

## Pre-Employment Questionnaire Instruction Sheet

You must complete every section of this questionnaire. Incomplete questionnaires will not be processed. Please mark all sections not applicable with “N/A” and all sections not known with “Unknown.”

If additional space is needed for any section or question on the questionnaire, or if you wish to furnish additional information, please use the included “Continuation” sheets.

All applicable documents and diplomas must be submitted with this questionnaire.

This questionnaire is processed for eligibility only. Successful completion of this step in the employment process does not guarantee an interview or employment.

There are three (3) pages of this questionnaire that must be notarized. The Police Department can provide notary services for you free of charge for this process.

If you have any questions, contact the FAU Police Department at (561) 297-3500 to speak with a member of the recruitment and selection panel.

**REMEMBER - Falsifying information in this questionnaire, or in the interview, is grounds for dismissal and you will be removed from the selection process. A polygraph examination may be conducted!**

**FLORIDA ATLANTIC UNIVERSITY  
POLICE DEPARTMENT**

**Non-Sworn Civilian  
Pre-Employment Questionnaire**

---

Last Name	First Name	Middle Name
-----------	------------	-------------

---

Residence Address

---

City	State	Zip Code
------	-------	----------

---

Alternate Mailing Address (Only if Different From Above)

---

Residence Phone Number	Work Phone Number
------------------------	-------------------

---

Cell Phone Number	E-Mail Address
-------------------	----------------

---

Social Security Number	Date of Birth
------------------------	---------------

## Secondary Information Worksheet

1. Please state your current driver's license State and number:  
\_\_\_\_\_
2. Please list all other driver's license States and numbers you have previously held:  
\_\_\_\_\_
3. Are you a high school graduate or GED recipient: High School GED  
Please name the institution; with full address, phone number, and date that this was awarded:  
Institution Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Date Awarded: \_\_\_\_\_
4. Do you have a college degree? Yes No
5. If yes, type of degree - year of degree, and institution name (with full address and phone):  
Institution Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Date Awarded: \_\_\_\_\_  
Degree Title and Type: \_\_\_\_\_  
If no, do you have any college credits? Yes No If yes, how many: \_\_\_\_\_
6. Are you a United States citizen and or eligible to work in the United States? Yes No
7. What is your City and State of birth (Country if outside the U.S.)?  
\_\_\_\_\_

8. What is your: Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

9. Do you have any tattoos? Location and Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. What is your current marital status:

Never Married \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_

Separated \_\_\_\_\_ Widowed \_\_\_\_\_

11. What is your spouse's full name: \_\_\_\_\_

12. Please list all children's names, including step or adopted children:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. Did you ever serve in the armed forces: Yes No

If yes, list branch of service, MOS (describe job function), and final pay grade, and dates:

\_\_\_\_\_  
\_\_\_\_\_

14. Please list all schools attended or certifications held:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

15. Starting with the most current, list all residences for the past ten (10) years:

Month/Year                      From: \_\_\_\_\_                      To: Present

Street Address: \_\_\_\_\_

City: \_\_\_\_\_                      County: \_\_\_\_\_

State: \_\_\_\_\_                      Zip: \_\_\_\_\_                      Do you own or rent?    Own    Rent

Please list the law enforcement agency that had jurisdiction at this location:

\_\_\_\_\_

Month/Year                      From: \_\_\_\_\_                      To: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_                      County: \_\_\_\_\_

State: \_\_\_\_\_                      Zip: \_\_\_\_\_                      Did you own or rent?    Own    Rent

Please list the law enforcement agency that had jurisdiction at this location:

\_\_\_\_\_

Month/Year                      From: \_\_\_\_\_                      To: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_                      County: \_\_\_\_\_

State: \_\_\_\_\_                      Zip: \_\_\_\_\_                      Did you own or rent?    Own    Rent

Please list the law enforcement agency that had jurisdiction at this location:

\_\_\_\_\_

Month/Year From: \_\_\_\_\_ To: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Did you own or rent? Own Rent

Please list the law enforcement agency that had jurisdiction at this location:

\_\_\_\_\_

Month/Year From: \_\_\_\_\_ To: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Did you own or rent? Own Rent

Please list the law enforcement agency that had jurisdiction at this location:

\_\_\_\_\_

16. Please list at least three (3) personal or character references with all information:  
*(Do not include relatives, former employers, or persons living outside the United States. List only character references that have definite knowledge of your qualifications and fitness for the position for which you are applying. Use **Home** addresses only.)*

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Years Known: \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Years Known: \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Years Known: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Years Known: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Years Known: \_\_\_\_\_

Email Address: \_\_\_\_\_

In the following section, please explain **ANY** yes answers on the included continuation sheets and reference the question number

## Personal History Questionnaire

- |   |     |    |
|---|-----|----|
| 1. Has your driver's license (from any State) ever been suspended or revoked?   | Yes | No |
| 2. Have you ever been refused a driver's license from any State?  | Yes | No |
| 3. Have you ever had any restrictions placed on your license due to traffic offenses?   | Yes | No |
| 4. Have you ever been involved in an automobile accident?<br><i>If yes, give approx. date, location (City &amp; State), if you were cited (given a ticket or citation), and state if you were at fault or not at fault. Also state if this was an "on-duty" accident while employed and working as a law enforcement officer.</i> | Yes | No |
| 5. Have you ever been charged with or issued a traffic citation / ticket?<br><i>If yes, give approx. date, location (City &amp; State), reason for the citation (i.e. speeding / stop sign), and disposition (paid fine, attended driver improvement school, plead not guilty - with results).</i>                                | Yes | No |
| 6. Have you ever been terminated or "fired" from a job for <b>any</b> reason?   | Yes | No |
| 7. Have you ever been asked to resign from any job by your employer?  | Yes | No |
| 8. Have you ever received a counseling session (written or oral) from any employer?   | Yes | No |
| 9. Have you ever received an oral or written reprimand from any employer?   | Yes | No |
| 10. Have you ever been suspended from any employment?   | Yes | No |
| 11. Other than the above questions, have you ever had <b>any</b> other forms of discipline taken against you from any employer?   | Yes | No |
| 12. Regarding the above questions (7 -11), are you withholding information?   | Yes | No |
| 13. Have you ever been fingerprinted by a law enforcement agency for <b>any</b> reason?   | Yes | No |
| 14. Have you ever submitted an application with another law enforcement agency?<br><i>If yes, list all agencies you have submitted an application with in the past ten (10) years. Specifically list all agencies you are currently</i>   |     |    |



<i>“In Process” with and give status. Also, if not hired by an agency you submitted an application with, state reasons.</i>	Yes	No
15. Have you ever received a polygraph examination? <i>If yes, give approx. dates, why you were examined, what agency administered the exam, and the results of the test.</i>	Yes	No
16. Have you ever been dropped from employment eligibility due to the unfavorable results of a polygraph examination?	Yes	No
17. Have you ever been arrested or charged by <b>any</b> law enforcement agency, including any arrest or incident where the records were sealed or expunged?	Yes	No
18. If you served in the military, do you have you had any disciplinary action taken against you, including; Article 15's, Captain’s Mast, or any other such types of internal judicial processes?	N/A	Yes No
19. Have you ever been the subject of a Grand Jury investigation?	Yes	No
20. Were you ever considered a suspect or in <b>any</b> way the subject or focus of a police or criminal investigation?	Yes	No
21. Has a law enforcement agency ever been called to your location due to a domestic violence situation (founded or unfounded)?	Yes	No
22. Has your probation period ever been terminated or extended by any employer?	Yes	No
23. Have you ever been sued by anyone (a civil court defendant)?	Yes	No
24. Have you ever used or “tried” an unlawful controlled substance including prescription drugs not prescribed to you?	Yes	No
25. Have you ever unlawfully sold, delivered, manufactured, smuggled, or trafficked in controlled substances?	Yes	No
26. Have you ever possessed illegal substances or drug?	Yes	No
27. Have you ever stolen money, property, or merchandise from a place you worked?	Yes	No
28. Have you ever committed or been involved in any serious undetected crime?	Yes	No
29. Is there anything in your background for which you could be blackmailed?	Yes	No
30. Is there anything in your background which could embarrass this department?	Yes	No

- |  |     |    |
|--|-----|----|
| 31. Have you ever physically or sexually abused another person?  | Yes | No |
| 32. Have you ever had, used, or been “issued” another name (first, last, or middle)?   | Yes | No |
| 33. Have you ever used or been issued another Social Security Number?  | Yes | No |
| 34. Have you ever falsified an official report of any kind?  | Yes | No |
| 35. Have you ever taken any evidence or found property for your personal use?  | Yes | No |
| 36. Have you ever lied under oath?   | Yes | No |
| 37. Have you ever taken a bribe of any kind?   | Yes | No |
| 38. Are you now, or have you ever been, a member of any organization, association, movement group, or combination of persons which advocates the overthrow of our constitutional form of government, or which has adopted the policy of advocating or approving the commission of acts of force or violence to deny other people their rights under the Constitution of the United States or which seeks to alter the form of government of the United States by unconstitutional means? | Yes | No |
| 39. Are you now, or have you ever been, affiliated or associated with any organization of the type described above, as an agent, official, or employee?  | Yes | No |
| 40. Are you now associating with, or have you associated with any individuals, including relatives, who you know or have reason to believe are, or have been, members of any organizations identified above?   | Yes | No |
| 41. Is there any other unasked information which would be important to us in determining your suitability for employment (positive or negative)?   | Yes | No |







FLORIDA ATLANTIC UNIVERSITY  
POLICE DEPARTMENT  
777 GLADES ROAD, CO-69  
BOCA RATON, FL 33431  
P 561.297.3500  
F 561.297.4888  
[fau.edu/police](http://fau.edu/police)

### APPLICANT CERTIFICATION

I understand my appointment or employment will be contingent upon the results of a complete background investigation. I am aware that any omission, falsification, misstatement, or misrepresentation will be the basis for my disqualification as an applicant or my dismissal from the FAU Police Department. I agree to the conditions and certify all statements made by me on this application and questionnaires are true, correct, and complete to the best of my knowledge. I further fully understand and consent to a polygraph examination concerning the veracity of my responses to the information requested on the application or which is discovered as a result of the background investigation, or any medical or psychological and fitness assessment, physical fitness assessment, or drug test. I also understand that I will be fingerprinted.

I agree to conform to the rules, regulations, and orders of the FAU Police Department and acknowledge that these rules, regulations, and orders may be changed, interpreted, withdrawn, or added to by the Police Department, at its discretion, at any time and without prior notice to me.

Applicant's Full Name: \_\_\_\_\_  
(Printed or Typed)

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

State of Florida

County of \_\_\_\_\_)

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

by \_\_\_\_\_ who has produced a Driver's License as identification and did take an oath.

Notary's Name: \_\_\_\_\_ Title or Rank: \_\_\_\_\_

Notary's Signature: \_\_\_\_\_

Boca Raton · Fort Lauderdale · Dania Beach · Davie · Jupiter · Port St. Lucie  
A Member of the State University System of Florida  
*An Equal Opportunity / Access / Affirmative Action Institution*

---

COMMITMENT · PROFESSIONALISM · INTEGRITY · RESPECT · ACCOUNTABILITY · SERVICE



FLORIDA ATLANTIC UNIVERSITY  
POLICE DEPARTMENT  
777 GLADES ROAD, CO-69  
BOCA RATON, FL 33431  
P 561.297.3500  
F 561.297.4888  
[fau.edu/police](http://fau.edu/police)

### AFFIDAVIT

I do solemnly swear or affirm that the following information is true and correct to the best of my knowledge:

That I have never been convicted of a misdemeanor crime or domestic violence, not including those convictions that have been expunged or otherwise set aside or pardoned, as defined below:

- Is a misdemeanor under Federal or State law; and
- Has, as an element, the use or attempted use of physical force, or the threatened use of a deadly weapon, committed by a current or former spouse, parent, or guardian of the victim, by a person with whom the victim shares a child in common, by a person who is cohabiting with or has cohabited with the victim as a spouse, parent, or guardian, or by a person in a similar situation to a spouse, parent, or guardian of the victim.

Applicant's Full Name: \_\_\_\_\_  
(Printed or Typed)

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

State of Florida

County of \_\_\_\_\_)

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
by \_\_\_\_\_ who has produced a Driver's License as identification  
and did take an oath.

Notary's Name: \_\_\_\_\_ Title or Rank: \_\_\_\_\_

Notary's Signature: \_\_\_\_\_

Boca Raton · Fort Lauderdale · Dania Beach · Davie · Jupiter · Port St. Lucie  
A Member of the State University System of Florida  
*An Equal Opportunity / Access / Affirmative Action Institution*

COMMITMENT · PROFESSIONALISM · INTEGRITY · RESPECT · ACCOUNTABILITY · SERVICE



FLORIDA ATLANTIC UNIVERSITY  
POLICE DEPARTMENT  
777 GLADES ROAD, CO-69  
BOCA RATON, FL 33431  
P 561.297.3500  
F 561.297.4888  
[fau.edu/police](http://fau.edu/police)

**FAIR CREDIT REPORTING ACT (FCRA) DISCLOSURE**

The Florida Atlantic University Police Department may obtain one or more consumer reports, including but not limited to, credit reports, about you, for employment purposes as defined by the Fair Credit Reporting Act (FCRA), including for determinations related to initial employment, reassignment, promotion, or other employment related actions.

**Consumer's Authorization for FAU to Obtain Consumer Report(s)**

I have read and understand the above stated disclosure. I authorize the Florida Atlantic University Police Department to obtain one or more consumer reports on me, for employment purposes, as described in the above disclosure.

Applicant's Full Name: \_\_\_\_\_  
(Printed or Typed)

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Boca Raton · Fort Lauderdale · Dania Beach · Davie · Jupiter · Port St. Lucie  
A Member of the State University System of Florida  
*An Equal Opportunity / Access / Affirmative Action Institution*

---

COMMITMENT · PROFESSIONALISM · INTEGRITY · RESPECT · ACCOUNTABILITY · SERVICE