

Solebury Township Police Department, Bucks County PA

Probationary Police Officer

The Solebury Township Police Department patrols 27 square miles in Central Bucks County. The 20 members of the police department believe in a community policing approach to solving crime. Collaboration with our residents has helped the police department to be successful in solving problems and improving quality of life issues. The Solebury Police Department is a PLEAC Accredited department and has highly trained and dedicated patrol officers who have diverse skills. Our Officers are assigned to county and regional teams such as SWAT, MIRT, CNU and the County Accident Reconstruction team. The Solebury Township Police Department offers a very competitive salary and compensation package.

Interested applicants must bring their resume, cover letter, and application to the Solebury Township Police Department between the hours of 8am and 4pm Monday through Friday. The application will be posted on the Solebury Township website. A link to this page can be found on our Facebook, Twitter and Instagram pages as well. The police department is located at 3092 Sugas Rd. Solebury PA 18963. Resume, application and cover letter must be received by **March 29, 2019 at 4pm**. Applicants will be notified of the next steps of the process.

MINIMUM REQUIREMENTS

- Possess a high school diploma or GED
- Have successfully completed a PA Municipal Police Academy (Act 120 Training) or certification in another US State.
- Have the ability to obtain Act 120 certification within 30 days of notice
- Be at least 21 years of age
- Be a United States Citizen
- Possess a valid PA Drivers License
- Be able to perform all the duties of a police officer

SELECTION PROCEDURE

- Proper submission and receipt of application, resume and cover letter
- Oral interview with Command Staff provided to a group of applicants
- Background investigation
- Medical Evaluation
- Drug Screen
- Psychological Exam

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis including race, color, age, sex, religion, disability, or national origin.

| APPLICANT INFORMATION | | | | | | | | | | | |
|--|--|----|------------------------------|--------------------|-----------------------------|---------------------------------|--|--|--|--|--|
| Last Name | | | First | | | M.I. | | Date | | | |
| Street Address | | | | | | Apartment/Unit # | | | | | |
| City | | | | State | | | | ZIP | | | |
| Phone (s) | | | | E-mail Address | | | | | | | |
| Date Available | | | Last four digits of SSN | | XXX - XX- | | | Desired Salary | | \$ | |
| Position Applied for | | | | | | | | | | | |
| Are you a citizen of the United States? | | | YES <input type="checkbox"/> | | NO <input type="checkbox"/> | | If no, are you authorized to work in the U.S.? | | | YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| Have you ever worked for this company? | | | YES <input type="checkbox"/> | | NO <input type="checkbox"/> | | If so, when? | | | | |
| Are you employed now? | | | YES <input type="checkbox"/> | | NO <input type="checkbox"/> | | If so, may we contact your employer? | | | YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| Type of Employment Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Summer <input type="checkbox"/> Temporary <input type="checkbox"/> | | | | | | | | | | | |
| EDUCATION AND OFFICE SKILLS | | | | | | | | | | | |
| High School | | | Address | | | | | | | | |
| From | | To | | Did you graduate? | | YES <input type="checkbox"/> | | NO <input type="checkbox"/> | | | |
| College or Trade School | | | Address | | | | | | | | |
| From | | To | | Did you graduate? | | YES <input type="checkbox"/> | | NO <input type="checkbox"/> | | Degree | |
| Years of Typing Experience | | | Words Per Minute | | Other Office Equipment Used | | | Printer <input type="checkbox"/> Copier <input type="checkbox"/> Fax <input type="checkbox"/> Scanner <input type="checkbox"/> Calculator <input type="checkbox"/> | | | |
| Computer Software and Hardware Experience | | | | | | | | | | | |
| EMPLOYMENT HISTORY (LIST PRESENT OR MOST RECENT POSITIONS FIRST) | | | | | | | | | | | |
| Company | | | | | | Phone | | | | | |
| Address | | | | | | Name and Position of Supervisor | | | | | |
| Job Title | | | | Starting Salary | | \$ | | Ending Salary | | \$ | |
| Responsibilities | | | | | | | | | | | |
| From | | To | | Reason for Leaving | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | YES <input type="checkbox"/> | | NO <input type="checkbox"/> | | | |

EMPLOYMENT HISTORY (CONTINUED)

| | | | | | | |
|--|--|----|-----------------|---------------------------------|-----------------------------|----|
| Company | | | | Phone | | |
| Address | | | | Name and Position of Supervisor | | |
| Job Title | | | Starting Salary | \$ | Ending Salary | \$ |
| Responsibilities | | | | | | |
| From | | To | | Reason for Leaving | | |
| May we contact your previous supervisor for a reference? | | | | YES <input type="checkbox"/> | NO <input type="checkbox"/> | |

| | | | | | | |
|--|--|----|-----------------|---------------------------------|-----------------------------|----|
| Company | | | | Phone | | |
| Address | | | | Name and Position of Supervisor | | |
| Job Title | | | Starting Salary | \$ | Ending Salary | \$ |
| Responsibilities | | | | | | |
| From | | To | | Reason for Leaving | | |
| May we contact your previous supervisor for a reference? | | | | YES <input type="checkbox"/> | NO <input type="checkbox"/> | |

| | | | | | | |
|--|--|----|-----------------|---------------------------------|-----------------------------|----|
| Company | | | | Phone | | |
| Address | | | | Name and Position of Supervisor | | |
| Job Title | | | Starting Salary | \$ | Ending Salary | \$ |
| Responsibilities | | | | | | |
| From | | To | | Reason for Leaving | | |
| May we contact your previous supervisor for a reference? | | | | YES <input type="checkbox"/> | NO <input type="checkbox"/> | |

MILITARY SERVICE

| | | | | | | | |
|----------------------------------|--|--|--|-------------------|--|----|--|
| Branch | | | | From | | To | |
| Rank at Discharge | | | | Type of Discharge | | | |
| If other than honorable, explain | | | | | | | |
| | | | | | | | |

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.
 If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

| | | | | | | |
|-----------|--|--|--|------|--|--|
| Signature | | | | Date | | |
|-----------|--|--|--|------|--|--|