



Youngsville Police Department

P.O. Box 310
311 Lafayette Street
Youngsville, LA 70592
337-856-5931
337-856-5902 fax

Minimum qualifications for employment with the Youngsville Police Department:

1. Must be 21 years of age
2. Must be a high school graduate
3. Must conform to and abide by laws of the United States, the State of Louisiana and any subdivisions thereof
4. Must have a valid driver's license and good driving history
5. Must have:
 - A – No Felonies
 - B – No misdemeanor charges that would prohibit you from carrying a firearm.
6. Must be able to pass a physical which includes a drug and back screen through the City of Youngsville's appointed physicians.
7. Must be in good physical shape in order to complete police training
8. Must be a registered voter
9. Must have an active civil service score. (Can be taken online)

Procedures prior to beginning date of employment:

1. Submit completed application, along with **copies** of any **certifications, driver's license, and voter registration card**.
2. If applying for reserve status, you will follow the same procedures as a full-time applicant.
3. Applicant will be screened through prior employment history, criminal history, and DL check.
4. Applicant will be contacted by either the Chief or the Assistant Chief, to set up and appointment for the interview, only in the event of an opening and you are selected as a candidate
5. If accepted for employment, arrangements will be made for physical, drug screening and psychological test through Human Resource Department.
6. Submit prior "Prior Service Certificate" if applicable.
7. Prior to beginning date, applicant will be supplied with the Youngsville Police Department Drug Policy and will sign all appropriate paperwork with the Human Resource Department.
8. Then receive Policy Manual, equipment, etc., from either the Chief or Assistant Chief.
9. Complete Property Sheet with the Captain of Patrol.
10. Applicant will receive appropriate paperwork from the Human Resource Department to get sworn in and receive commission card before beginning turned over to his FTO (Field Training Officer)

APPLICANTS ARE GIVEN CAREFUL, FAIR AND EQUAL CONSIDERATION. IF IT DETERMINE THE CHIEF OF POLICE WISHES AN INTERVIEW, YOU WILL BE NOTIFIED.

**APPLICATION FOR EMPLOYMENT
 YOUNGSVILLE POLICE DEPARTMENT
 P.O. BOX 310
 311 LAFAYETTE STREET
 YOUNGSVILLE, LA 70592
 337-856-5931 FAX 337-856-5902**

LEAVE THIS AREA BLANK:
 FINGERPRINTED BY: _____
 PHOTOGRAPHED BY: _____
 DATE: _____
 PHYSICAL/DRUG SCREEN: _____
 START DATE: _____ ACCEPTED: YES
 IF NO: _____

POSITION APPLIED FOR:						DATE OF APPLICATION	
<i>CHECK ONE:</i> FULL TIME () RESERVE OFFICER () CLERICAL ()							
1. LAST NAME						MAIDEN/OTHER	
PRESENT STREET ADDRESS				APT.#	CITY	STATE	ZIP CODE
AGE	D.O.B.	SOCIAL SECURITY #		RESIDENCE PHONE		CELL PHONE	
SEX	HEIGHT	WEIGHT	HAIR COLOR	EYE COLOR	PLACE OF BIRTH		
DISTINGUISHING MARKS: PHYSICAL DEFECTS, BIRTHMARKS, SCARS, ETC.							
DRIVERS LICENSE#		STATE		CLASS		EXPIRATION DATE	
EMAIL ADDRESS:							

2. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Please indicate which group you. (Check one).

American Indian	Oriental American	Caucasian
Black American	Spanish Surname or Spanish	Other

<i>CHECK ONE</i> MARITAL STATUS: MARRIED () SINGLE () ENGAGED () SEPARATED () DIVORCED () WIDOW ()							
3. NAME OF PRESENT SPOUSE				D.O.B.	SOCIAL SECURITY #		
HEIGHT	WEIGHT	HAIR COLOR	EYE COLOR	ADDRESS (IF DIFFERENT)			
4. COMPLETE THE FOLLOWING INFORMATION REGARDING EX-SPOUSE:							
NAME (MAIDEN/OTHER)					DATE OF BIRTH		
5. RELATIVES: LIST YOUR CHILDREN INCLUDING STEP / ADOPTED CHILDREN:							
NAME		DATE OF BIRTH			RESIDENCE		

Even though a relative is deceased, give all information requested and indicate last residence.

A. FATHER'S NAME	DATE OF BIRTH	RESIDENCE ADDRESS
MOTHER'S NAME	DATE OF BIRTH	RESIDENCE ADDRESS
B. STEPFATHER'S NAME	DATE OF BIRTH	RESIDENCE ADDRESS
STEPMOTHER'S NAME	DATE OF BIRTH	RESIDENCE ADDRESS
C. BROTHER'S NAME(S)	DATE OF BIRTH	RESIDENCE ADDRESS
SISTER'S NAME(S)	DATE OF BIRTH	RESIDENCE ADDRESS
D. FATHER-IN-LAW'S NAME	DATE OF BIRTH	RESIDENCE ADDRESS
MOTHER-IN-LAW'S NAME	DATE OF BIRTH	RESIDENCE ADDRESS
E. BROTHER-IN-LAW'S NAME(S)	DATE OF BIRTH	RESIDENCE ADDRESS

SISTER-IN-LAW'S NAME(S)	DATE OF BIRTH	RESIDENCE ADDRESS

List all relatives employed by the City of Youngsville or Police Department:

FULL NAME	RELATIONSHIP	DEPARTMENT

6. Residences: *(List all residences for the past ten (10) years beginning with your present address. Include off-base residences when in the service and/or dormitories when in college.)*

MONTH	YEAR	ADDRESS	CITY	STATE

7. Character References: *(List three (3) persons not employees or relatives who know you well enough to give current or former information about you.)*

NAME	ADDRESS (INCLUDE ZIP CODE)	HOME PHONE	BUSINESS PHONE	OCCUPATION

A. FROM	NAME OF EMPLOYER	JOB TITLE	NAME OF SUPERVISOR
TO	ADDRESS OF EMPLOYER	SALARY	TELEPHONE NUMBER

8. Employment History: List all jobs held in the past five (5) years regardless of length of time employed. Start with your present place of employment.

DESCRIPTION OF DUTIES	REASON FOR LEAVING

B. FROM	NAME OF EMPLOYER	JOB TITLE	NAME OF SUPERVISOR
TO	ADDRESS OF EMPLOYER	SALARY	TELEPHONE NUMBER
DESCRIPTION OF DUTIES	REASON FOR LEAVING		

C. FROM	NAME OF EMPLOYER	JOB TITLE	NAME OF SUPERVISOR
TO	ADDRESS OF EMPLOYER	SALARY	TELEPHONE NUMBER
DESCRIPTION OF DUTIES	REASON FOR LEAVING		

D. FROM	NAME OF EMPLOYER	JOB TITLE	NAME OF SUPERVISOR
TO	ADDRESS OF EMPLOYER	SALARY	TELEPHONE NUMBER
DESCRIPTION OF DUTIES	REASON FOR LEAVING		

E. FROM	NAME OF EMPLOYER	JOB TITLE	NAME OF SUPERVISOR
TO	ADDRESS OF EMPLOYER	SALARY	TELEPHONE NUMBER
DESCRIPTION OF DUTIES	REASON FOR LEAVING		

F. FROM	NAME OF EMPLOYER	JOB TITLE	NAME OF SUPERVISOR
TO	ADDRESS OF EMPLOYER	SALARY	TELEPHONE NUMBER
DESCRIPTION OF DUTIES		REASON FOR LEAVING	

9. Education: List your education, including high school, colleges, business and technical school:

SCHOOL NAME	ADDRESS	FROM	TO	GRADUATE
				YES () NO ()
				YES () NO ()
				YES () NO ()
				YES () NO ()
				YES () NO ()

10. Do you have any knowledge or training of business machines? If yes, please explain below:

11. Have you ever applied for a position with the Youngsville Police Department?

YES	NO	IF YES, EXPLAIN BELOW:

a. Have you ever applied for a position with another Law Enforcement Agency or other Government Agency?

YES	NO	IF YES, EXPLAIN BELOW:

12. Have you ever or do you now have any of the following illnesses:

ILLNESSES	YES	NO	ILLNESSES	YES	NO
SYPHILIS			TUBERCULOSIS		
DIABETES			CRAMPS IN LEGS		
CANCER			KNEE PROBLEMS		
KIDNEY TROUBLE			FREQUENT OR SEVERE HEADACHES		
HEART TROUBLE			DIZZINESS OR FAINTING SPELLS		
STOMACH TROUBLE			NERVOUS TROUBLE OF ANY SORT		
RHEUMATISM / ARTHRITIS			ANY DRUG OR NARCOTIC		
EPILEPSY			LOSS OF ARM, LEG, FINGER OR TOE		
EYE TROUBLE			CAR, TRAIN, SEA, OR AIR SICKNESS		
SWOLLEN OR PAINFUL JOINTS			WEAR GLASSES		
EXCESSIVE DRINKING			WEAR AN ARTIFICIAL EYE		
HIGH OR LOW BLOOD PRESSURE			WEAR HEARING AIDS		
AIDS			STUTTER OR STAMMER		
MULTIPLE SCLEROSIS			ATTEMPTED SUICIDE		

a. Have you ever had any operations within the past five (5) years?

YES	NO	IF YES, PLEASE EXPLAIN BELOW, GIVING DATE(S) AND TYPE OF SURGERY OR SURGERIES:

B. Do you have any other physical or emotional condition that would limit your job performance or endanger others?

YES	NO	IF YES, PLEASE EXPLAIN BELOW:

13. Do you or your spouse have any immediate civil/criminal action pending against you?

YES	NO	IF YES, PLEASE EXPLAIN BELOW:

a. Have you ever received a traffic citation or been involved in a traffic accident?

YES	NO	IF YES, PLEASE EXPLAIN BELOW:

b. Have you ever been arrested or convicted of a felony?

YES	NO	IF YES, PLEASE EXPLAIN BELOW:

c. List all misdemeanor arrests and/or convictions below:

DATE	CHARGE(S)	DETAINING OR ARRESTING AGENCY	PENALTY

14. Have you or your spouse ever had your wages garnished?

Yes No

a. Have you or your spouse ever been party to a small claims or other court action?

Yes No

b. If employed by the Youngsville Police Department, do you anticipate any income other than your incoming police income?

Yes No

c. Have you ever been refused a life, auto, health or other insurance policy?

Yes No

15. When the answer to any of the above questions is yes, please explain below:

16. List all organizations, clubs and social groups of which you are now, or have been a member:

17. If it became necessary, in the course of your police duties, to take a human life, would you have any reluctance to do so because of religious or other beliefs?

Yes No

18. Have you ever served in the Army, Navy, Marine Corps, Air Force, R.O.T.C., Coast Guard, Space Force or other military or semi-military organizations?

YES	NO	ORGANIZATION	ENLISTMENT DATE	DISCHARGE DATE	TYPE	RANK

Present draft classification:

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19. We are looking for a permanent employee and will make an investment in training. Is there any reason why you would not expect to finish training and stay with the department?

Yes No

20. Do you understand that the police academy training is a period selection that you must complete successfully, that you may be discharged from this school at any time, that you must submit yourself to strict discipline and that you may not have any other employment or attend any other school while a recruit in the police academy?

Yes No

21. Special skills and abilities:

22. Have you ever received compensation for injuries?

YES	NO	IF YES, EXPLAIN BELOW:
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	

23. Are you a United State citizen? Yes No

Equal Opportunity Employer

The Youngsville Police Department is an equal opportunity employer and complies with all applicable anti-discrimination laws. The department bases all decisions on employment to further the principle of equal employment opportunity by imposing only valid requirements for promotional opportunities. Further, all personnel actions such as compensation, benefits, transfers, and training, are administered without regard to race, creed, color, religion, sex, national origin, age, mental and physical condition, marital status, or political belief.

Certification, Acknowledgement of Conditions for Employment and Authority to Release Information

The Youngsville Police Department recruits, hires, trains, and promotes all persons without regard to race, color, sex, religion, national origin, marital and family status, political beliefs, and physical and mental disability, except in those instances where physical and mental abilities are a bona fide occupational qualification, and accommodation would constitute an undue hardship to the Police Department. It is further the policy of the Police Department to base all decisions on employment to further equal employment opportunity.

I am applying to the Youngsville Police Department for employment. To determine my eligibility for employment and for security clearance purposes, I hereby authorize and request that solicited entities or individuals furnish to the Youngsville Police Department all information, whether written or non-written, including opinions, that these entities and/or individuals may have or acquire concerning information given on this application form, as well as information regarding my character, reputation, and suitability for employment. This authorization includes, but is not limited to bank, credit, school, selective services, physical, hospital, or employer records, and releases all persons, organizations, corporations from any charges because of furnishing said information.

I hereby release, hold harmless, and indemnify from all liability the Youngsville Police Department, employees of the Youngsville Police Department, and the individuals, agencies, and/or entities who receive and supply information as noted above. I certify that all statements made on this application are true and complete to the best of my knowledge. I understand that information on this application will be subject to investigation and verification, and that any misrepresentation or material omission may cause my application to be delayed, rejected, disqualified, and/or subject me to dismissal from employment from the Youngsville Police Department.

I am aware that any misrepresentation or falsification made in connection with my obtaining employment with the Youngsville Police Department will be grounds for rejection or dismissal. The facts set forth in my application for employment are true and correct. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my previous personal and financial records through any investigative agencies or bureaus of your choice. In making this application for employment, I also understand that an investigative report may be made whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted.

I understand that nothing in this application or in the granting of an interview creates a contract between the Youngsville Police Department and myself for either employment or for providing any benefits. No promises have been made to me, and I understand that no such promise or guarantee is binding upon the Police Department unless made in writing by the Chief of The Youngsville Police Department and signed by me. If an employment relationship is established, I acknowledge that I will be required to submit to, and successfully complete a drug test, in depth criminal records check, financial background investigation, and a thorough physical examination, psychological test, including a mental history check to determine if I can perform the essential functions of the position for which I am applying with or without reasonable accommodations. I further understand that failure to comply with the prerequisites of employment, after the conditional offer of employment is accepted by me, will be treated as a rejection of the offer of employment.

I acknowledge that no consideration has been furnished to the Police Department for my employment other than my services, and I understand that employment with the Youngsville Police Department is strictly at will employment, and that I have the right to terminate my employment at any time, with or without cause, and that the Youngsville Police Department has the same right, as well as the right to transfer me to any division, department, section, or shift that the Chief of Police or his designee so chooses and at his sole discretion.

A photostatic copy of my signature shall be accepted as an original authorizing any person, firm, or organization to release all information to the Youngsville Police Department regarding the verification of information provided herein.

Signature of Applicant _____
Date

Print First, Middle, and Last Name

RECEIVED BY: _____
Name Position Date

