



APPLICATION FOR EMPLOYMENT

KENTUCKY STATE POLICE

919 Versailles Road
Frankfort, Kentucky 40601

HAZARDOUS DEVICES INVESTIGATOR

Answer each item completely and accurately. **Applications will not be accepted without a certified copy of your birth certificate, a photocopy of your driver's license, along with other documents or transcripts as specified on this application.** Insufficient documentation or incomplete answers will cause a delay in processing of your application. False answers will lead to dismissal.

Vacancy Number _____

Applicant Name _____
Last First Middle Maiden

Mailing Address _____
Street /P.O. Box City County State Zip Code

Telephone _____ Date of Birth _____
Home Work Cell Month Day Year

Social Security Number _____ Are you at least 21 years of age? Yes No

E-mail Address _____

US Citizenship Acquired By Birth Marriage Naturalization

Valid Driver's License Yes No Valid Commercial Driver's License Yes No

License State and Number _____ If yes, what class _____ What endorsement? _____

Has your license or CDL ever been revoked or suspended? Yes No Do you have six (6) or more demerit points against your driver's license? Yes No

If yes, please explain _____

Have you ever served in the military? Yes No

If yes, Type of Discharge _____ Date of Discharge _____

**You will not be identified as a veteran and eligible for preference until you provide your latest DD-214.*

Have you been convicted of violating any law (omit minor traffic violations) ? Yes No

If yes, list conviction(s), date(s), and place(s). Conviction is not an automatic rejection. Specifics will be reviewed under KRS 335B.020.

Applicant Name: _____

EDUCATION/TRAINING: Complete accurately and circle highest grade or year completed at all levels of school below. You are **required** to submit with your application a copy of your high school diploma/transcript or GED certificate. You may submit, if applicable, an original vocational/technical school transcript; or an original college transcript with official seal and Registrar's signature.

	Name and Address of School	Dates Attended		Date of Graduation	Number of Hours		Fields of Study		Degree, Diploma, or Certificate Earned	
		From	To		Earned	Now Carrying	Major	Minor	Diploma	GED
High School or GED		mo/yr	mo/yr	mo/yr						
									<input type="checkbox"/>	<input type="checkbox"/>
Under Graduate College or University		mo/yr	mo/yr	mo/yr					Degree:	
Graduate College or University		mo/yr	mo/yr	mo/yr					Degree:	
Vocational, Business, Technical		mo/yr	mo/yr	mo/yr					Certificate:	
Apprenticeship	Type:	mo/yr	mo/yr	Length of Program: 1 2 3 4 5		Journeyman: Yes <input type="checkbox"/> No <input type="checkbox"/>		Must provide certificate		

EMPLOYMENT HISTORY:

Begin with your most recent job and provide as much detail as possible. Be sure to complete each blank in this section thoroughly and accurately as the information you provide will be verified by the employer. If you changed positions within the same organization and your duties changed, describe **each** job in a separate block. When listing job duties, list those that took most of your time first.

You must complete this application form. Resumes are not considered official, but may be submitted if signed and dated.

NOTE: A Hazardous Devices Investigator position requires at least five (5) years of prior experience involving explosives or hazardous devices used in the areas of law enforcement, the military, or firefighting.

May we contact your present employer?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	If no, explain
A.	Mo. Day Yr.	Mo. Day Yr.	Job Duties:	
Employed From	<input type="text"/>	To	<input type="text"/>	1. _____
Title of Position	Gr. _____		2. _____	3. _____
Average hours worked per week	<input type="text"/>	Starting Salary	_____	
Reason for leaving	_____			
Name of Employer	_____			
Address	_____			
Type of Business	_____			
Name & title of your supervisor	_____			
	Phone: _____			
	From	To	Number Supervised	7. _____
I was a supervisor	Mo. Yr.	Mo. Yr.	<input type="text"/>	8. _____

Applicant Name: _____

<p>B.</p> <p>Employed From <table style="display: inline-table; border: 1px solid black; width: 60px; height: 20px; text-align: center;"><tr><td style="width: 20px;">Mo.</td><td style="width: 20px;">Day</td><td style="width: 20px;">Yr.</td></tr></table> To <table style="display: inline-table; border: 1px solid black; width: 60px; height: 20px; text-align: center;"><tr><td style="width: 20px;">Mo.</td><td style="width: 20px;">Day</td><td style="width: 20px;">Yr.</td></tr></table></p> <p>Title of Position _____ Gr. _____</p> <p style="text-align: center;">Starting Salary _____</p> <p>Average hours worked per week <table style="display: inline-table; border: 1px solid black; width: 40px; height: 20px; text-align: center;"><tr><td style="width: 20px;"> </td><td style="width: 20px;"> </td></tr></table> Last Salary _____</p> <p>Reason for leaving _____</p> <p>Name of Employer _____</p> <p>Address _____</p> <p>Type of Business _____</p> <p>Name & title of your supervisor _____</p> <p style="text-align: center;">Phone: _____</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%; text-align: center;">From</td> <td style="width: 33%; text-align: center;">To</td> <td style="width: 33%; text-align: center;">Number</td> </tr> <tr> <td style="text-align: center;">I was a supervisor</td> <td style="text-align: center;"><table style="display: inline-table; border: 1px solid black; width: 40px; height: 20px; text-align: center;"><tr><td style="width: 20px;">Mo.</td><td style="width: 20px;">Yr.</td></tr></table></td> <td style="text-align: center;"><table style="display: inline-table; border: 1px solid black; width: 40px; height: 20px; text-align: center;"><tr><td style="width: 20px;">Mo.</td><td style="width: 20px;">Yr.</td></tr></table></td> <td style="text-align: center;"><table style="display: inline-table; border: 1px solid black; width: 40px; height: 20px; text-align: center;"><tr><td style="width: 20px;">Supervised</td></tr></table></td> </tr> </table>	Mo.	Day	Yr.	Mo.	Day	Yr.				From	To	Number	I was a supervisor	<table style="display: inline-table; border: 1px solid black; width: 40px; height: 20px; text-align: center;"><tr><td style="width: 20px;">Mo.</td><td style="width: 20px;">Yr.</td></tr></table>	Mo.	Yr.	<table style="display: inline-table; border: 1px solid black; width: 40px; height: 20px; text-align: center;"><tr><td style="width: 20px;">Mo.</td><td style="width: 20px;">Yr.</td></tr></table>	Mo.	Yr.	<table style="display: inline-table; border: 1px solid black; width: 40px; height: 20px; text-align: center;"><tr><td style="width: 20px;">Supervised</td></tr></table>	Supervised	<p>Job Duties:</p> <ol style="list-style-type: none"> 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____ 7. _____ 8. _____
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Mo.	Day	Yr.																				
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Type of Business _____
Name & title of your supervisor _____

Phone: _____

I was a supervisor	From		To		Number Supervised
	Mo.	Yr.	Mo.	Yr.	

- 5. _____
- 6. _____
- 7. _____
- 8. _____

Applicant Name: _____

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NOTE: Attach continuation page(s) if necessary.

LICENSES/CERTIFICATIONS OR LANGUAGE PROFICIENCY

License or Certification Title & Number	Original Issue Date	Current Expiration Date	Name, Address & Phone of Licensing Agency

List additional languages you speak proficiently.			
List additional languages you read or write proficiently.			

PROFESSIONAL ORGANIZATIONS: Indicate current membership in professional organizations

ORGANIZATION	TITLE	DATE MEMBERSHIP EXPIRES

CHARACTER REFERENCES: Other than relatives, former employers, or supervisors.

NAME	ADDRESS	PHONE NUMBER

All persons selected for employment by the Kentucky State Police as a Hazardous Devices Investigator shall have successfully completed, prior to the end of the one (1) year probationary period, the Peace Officer Professional Standards (POPS) certification given by the Kentucky State Police Academy or the Department of Criminal Justice Training. Officers may be assigned anywhere within Kentucky and may be subject to transfer to any part of the state at any time while employed in a sworn State Police position. Employment may be terminated with or without cause at any time during the training period or the probationary period of one (1) year immediately following appointment as a Hazardous Devices Investigator. All candidates who are selected for final employment consideration are required to provide a blood/urine sample for drug testing purposes. If employed as a sworn officer, submission to random drug testing will be mandatory during the course of employment. Additionally, polygraph examinations will be administered to candidates who are selected for final employment consideration.

* Applicants will be required to complete an extensive background profile.

I certify that I have read, understood and accept the conditions expressed in the foregoing paragraph. I further certify that all of the information I have provided on this application form is truthful and accurate to the best of my knowledge. I understand that my background will be extensively investigated by a Kentucky State Police officer and I consent to such investigation. The Kentucky State Police is an equal opportunity employer with strict prohibitions against any unlawful discrimination based upon race, sex, age, national origin, religion, disability, or political affiliation.

Signature of Applicant (as usually written)
To be signed in the presence of a notary

Date of Signature

Note: This application must be notarized in the space provided below.

Subscribed and sworn to before me by the above applicant, this _____ day of _____, 20 _____

Signature of Notary

My Commission Expires _____, _____
MONTH & DAY YEAR