



**City of
Rehoboth Beach
Police
Department**

Employment Application & Eligibility Standards

Form 1000A

Position Applied For (check all that apply)

Full Time Police Officer

Seasonal Police Officer

Applicants for all positions are considered without regard to race, color, religion, sex, national origin, age, marital status, or the presence of disabilities.

Applicant Information

Full Name:		Nickname, Alias, Maiden Name (Specify):			
Date of Birth	Position Applied For:		Date of Application:		
Residence Address (Street):					
Residence Address (City):	Residence Address (State):	Residence Address (Zip Code):	Residence Address: (County if in DE):		
Mailing Address (If Different from Residence; Street):					
Mailing Address (City):	Mailing Address (State):	Mailing Address (Zip Code):	Mailing Address (County if in DE):		
Home Phone:	Cell Phone:		Work Phone:		
Social Security Number:	Driver's License Number & State:		Email Address:		
Are you employed now?		Yes	No	May we contact your employer?	
				Yes	No
Current Employer(s):		Position:		Phone:	
Current Employer(s):		Position:		Phone:	
Have you ever applied for employment with the Rehoboth Beach Police Department?					
Yes No					
If yes, when and what position?		Date:		Position:	
Police Experience:					
None Full-Time Part-Time Seasonal Military Police					
Department:			Dates of Employment (MM/DD/YY - MM/DD/YY):		
Position/Rank:		Reason for Leaving:			
Armed Forces:		Yes	No	Active Duty	Reserve
Honorable Discharge:			Yes	No	N/A
Dates of Service (MM/DD/YY - MM/DD/YY):			Branch:		
List any Professional Licenses, Certifications, and/or Special Skills:					



Eligibility Standards Guide

The Rehoboth Beach Police recruitment process for Police Officers and Seasonal Police Officer is a competitive endeavor and requires our agency to identify highly qualified applicants for employment consideration. Our community expects and deserves the employment of only those who possess the highest degree of judgment, maturity, integrity and credibility.

The Rehoboth Beach Police will accept applications throughout the year. The Employment Application AND the Eligibility Standards Guide must be completed and submitted in order to be considered as an Applicant.

The following is a guide for applicant eligibility standards. If you do not meet the minimum eligibility standards, you will not be considered for the process. PLEASE INITIAL NEXT TO EACH ELIGIBILITY STANDARD TO INDICATE YOU MEET AND/OR UNDERSTAND THE STANDARD.

Delaware Council on Police Training Requirements

	United State Citizen (native or naturalized)
	19 years or older for Seasonal Police Officer
	21 years or older for Police Officer
	No impediment of the senses
	Acuity of vision not more than 20/200 corrected to 20/20 in each eye
	Ability to distinguish between the colors of red, green, and amber; shall have no pathology of the eyes; possess acceptable depth perception
	Possess normal hearing in both ears per current standard
	Have no physical deformities, which would be detrimental to proper performance of police duties
	Must pass a drug-screening test prior to appointment or attendance of a Police Training Academy
	Weight must be proportionate to height and build or body fat percentage
	Honorable discharge or positive conduct during military service
	No felony or Misdemeanor conviction prohibiting the possession of a firearm
	Valid driver's license



Education Requirement

	Must possess high school diploma or G.E.D.
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Fitness Testing

	Must be able to achieve minimum standards during fitness testing as outlined below			
Test/Age	20-29 Years	30-39 Years	40-49 Years	50-59 Years
Push-ups (Male/Female)	24/11	19/9	13/7	10/5
Sit-ups (Male/Female)	35/28	31/21	26/16	20/11
1.5 Mile Run (Male/Female)	13:25/16:43 Minutes	14:10/17:38 Minutes	15:00/18:39 Minutes	16:46/20:55 Minutes
300 Meter Run (Male/Female)	64/76 Seconds	65/86 Seconds	81/109 Seconds	89/132 Seconds

Employment Acknowledgements

	The Police Department is a 24 hours, 7 day a week operation. Officers are expected to work rotating day and night shifts and holidays.
	The Police Department is a para-military organization. Officers are expected to wear an authorized uniform and maintain the department's grooming standards.



Automatic Disqualifications

Applicants must acknowledge the application disqualification standards. Please initial next to each standard to signify that you meet and understand them as they are written.

	Any intentionally false statements made on or regarding this application by the applicant, either verbally or in writing, will be an automatic disqualification.
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Criminal Record and History

	Any felony or domestic violence conviction is an automatic disqualification.
	Any arrest or conviction that indicates a pattern of disregard for the law and/or frequent behavior of an undesirable nature may result in disqualification.
	Arrest or conviction for all other crimes and offenses are subject to review at the time the application is submitted.
	Arrest for any offense must be expunged, and conviction of any offense must be pardoned, prior to submitting an application.
	Any criminal activity that would be considered a Felony under Federal Law of the State in which the activity occurred is a disqualification.
	Any commitments for a mental disorder to any hospital, mental institution or sanitarium that would prevent the applicant from possessing a deadly weapon (firearm) as provided in section 1448, Title 11 of the Delaware Criminal code is a disqualification.

Drug Usage and Activity

	Any use of mind-altering hallucinogenic drugs, such as LSD, PCP, etc., heroin or any of its derivatives is an automatic disqualification.
	Any use of an illegal drug within one year prior to submitting an application is an automatic disqualification.
	Excessive experimental use of Marijuana and/or more than two (2) uses of Cocaine or their derivatives may result in disqualification.
	The sale or delivery of any non-narcotic or narcotic controlled substance as defined in Title 16 of the Delaware Criminal Code after the age of 21 will be an automatic disqualification.
	Any use of all other illegal drugs will be subject to review at the time application is submitted.
	All other drug use, including illegally using prescribed drugs, is subject to review at the time the application is submitted.
	Any use of a controlled substance after having filed an application for employment as a Police Officer may result in a disqualification.
	Any history or pattern of extensive use or abuse of a controlled substance or a history of extensive use or abuse of alcohol without corresponding evidence of rehabilitation will result in an automatic disqualification.



Driving History and Activity

	Must possess a current and valid driver's license and at least one year of driving experience.
	A DUI conviction within the previous five (5) years is an automatic disqualification.
	Any driving record/history that indicates poor, dangerous, or otherwise undesirable driving habits may result in disqualification.
	Any driving record/history that indicates that the operation of an automobile by the applicant might endanger the safety of the public may result in disqualification.
	Any driving record/history that indicates that the applicant has been found to use narcotics or other drugs or alcoholic beverages that impairs their ability to operate a motor vehicle may result in disqualification.
	Any license suspension or revocation within three (3) years of the closing date of the job announcement is an automatic disqualification.
	Any alcohol-related driving arrests and overall driving history will be subject to review at the time the application is submitted.
	Any motor vehicle conviction for Failing to Stop at the command of a Police Officer, Leaving the scene of a Personal Injury Accident, Criminal Negligence resulting in death, homicide, or assault will result in an automatic disqualification.

Employment Consideration

If you fail to meet any of the above criteria, you will be notified that you are no longer being considered for employment with the Rehoboth Beach Police Department. You may reapply once you have met the above criteria during the next hiring process.



Applicant History

Please complete the following section as accurately as possible. You may be asked to clarify or obtain additional information for incomplete entries prior to your application being accepted.

Have you ever been arrested by the Police? Yes No If yes, provide the details below

Crime Charged:	Arresting Police Agency:	Date:	Disposition of the Case:
Crime Charged:	Arresting Police Agency:	Date:	Disposition of the Case:
Crime Charged:	Arresting Police Agency:	Date:	Disposition of the Case:
Crime Charged:	Arresting Police Agency:	Date:	Disposition of the Case:

Have you ever possessed a driver's license other than previously listed? Yes No If yes, list below

License Number:	State:	Approximate Dates (MM/DD/YY - MM/DD/YY):	License Number:	State:	Approximate Dates (MM/DD/YY - MM/DD/YY):

Has your license ever been suspended or revoked? Yes No If yes, provide the reason below

Have you ever been issued a traffic citation? Yes No If yes, provide the details below

Location (City & State):	Approximate Date:	Nature of Violation:	Penalty or Disposition:
Location (City & State):	Approximate Date:	Nature of Violation:	Penalty or Disposition:
Location (City & State):	Approximate Date:	Nature of Violation:	Penalty or Disposition:
Location (City & State):	Approximate Date:	Nature of Violation:	Penalty or Disposition:
Location (City & State):	Approximate Date:	Nature of Violation:	Penalty or Disposition:

Have you ever been involved in a motor vehicle collision? Yes No If yes, provide details below

Location:	Date:	Cause of Collision:
Injury or Non-Injury	Was there a Police Investigation?	Who was Legally at Fault?
Location:	Date:	Cause of Collision:
Injury or Non-Injury	Was there a Police Investigation?	Who was Legally at Fault?



Applicant History Continued

Have you ever used illegal drugs or prescribed drugs in an illegal manner? Yes No If yes, provide details below

Type of Drug:	Approximate Date:	Circumstances Surrounding Use:
Type of Drug:	Approximate Date:	Circumstances Surrounding Use:
Type of Drug:	Approximate Date:	Circumstances Surrounding Use:
Type of Drug:	Approximate Date:	Circumstances Surrounding Use:
Type of Drug:	Approximate Date:	Circumstances Surrounding Use:
Type of Drug:	Approximate Date:	Circumstances Surrounding Use:

Have you ever been reported as a Missing Person or Runaway? Yes No If yes, provide details below

Have you ever been fingerprinted by a Police Agency other than for an arrest? Yes No If yes, provide details below

Police Agency:	Date:	Purpose:
Police Agency:	Date:	Purpose:

Have you ever been placed on probation or required to pay a court ordered fine? Yes No If yes, provide details below



Applicant History Continued

Please list all previous employers or additional current employers for the previous five years.

Employer:		Position:	Phone:
Dates of Employment (MM/DD/YY - MM/DD/YY):	Supervisor:	Reason for Leaving:	
Employer:		Position:	Phone:
Dates of Employment (MM/DD/YY - MM/DD/YY):	Supervisor:	Reason for Leaving:	
Employer:		Position:	Phone:
Dates of Employment (MM/DD/YY - MM/DD/YY):	Supervisor:	Reason for Leaving:	
Employer:		Position:	Phone:
Dates of Employment (MM/DD/YY - MM/DD/YY):	Supervisor:	Reason for Leaving:	
Employer:		Position:	Phone:
Dates of Employment (MM/DD/YY - MM/DD/YY):	Supervisor:	Reason for Leaving:	

Please list all high schools, vocational schools, colleges, universities, or other accredited educational institutions you have attended.

School Name:	Dates of Attendance (MM/DD/YY - MM/DD/YY):	Highest Grade/Diploma/Degree Earned:
School Address:		School Phone:
School Name:	Dates of Attendance (MM/DD/YY - MM/DD/YY):	Highest Grade/Diploma/Degree Earned:
School Address:		School Phone:
School Name:	Dates of Attendance (MM/DD/YY - MM/DD/YY):	Highest Grade/Diploma/Degree Earned:
School Address:		School Phone:
School Name:	Dates of Attendance (MM/DD/YY - MM/DD/YY):	Highest Grade/Diploma/Degree Earned:
School Address:		School Phone:

Affirmation of Content

I hereby certify that all statement made in this application are true and complete. I understand that any misstatements or omissions of material facts will subject me to disqualification or removal from the Rehoboth Beach Police Department's hiring process.

Signature:	Date:
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**City of
Rehoboth Beach
Police
Department**

**Authorization & Consent for Release of Information
Form 1000C**

The City of Rehoboth Beach requires, as a condition of employment and/or continued employment that all applicants consent to and authorize a verification of the information submitted on their application, resume or background packet. **Please read this statement carefully.**

In consideration for employment and internships, all applicants must consent to and authorize a pre-employment verification of background information. Consideration for employment is contingent upon the results of this reference and background investigation, which may include verifications of education and employment history, credit history, motor vehicle records, personal references, acquaintances, and family members, a review of local, county, state, and federal agencies and court records, and/or other information as deemed necessary to fulfill the job requirements.

This Authorization and Consent for Release of Information gives my permission to the City of Rehoboth Beach and its designated agent(s), to the full extent permitted by law, to conduct a reference and background investigation. The City will utilize the results of this process to determine eligibility for employment under the City's employment policies and standards set forth by the Delaware Council on Police Training. All information will be proprietary and kept as confidential as practicable. The information obtained by the City will not be provided to any parties other than the City, its legal representation and insurance companies, a Delaware Council on Police Training approved police academy, the Delaware Council on Police Training, or any law enforcement agency for normal police activity/operations [including criminal investigations] without a waiver signed by you.

I, the undersigned, do hereby certify that the information provided by me in my application for employment, resume, background packet, or in verbal discussion relating to my consideration for employment or an internship is true, correct and complete to the best of my knowledge and understand that omission and misstatements may be cause for rejection of my application, removal of my name from any eligibility lists, or discharge from City employment. I hereby authorize the City of Rehoboth Beach or its designated agent(s) to: (1) investigate the truthfulness of all my statements made on my application and background packet, or verbal statements made by me in the interview process, (2) conduct any verification of my education, employment, personal, and motor vehicle records, and to receive any criminal conviction history record and/ or police contact information relating to me which may be on file with any local, state, county, or federal criminal justice agencies; and (3) disclose verbally or in writing the results of any investigation with authorized employees or agents of the City. I understand that if I am employed, any false statements will be considered as cause for dismissal from employment.

Internal Use Only

File Name: _____



**Authorization & Consent for Release of Information
Form 1000C**

Further, I authorize the procurement of any other information which relates to my background, character, and personal reputation, which may be deemed relevant to my employment in accordance with state and federal laws.

I have read and understand the Authorization and Consent for Release of Information form. The original or copy of this document serves as my valid authorization to any and all persons, educational institutions, past and/or current employers, organizations, law enforcement or criminal records agencies, and other agencies to release information about me to the City or its designated agent(s) and hereby release and hold harmless all such persons, institutions, agencies, employers, and organizations providing such information from liability and any or all claims and damages connected with providing any requested information. In the event I receive a conditional offer of employment, the above shall also pertain to matters including medical factors, psychological factors, truth verification testing, and physical fitness assessment.

I further agree to indemnify, discharge, and forever hold harmless the City of Rehoboth Beach, its associates, employees, agents, directors, officers and their heirs and assigns, to the full extent permitted by law, from any and all damages, claims, losses, liabilities, costs, and expenses (including but not limited to attorney's fees) incurred as a direct or indirect result of any lawsuit or administrative proceeding brought against the City of Rehoboth Beach, its agents, employees, associates, directors, officers, and their heirs and assigns, related directly or indirectly to the disclosure of any such information or so such investigation.

I understand that my employment is conditioned upon a suitable background investigation and may have other conditions as well such as a pre-employment medical exam, hearing and eye screening, drug testing and truth verification testing.

I understand that if I am permitted to begin my employment before the results of a medical examination, drug screen, hearing and eye test, reference check, consumer report, or investigative report are complete, my continued employment is contingent upon those results, as well as my ability to perform the duties of my position with or without reasonable accommodation.

In testimony that I make this agreement with the City of Rehoboth Beach knowingly and willingly, and that I have given careful consideration to the terms and/or conditions set forth in this **five page document**, I hereby set my signature to indicate that I agree to the terms and conditions perpetually and that I cannot elect to rescind the permissions and/or the consent agreed to in this document.

Internal Use Only

File Name: _____



**Authorization & Consent for Release of Information
Form 1000C**

_____ Full Legal Signature

_____ Date

_____ Full Printed Name

_____ Date of Birth

_____ Social Security Number

_____ Driver's License State & Number

_____ Expiration Date

_____ Witnessed

_____ Date

Internal Use Only

File Name: _____



Terms and Conditions of Employment

Ownership of Work Product. I understand that except as is otherwise specified, all copyrights, patents, trade secrets, or other intellectual property rights associated with any works of authorship, ideas, concepts, techniques, or inventions developed or created during the course of performing services (collectively, the “Work Product”) shall belong exclusively to the City of Rehoboth Beach and shall, to the extent possible, be considered a work made for hire for the City of Rehoboth Beach with the meaning of Title 17 of the United States Code. All copyrights or other intellectual property rights pertaining thereto are automatically assigned without any requirement of further consideration, to the City of Rehoboth Beach, Delaware.

I acknowledge and accept that medical certification is required for employment. I understand that if I am selected for employment, I must pass a medical examination conducted by a physician designated by the City of Rehoboth Beach. I understand and accept that I will be required to sign a consent for medical screening and drug screening urinalysis as part of the examination. I also understand that failure to pass either the medical certification or the drug screening urinalysis will result in my not being hired, or subsequently terminated.

I understand that the City of Rehoboth Beach will pay for drug testing. I understand that if the test result is positive, if I fail to or refuse to provide a specimen for the analysis at the time requested, or if the specimen shows any sign of adulteration or substitution, the offer will be revoked, and I will not be considered for future employment.

I understand and agree that (a) the information I have provided is accurate to the best of my knowledge and subject to verification by the City of Rehoboth Beach and (b) a material misrepresentation or deliberate omission of fact may be justification for refusal of employment or, if employed by the City of Rehoboth Beach, dismissal.

I understand that if I am hired by the City of Rehoboth Beach, the City shall require verification of my identity and eligibility for employment in the United States.

I understand I must successfully complete a Delaware Council on Police Training certification course at the approved police academy to remain employed with the City of Rehoboth Beach.

I understand that I must successfully complete a Field Training program after successful completion of the approved police academy and a probation period before acquiring regular status.

I understand that the City of Rehoboth Beach’s policy restricts activities and relationships that create an actual or perceived conflict of interest with the City of Rehoboth Beach’s interest. Such conflicts may affect a person’s employment or continued employment at the City of Rehoboth Beach.

I understand that nothing contained in this waiver, any application, granting of an interview is intended to create an employment contract. No promises of employment have been made to me, and I understand that no such promises are binding upon the City of Rehoboth Beach unless made in writing.

Internal Use Only

File Name: _____



**Authorization & Consent for Release of Information
Form 1000C**

I understand that employment with the City of Rehoboth Beach is at will of the employer. I understand no offer of employment, benefit, or statement of work conditions, rules, or regulations should be interpreted as an implied contract for continuing employment.

Full Legal Signature

Date

Full Printed Name

Date of Birth

Witnessed

Date

Internal Use Only

File Name: _____



**City of
Rehoboth Beach
Police
Department**

**Authorization Release for Background Investigation
Form 1000D**

- TO:
- Any Physician, Psychologist, Psychiatrist, Dentist, Hospital, and Medical Association;
 - The U.S. Armed Forces, Maritime Service, Veteran’s Administration, Selective Service Administration;
 - Any Academic Dean, Registrar, Principal, Guidance Counselor, or authorized person at any: School, College, University, Business School, Trade School, Elementary or High School;
 - Any local, State or Federal Law Enforcement Agency;
 - Any Past or Present Employer;
 - Any Internal Affairs Division;
 - Any Credit Bureau or Retail Merchants Association;
 - Any Insurance Company

I, _____, have applied for employment with the Rehoboth Beach Police Department. I am aware that my entire background will be thoroughly investigated and I hereby authorize and request the release of any and all information you have that concerns me, including academic transcripts and disciplinary matters, to a representative of the Rehoboth Beach Police. This authorization, or a reproduction thereof, shall be valid for a period of one year from the date of execution of this document.

Date of Birth

Place of Birth (City & State)

Social Security Number

Residence Address (Street)

Residence Address (City)

Residence Address (State)

Residence Address (Zip Code)

Signature

Date

Printed Full Name

Driver’s License Number and State

Witnessed

Date

Internal Use Only

File Name: _____



**City of
Rehoboth Beach
Police
Department**

**Authorization Release of Credit History Information
Form 1000E**

The Rehoboth Beach Police Department utilizes many sources of information during the background investigations component of our employment process. Use of consumer credit reporting information is a very valuable tool and you should understand that this agency is required to obtain a separate and distinct authorization from you in order for this agency to obtain consumer credit reporting history from a contracted consumer credit reporting agency. Without this signed and executed authorization, we will be unable to process your application for employment with this agency.

I do hereby authorize the Rehoboth Beach Police Department to review and obtain a full disclosure of all consumer credit history information and/or reports concerning myself for employment purposes only, whether said records are public or private, and including those which may be deemed to be of a privileged or confidential nature. I further understand that material contained in any of my consumer credit history reports may be a basis for the denial of employment with the Rehoboth Beach Police Department.

Full Legal Signature

Date

Full Printed Name

Date of Birth

Witnessed

Date

Internal Use Only

File Name: _____



**City of
Rehoboth Beach
Police
Department**

**HIPAA – Medical Information Release
Form 1000F**

Employee Authorization for Use of Protected Health Information

I, _____, hereby authorize the release of the protected health information, listed below, to the Rehoboth Beach Police Department.

- Health and Fitness Assessment and Fitness-for-Duty Examination results.
- Psychological Evaluation results.
- Truth Verification testing results.
- Drug and alcohol test results for employment purposes, including random testing
- Results of CDL examination for purposes of driving town-owned vehicles

I understand that this Authorization will permit the Rehoboth Beach Police Department to use or disclose the identified medical information for employment-related purposes beyond treatment, payment, or healthcare operations as provided by the Health Insurance Portability & Act of 1996 (HIPAA).

I understand that I may revoke this authorization at any time by providing written notification to the Rehoboth Beach Police Department. The revocation will be effective on the date it has been received and processed by the City of Rehoboth Beach. I understand that the revocation does not apply to actions taken in reliance upon this authorization prior to the effective date of revocation. This Authorization shall remain in effect during my employment with City of Rehoboth Beach and for a period of six months thereafter.

I understand that the information used or disclosed pursuant to this Authorization may be subject to re-disclosure by the named recipient, and may no longer be protected by HIPAA’s privacy rules after the authorized disclosure.

Full Legal Signature

Date

Full Printed Name

Date of Birth

Witnessed

Date

Internal Use Only

File Name: _____



**City of
Rehoboth Beach
Police
Department**

**Authorization & Consent for Release of Liability
Form 1000G**

I, _____, **(PRINT NAME)** for myself, for my spouse, legal representatives, heirs, successors and assigns hereby releases, waives and discharges The City of Rehoboth Beach, a municipal corporation of the State of Delaware, its officers, agents and employees, successors and assigns, including, without limitation, members of its Police Department, hereinafter collectively referred to as “releasees” from any and all liability for any injury and/or for any or all loss of damages and/or any claims of damages resulting therefrom on account of injury to my person or property, including injury resulting in my death, whether caused by the negligence of the releasees or otherwise, arising from my participating in any athletic exercise or other physical test being taken by me in connection with my participation in taking the tests required to qualify for the position of full time police officer with The City of Rehoboth Beach Police Department.

I hereby expressly agree that the release is intended to be as broad as permitted by the laws of the State of Delaware and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue to be in full legal force and effect.

Full Legal Signature

Date

Full Printed Name

Date of Birth

Witnessed

Date

ID Checked: (Check Box)

Internal Use Only

File Name: _____