



## Department of Police

**STEPHEN P. ROWE, CHIEF**

32409 Fort Street • Rockwood, Michigan 48173

(734) 379-5323 • Fax: (734) 379-5758

Dear Applicant,

Prior to returning your application, please confirm that you have completely filled out the application. If a section does not apply to you, mark that area N/A.

You must submit the following documents with your application:

- Resume with cover letter
- Copy of driver's license
- Copy of social security card

All resumes / applications must contain a valid e-mail, as all testing / interview times will be communicated via e-mail.

Applicants that progress in the hiring process shall be required to provide financial background information (credit report).

Failure to include any required information shall result in your application being rejected.

Signed,

R. Krause  
Lieutenant



# Rockwood Police Department Police Officer Application

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Date of Application

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## Section 1: Personal Information

Last Name

First Name

Middle Name

E-mail Address

Phone (Cell)

Phone (Home)

Address

City

State

Zip

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Operators License Number

State

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Social Security Number

MCOLES Certified or Certifiable?

Yes  No

If Certified, Provide MCOLES license number

**\*\*\* Please assure that your e-mail is correct.  
All future communication will be handled via e-mail.  
This includes all notifications of tests and interviews.**

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**Section 2: Employment History - List all employers for the previous ten years  
Begin with current or most recent  
\*Use separate piece of paper if more than three**

Employer

Position

Phone

Dates of Employment

Immediate Supervisor

Reason for Leaving

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Employer

Position

Phone

Dates of Employment

Immediate Supervisor

Reason for Leaving

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Employer

Position

Phone

Dates of Employment

Immediate Supervisor

Reason for Leaving

**Section 3: Education**

College

Dates Attended

Did you Graduate?

Field of Study (Major)

Yes  No

High School

Did you Graduate?

Yes  No

High School Address

City

State/Zip

Police Academy

Dates Attended

Professional Certifications / Additional Training:

**Section 4: Criminal History**

**Have you ever been arrested/charged with any of the following?**

Operating While Intoxicated or while under the Influence of Drugs?

Yes  No

Driving on a Suspended / Revoked License?

Yes  No

Arrested for Any other reason

Yes  No

If Yes to any in Section 4, Explain. (When, Where & Disposition

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### Section 5: Personal References

Name:

Phone:

Address:

City, State, Zip:

Name:

Phone:

Address:

City, State, Zip:

Name:

Phone:

Address:

City, State, Zip:

**You must submit a resume, copy of driver's license and Social Security Card. Failure to attach required documents will result in your application not being processed.**

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**I certify that all information provided by me on this application is true. I understand that any falsification, misrepresentation or omission of fact either on this application or during the selection process will be grounds for removal from the selection process or if hired will be grounds for dismissal at any time.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_