person to whom this request is presented and his/her 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 of my application disapproved, the confidential information or source(s) of information will not be revealed to me.

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

Signature _____

MUST BE SIGNED IN THE PRESENCE OF A NOTARY:

Street Address _____

State of _____:

City, State, Zip Code _____

County/City of _____:

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

My commission expires _____ . (Signature of Notary) _____ .

Date of Expiration: _____

