

NAME: \_\_\_\_\_  
  Last  First  Middle

DATE: \_\_\_\_\_

POSITION: \_\_\_\_\_



**CHANDLER POLICE  
DEPARTMENT  
Background Questionnaire  
2020**



**INSTRUCTIONS:**

1. MAKE SINGLE SIDED COPIES ONLY
2. PRINT **LEGIBLY** IN BLACK INK IN YOUR OWN HANDWRITING
3. ONLY THE APPLICANT WILL FILL OUT THIS QUESTIONNAIRE
4. IF YOU NEED ADDITIONAL SPACE, MAKE A COPY OF THE "FURTHER EXPLANATIONS" SHEET, UNLESS OTHERWISE DIRECTED (Sections B and C)
5. PER PAGE 42, ATTACH ALL NECESSARY COPIES
6. YOU WILL RECEIVE INSTRUCTIONS ON WHEN TO SUBMIT YOUR **FULLY COMPLETED PACKET.**

**ANY OMISSION, DECEPTION, OR FAILURE TO FOLLOW THE INSTRUCTIONS  
IN YOUR PACKET COULD DISQUALIFY YOU FROM FURTHER CONSIDERATION.**

Chandler Police Department  
Professional Standards Section  
250 E. Chicago St.  
Chandler, AZ 85225

Questions?  
**CPDrecruiting@ChandlerAZ.gov | 480-782-3960**

**Background Packet**



# Chandler Police Department

ORI - AZ0070500

## AUTHORITY FOR RELEASE OF INFORMATION

Last Name	First Name	Middle Name	Sex	Race	Date of Birth	SSN

City of Birth	County	State	Country

I, \_\_\_\_\_,  
Applicant Name

do hereby authorize a review of and full disclosure of all records, or any part thereof, concerning myself, by and to ANY duly authorized agent of the Chandler Police Department, Professional Standards Section, whether said records are of public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions; financial or credit institutions (including records of deposits, withdrawals, balances of checking and savings accounts, and loans) and also the records of commercial or retail credit agencies (including credit reports and/or ratings); public utility companies; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me, and salary records; real and personal property tax statements and records, and other financial statements and records wherever filed; records of complaint, arrest, trial, and/or convictions for alleged or actual violations of law, including criminal, civil, and/or traffic records; the results of any polygraph examinations; records of complaints of a civil nature made by or against me, wherever located, including the records and recollections of attorneys at law, or of other counsel, whether representing me or another person in any case in which I presently have or have had an interest.

I reiterate and emphasize that the intent of this authorization is to provide full and unobstructed access to the background and history of my personal life for the specific purpose of pursuing a background investigation, which may provide pertinent data for the Chandler Police Department to consider in determining my suitability for employment by that department. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be, and the sources of information specifically identified herein.

I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the Chandler Police Department. I understand that all materials pertaining to this background investigation become the property of the Chandler Police Department, Professional Standards Section, and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees, from and against all claims, damages, losses, and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request. I further understand that in the event my application is disapproved, the sources of confidential information cannot be revealed to me.

A photocopy of this release form will be valid as an original hereof, even though said photocopy does not contain an original writing of my signature.

### **MUST BE SIGNED IN THE PRESENCE OF A NOTARY:**

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Applicant Signature Date

\_\_\_\_\_  
Street Address City State Zip

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**Note:** Where necessary, use a separate page to complete answers throughout this questionnaire.

**A. Personal Data**

Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
*LAST FIRST MIDDLE MM/DD/YYYY*

AKA/Maiden Name \_\_\_\_\_

DL # \_\_\_\_\_ State \_\_\_\_\_ Gender \_\_\_\_\_ Marital Status \_\_\_\_\_ SSN \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Age \_\_\_\_\_ Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_ Race \_\_\_\_\_

Address \_\_\_\_\_  
*NO./STREET APT. # CITY STATE ZIP*

Phone (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
*HOME CONTACT EMAIL*

1. Have you ever used or been known by any other name other than the one you listed on this questionnaire (including your maiden name)? Yes  No   
If yes, list name(s): \_\_\_\_\_
2. Have you ever used a social security number other than the one you have listed? Yes  No   
If yes, list number(s): \_\_\_\_\_

**B. Residences**

Starting with the present and proceeding backwards, list all residence addresses, including school, military, and personal residences. ACCOUNT FOR ALL TIME. DO NOT LEAVE ANY TIME FRAME BLANK. LIST EVERYTHING IN PROPER SEQUENCE. If you need additional space, copy this blank page and attach as Page 5(a).

From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code
From (MM/YY)	To (MM/YY)	Number and Street	City	State/County	Zip Code

### C. Employment History

List all places of employment—including internships and long-term volunteer service—beginning with your most recent employer and working backwards. List any periods of school, military service, and unemployment. **Do not omit any employers.** If you need more space, attach extra copies of this page.

From (MM/YY)	Job Title	Ending Salary
To (MM/YY)	Employer	
Employer's Address (Street, City, State Zip)		Contact Email
Supervisor	Contact Phone	
Description of duties:		
Reason for leaving:		

From (MM/YY)	Job Title	Ending Salary
To (MM/YY)	Employer	
Employer's Address (Street, City, State Zip)		Contact Email
Supervisor	Contact Phone	
Description of duties:		
Reason for leaving:		

From (MM/YY)	Job Title	Ending Salary
To (MM/YY)	Employer	
Employer's Address (Street, City, State Zip)		Contact Email
Supervisor	Contact Phone	
Description of duties:		
Reason for leaving:		

From (MM/YY)	Job Title	Ending Salary
To (MM/YY)	Employer	
Employer's Address (Street, City, State Zip)		Contact Email
Supervisor		Contact Phone
Description of duties:		
Reason for leaving:		

From (MM/YY)	Job Title	Ending Salary
To (MM/YY)	Employer	
Employer's Address (Street, City, State Zip)		Contact Email
Supervisor		Contact Phone
Description of duties:		
Reason for leaving:		

From (MM/YY)	Job Title	Ending Salary
To (MM/YY)	Employer	
Employer's Address (Street, City, State Zip)		Contact Email
Supervisor		Contact Phone
Description of duties:		
Reason for leaving:		

1. Have you ever been terminated or asked to resign from any employment? Yes  No   
If yes, complete the following:

Employer's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Explanation: \_\_\_\_\_

2. Have you ever resigned from a job to avoid being fired or terminated? Yes  No

If yes, name of employer: \_\_\_\_\_

Explanation: \_\_\_\_\_

3. Are you currently employed? Yes  No

4. If your work performance has been evaluated in the past, what is the latest evaluation you received?

- Exceptional
- Above average
- Average

- Below average
- Never been evaluated

5. Have you been tardy or late for work because of circumstances within your control?  
Yes  No

If yes, how often? \_\_\_\_\_ Last time: \_\_\_\_\_

Explanation: \_\_\_\_\_

6. During the past year, have you falsified sick time by calling in sick when you were not ill?  
Yes  No  If yes, when? \_\_\_\_\_

Explanation: \_\_\_\_\_

7. Have you been unemployed anytime during the past three years? Yes  No   
If yes, when? \_\_\_\_\_

Explanation: \_\_\_\_\_



8. Have you ever been written up, counseled, or disciplined in any manner, by any of your employers for failure to comply with required rules or regulations, or for any other reason? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

9. Have you ever been suspended or served an "Intent to terminate" by any employer? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

10. Have you ever quit a job without giving notice required by an employer? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

11. Would you be eligible to be rehired by all your former employers (assuming there was a job available)? Yes  No

If no, explain: \_\_\_\_\_

\_\_\_\_\_

12. Did you ever work without reporting it (even on the side) while collecting unemployment benefits?

Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

13. Have you ever taken merchandise or goods that you were not authorized to take from a company where you worked? Yes  No

If yes, what? \_\_\_\_\_

How many times? \_\_\_\_\_ Last time: \_\_\_\_\_

Explain: \_\_\_\_\_

\_\_\_\_\_

14. Have you ever taken money that you were not authorized to take from a company where you have worked or volunteered? Yes  No

If yes, how much? \_\_\_\_\_

How many times? \_\_\_\_\_ Last time: \_\_\_\_\_

Explanation: \_\_\_\_\_

\_\_\_\_\_

15. Have you ever purposely taken anything from a fellow employee that you were not authorized to take? Yes  No

If yes, what? \_\_\_\_\_ When? \_\_\_\_\_

Explanation: \_\_\_\_\_

16. Have you ever taken anything from a job site or crime scene that you were not authorized to take? Yes  No

If yes, what? \_\_\_\_\_ When? \_\_\_\_\_

Explanation: \_\_\_\_\_

17. While employed, have you ever been involved with another employee or outside person in a scheme to defraud your employer? Yes  No

If yes, explain: \_\_\_\_\_

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

18. Have you ever falsified a timesheet? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

19. Has an employer ever accused you of being dishonest? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

20. Indicate whether you have been rejected as an applicant (for a job or internship) for any of the following reasons:

a. Issues raised by a background investigation? Yes  No  N/A

b. Issues raised by a polygraph? Yes  No  N/A

c. Issues raised by an oral board? Yes  No  N/A

d. Issues raised by a physical agility test? Yes  No  N/A

e. Other \_\_\_\_\_

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

21. Have you ever failed to successfully complete a probationary period with a law enforcement agency (or any other employer)? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

22. Did you ever sell or give confidential information you received through your employment to anyone for financial gain or for any other reason? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

23. Have you ever or are you now making payments to any employer or bonding company for merchandise taken, stolen, or lost? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

**D. References**

1. List at least five (5) references (not relatives or romantic partners) who are responsible adults and who have known you well during the past five (5) years. **You must provide complete address including zip code, current telephone number, and email.**

Name	Residence Address:
Relationship	City, State, Zip
How long acquainted?	Phone: (H) (C)
Occupation:	Email Address:

Name	Residence Address:
Relationship	City, State, Zip
How long acquainted?	Phone: (H) (C)
Occupation:	Email Address:

Name	Residence Address:
Relationship	City, State, Zip
How long acquainted?	Phone: (H) (C)
Occupation:	Email Address:

Name	Residence Address:
Relationship	City, State, Zip
How long acquainted?	Phone: (H) (C)
Occupation:	Email Address:

Name	Residence Address:
Relationship	City, State, Zip
How long acquainted?	Phone: (H) (C)
Occupation:	Email Address:

2. Are you acquainted with any employees of this department or any employees of the City of Chandler? Yes  No

If yes, list them: \_\_\_\_\_  
 \_\_\_\_\_

## **E. Education and Training**

1. List all schools you have attended (high schools, trade schools, colleges, and universities).  
List GED if it applies

From MM/YY	To MM/YY	Name and city/state	Credit Hours	Graduate?		Type of Degree
				Yes	No	

2. List all professional societies, organizations, licenses (date and number), registrations (date), special skills, knowledge, or abilities.

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3. Do you speak, read, or write a language other than English? Yes  No

If yes, what language? \_\_\_\_\_ How well? \_\_\_\_\_

4. Have you ever received any law enforcement training? Yes  No

Name of organization: \_\_\_\_\_

Month and year you attended: \_\_\_\_\_

What type of training? \_\_\_\_\_

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**F. General Background**

1. Have you ever taken a polygraph before? Yes  No

Date (MM/YY)	Agency:	Result:

2. Have you ever applied for a permit to carry a concealed weapon? Yes  No   
If yes, explain: \_\_\_\_\_

3. Have you ever been the subject of a court order of protection or injunction prohibiting harassment? Yes  No   
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

4. Have you ever been the subject of an investigation by child protective services (child welfare agency)? Yes  No   
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

5. Have any of your relatives (including your spouse and your spouse’s relatives) ever been convicted or imprisoned for a crime? Yes  No   
If yes, please list name and relation: \_\_\_\_\_  
Charge: \_\_\_\_\_

6. Do you enjoy inflicting pain on humans or animals? Yes  No   
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

7. Did you ever offer anyone a bribe? Yes  No   
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

8. Have you ever observed, been present, participated in, or concealed the commission of any crime? Yes  No   
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

9. Have you ever committed a felony or an offense that would be a felony if committed in Arizona?  
Yes  No

If yes, explain: \_\_\_\_\_

10. Do you have any prejudices against any group? Yes  No

If yes, explain: \_\_\_\_\_

11. Have you ever had a physical confrontation (i.e. pushed, slapped, punched, etc.) with a romantic/intimate partner (i.e. spouse, girlfriend/boyfriend, date)? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

12. Have you ever had an argument with a romantic/intimate partner where property was damaged? (e.g. a wall, a cell phone, etc.) Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

13. Have you ever been a member of any organization that advocates, advises, or supports the use of force or other unlawful means to deny other person their rights under the constitution of the United States? Yes  No

If yes, explain: \_\_\_\_\_

14. Have you ever stolen or taken without permission any property from a business or other people (e.g. shoplift or switched price tags)? Yes  No

If yes, what was the value? \_\_\_\_\_

How many times? \_\_\_\_\_ Last time: \_\_\_\_\_

Explain: \_\_\_\_\_  
\_\_\_\_\_

15. When was the last time you stole or took, without permission, any property from a business or other person? \_\_\_\_\_ Age: \_\_\_\_\_

Explain: \_\_\_\_\_  
\_\_\_\_\_

16. Did you ever buy anything that you suspected was stolen? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

17. Did you ever sell anything that you knew was stolen? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

18. Are you now in possession of any stolen property? (i.e., on person, at residence, in car, etc.)  
Yes  No

If yes, explain: \_\_\_\_\_

19. Have you ever paid, or been paid, to participate in any sexual act? Yes  No

If yes, explain: \_\_\_\_\_

20. Have you ever sought out or viewed child pornography, including via the Internet?  
Yes  No

If yes, explain: \_\_\_\_\_











## **I. Conviction Record**

1. How many times have you been convicted of, pled guilty to, or plead no contest to misdemeanor charges? \_\_\_\_\_

2. How many times have you been convicted of, pled guilty to, or plead no contest to felony charges? \_\_\_\_\_

3. Have you ever been on court-ordered probation? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

4. Have you ever been convicted (pled guilty or no contest) of any offense, domestic violence, or violation of any statute, ordinance, law, or regulation by any civil or military authority, either in this country or any other country? (Include detentions as a juvenile or minor by court adjudication of guilt. Include all situations, even if expunged) Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

**J. Driving History**

1. Have you ever had a driver’s license cancelled, refused, revoked, or suspended? Yes  No

If yes, explain in detail: \_\_\_\_\_

\_\_\_\_\_

If yes, how many times did you drive while your license was suspended or revoked? \_\_\_\_\_

2. Have you ever attended a driver improvement school? Yes  No

If yes, explain in detail: \_\_\_\_\_

\_\_\_\_\_

3. Do you currently have an Arizona Driver’s License? Yes  No

License # \_\_\_\_\_ Restrictions: \_\_\_\_\_

4. Do you have, or have you ever had, a driver’s license from another state or country?

Yes  No  If yes, where? \_\_\_\_\_

5. How many automobile accidents have you been involved in as a driver (regardless of fault)? \_\_\_\_\_

List each incident in detail, using the further explanations page if necessary.

Date	PD called?	Location (City, State)	Law Enforcement Agency	Citation Yes/No

6. Have you ever been a driver or passenger in an accident where injuries or damage occurred and you left the scene of the accident (hit and run)? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

7. Have you ever falsified information on an accident report or given police false information during a traffic stop or accident investigation? Yes  No

If yes, explain: \_\_\_\_\_

8. Have you ever been involved in a “road rage” situation? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

9. Have you ever had a warrant issued for your arrest for failure to pay a citation or failure to appear in court? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

10. Do you have any outstanding warrants for your arrest right now? Yes  No

If yes, what state issued it? \_\_\_\_\_

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

11. Do you currently have automobile insurance as mandated by the state? Yes  No

If no, explain why not: \_\_\_\_\_

12. Has your insurance ever been canceled? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

13. Has your insurance ever been placed under a "high risk" status? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

14. Have you ever let your vehicle registration expire? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

15. List **EVERY** traffic citation and warning you have received in chronological order, beginning with the most recent and working backwards.

Date	Agency	Violation	Ticket or Warning

16. Have you ever been charged with driving under the influence of alcohol or drugs? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

17. Have you ever driven a vehicle under the influence of alcohol or drugs and not been caught?

Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

## K. Alcohol and Drugs

Be sure to answer *ALL* questions below.

If the question does not apply to you, write “DNA” in the space provided.

1. Do you drink alcohol? Yes  No 
  - a. How often during the week do you drink alcohol? \_\_\_\_\_
  - b. When was the last time you were drunk? \_\_\_\_\_
  - c. Have you ever had difficulty within your family due to your alcohol consumption?  
Yes  No  If yes, explain: \_\_\_\_\_
  
2. Have you ever possessed, used, purchased, or sold **marijuana**? Yes  No   
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
  - a. What form was the marijuana? (e.g. joint; bong; edible with cannabis oil such as brownies, gummies, lollipops; etc.) \_\_\_\_\_  
\_\_\_\_\_
  - b. Estimate your *total* marijuana usage throughout your entire life, remembering that once a month for a year is 12 times, once a week for a year is about 52 times, and almost every day for a year is about 365 times. \_\_\_\_\_
  - c. When was the last time you used marijuana?  
Date last used: \_\_\_\_\_ Age at time of use: \_\_\_\_\_
  - d. Since the age of 21, how many times have you used marijuana? \_\_\_\_\_
  - e. Are you currently using marijuana for any reason? Yes  No   
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_
  
3. Have you ever possessed, used, purchased or sold **cocaine** in any form? Yes  No   
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
  - a. How many times have you possessed, used, or sold cocaine? \_\_\_\_\_
  - b. When was the last time you used cocaine in any form?  
Date last used: \_\_\_\_\_ Age at time of use: \_\_\_\_\_
  - c. Since the age of 21, how many times have you used cocaine in any form? \_\_\_\_\_
  - d. Are you currently using cocaine in any form? Yes  No



4. Have you ever used **ANY** drug (whether over-the-counter or prescribed) in a manner not suggested by the label? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

5. Have you ever used a drug **prescribed to someone else** (for the drug's intended purpose or any other reason)? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

6. Have you ever given a drug **prescribed to you** to someone else? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

7. Have you ever **illegally** possessed, used, purchased, or sold **prescription drugs** (e.g. OxyContin<sup>®</sup>, Fentanyl, Soma, morphine, etc.)? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

a. How many times? \_\_\_\_\_

b. When was the last time you used illegal prescription drugs in any form?

Date last used: \_\_\_\_\_ Age at time of use: \_\_\_\_\_

c. Since the age of 21, how many times have you used illegal prescription drugs in any form? \_\_\_\_

d. Are you currently using illegal prescription drugs in any form? Yes  No

8. Have you ever possessed, used, purchased or sold any **hallucinogens** (i.e., LSD, mescaline, peyote, acid, mushrooms, angel dust, PCP, etc.)? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

a. How many times? \_\_\_\_\_

b. When was the last time you used hallucinogens in any form?

Date last used: \_\_\_\_\_ Age at time of use: \_\_\_\_\_

c. Since the age of 21, how many times have you used hallucinogens in any form? \_\_\_\_

d. Are you currently using hallucinogens in any form? Yes  No

9. Have you ever illegally possessed, used, purchased or sold **opiates or dangerous drugs** (e.g. opium, morphine, heroin Ecstasy, GHB, etc.)? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

a. How many times? \_\_\_\_\_

b. When was the last time you used opiates or dangerous drugs in any form?

Date last used: \_\_\_\_\_ Age at time of use: \_\_\_\_\_

c. Since the age of 21, how many times have you used opiates or dangerous drugs in any form? \_\_\_\_\_

d. Are you currently using opiates or dangerous drugs in any form? Yes  No

10. Have you ever illegally possessed, used, purchased or sold **amphetamines** (e.g. meth, Dexedrine, speed, crank, crystal meth, ice, glass, cross tops, etc.)? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

a. How many times? \_\_\_\_\_

b. When was the last time you used amphetamines in any form?

Date last used: \_\_\_\_\_ Age at time of use: \_\_\_\_\_

c. Since the age of 21, how many times have you used amphetamines in any form? \_\_\_\_\_

11. Have you ever illegally possessed, used, purchased or sold **illegal steroids**? Yes  No

If yes, what kind? \_\_\_\_\_

Explain the type of cycle followed: \_\_\_\_\_  
\_\_\_\_\_

a. How many times have you possessed/used/purchased/sold illegal steroids? \_\_\_\_\_

b. When was the last time you used illegal steroids in any form?

Date last used: \_\_\_\_\_ Age at time of use: \_\_\_\_\_

c. Since the age of 21, how many times have you used illegal steroids in any form? \_\_\_\_\_

d. Prior to 1994, how many times did you use illegal steroids in any form? \_\_\_\_\_

e. Since 1994, how many times have you used illegal steroids in any form? \_\_\_\_\_

f. Are you currently using illegal steroids in any form? Yes  No

13. Have you ever used any other substance (**legal or not**), for the purpose of getting high? (salvia, spice, whip its, paint, bath salts, etc.) Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

14. Have you ever **illegally** possessed, used, purchased or sold **depressants or tranquilizers** such as barbiturates, Valium, Quaaludes, etc.? Yes  No

If yes, explain: \_\_\_\_\_

a. How many times? \_\_\_\_\_

b. When was the last time you illegally used depressants or tranquilizers in any form?

Date last used: \_\_\_\_\_ Age at time of use: \_\_\_\_\_

c. Since the age of 21, how many times have you illegally used depressants or tranquilizers?

\_\_\_\_\_

15. Have you ever illegally possessed or used any other controlled drug besides those already described? Yes  No

If yes, explain: \_\_\_\_\_

How often? \_\_\_\_\_ Last time: \_\_\_\_\_

16. How many times in your entire life have you driven a vehicle after using any illegal or controlled drug? \_\_\_\_\_

17. Have you ever provided any illegal or controlled drug to friends or others in exchange for money or goods? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Most recent time: \_\_\_\_\_

18. Have you ever grown, manufactured, or processed any controlled substance? Yes  No

a. If yes, explain: \_\_\_\_\_

19. Do you know of any relatives or close friends that are currently using illegal drugs? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

20. Are you aware that the employment environment within this agency is a **DRUG-FREE ENVIRONMENT**, and **any** violation of that policy can lead to termination? Yes  No

**L. Organizational Membership**

1. Are you now, or have you ever been, a member of any foreign or domestic organization, association, movement, group, or combination of persons which is totalitarian, fascist, communist, or subversive, or which has adopted or shows a policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States or the State of Arizona or which seeks to alter the form of Government of the United States or the State or Arizona by any unlawful or unconstitutional means? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

2. Have you ever been a member of any crime group or gang? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

**M. Military Experience**

1. Have you ever registered with the Selective Service (the draft)?

- No, although I was legally required to do so.
- No, I was not required to do so (females).
- Yes, in \_\_\_\_\_ (State)

2. Have you ever been rejected or disqualified—for *ANY* reason—for military or civil service?

- N/A
- No
- Yes

If yes, explain: \_\_\_\_\_  
 \_\_\_\_\_

**IF YOU HAVE NO MILITARY EXPERIENCE, MARK THE “N/A” BOX AND GO TO THE NEXT SECTION**

N/A

3. Have you ever served in the Army, Navy, Marine Corps, Air Force, Coast Guard, R.O.T.C., or any other military or para-military organization? Yes

Branch of Service	Serial #	Date Entered	Date Separated

a. If yes, give type of separation: \_\_\_\_\_

b. How long were you in the military, on active duty: \_\_\_\_\_ years \_\_\_\_\_ months

c. What type of discharge did you receive? Check all that apply

- Honorable
- Honorable with hardship reasons
- General
- Less than honorable
- Retirement length of service \_\_\_\_\_
- Still on full-time active duty
- Still on reserve status
- Other: \_\_\_\_\_

4. Did you ever fail to complete any term of enlistment for any reason? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

5. Did you ever receive any disciplinary action while in the military (e.g. Court Martial, Article 15, Captain's Mast, Company Mast, Company punishment, reduction in rank, etc.)? Yes  No

If yes, list *all* discipline in the table below, using the "Further Explanations" page if needed.

Date	Type of Discipline	Reason for Discipline

6. While in the military, were you ever incarcerated (brig or guardhouse)? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Were you ever UA, AWOL, missing from formation or ship movement? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

8. Do you still possess any military equipment that you are not authorized to have? Yes  No

If yes, explain in detail: \_\_\_\_\_  
\_\_\_\_\_

9. Are you currently a member of the U.S. Reserve or National Guard? Yes  No

If yes, what unit? \_\_\_\_\_

Commander's Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

**N. Financial Status**

1. Are you currently able to pay all of your bills on time? Yes  No

2. Have you ever been referred to a collection agency? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

3. Do you presently have any debts in collections? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

4. Have you ever had anything repossessed? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

5. Are you purposely avoiding any creditors? Yes  No

If yes, explain: \_\_\_\_\_

6. Are you currently delinquent with any child support obligations? Yes  No

If yes, explain: \_\_\_\_\_

7. Have you ever failed to make child support payments you were legally required to make?

Yes  No

If yes, explain: \_\_\_\_\_

8. Have you ever had your wages garnished regarding any of your financial obligations?

Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

9. Have you ever failed to file an IRS statement? Yes  No

If yes, list year(s): \_\_\_\_\_ Why? \_\_\_\_\_

10. Have you ever had any issues, or do you currently have any unresolved issues with the Internal Revenue Service or any revenue department in any state? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

11. Have you ever made false or exaggerated claims on insurance policies? Yes  No

If yes, explain: \_\_\_\_\_

12. Have you ever had a bad credit rating?  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

13. Have you ever filed for bankruptcy? Yes  No

If yes, when? \_\_\_\_\_ Court: \_\_\_\_\_ Chapter 7 11 13 (circle one)

Explain: \_\_\_\_\_  
\_\_\_\_\_

14. Did you ever write a check with the intentions of cheating someone, or cash a check you knew was bad? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

15. How many times in your life have you had a check returned for insufficient funds? \_\_\_\_\_

List the dates of all returned checks: \_\_\_\_\_

16. Has a landlord ever served you with an eviction notice? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

17. Have you ever been sued in court for anything? Yes  No

If yes, give date, court, and disposition: \_\_\_\_\_  
\_\_\_\_\_

18. List ALL present outstanding loans, mortgages, credit card debt, etc. (including bills in collections)

Company	Type of loan/debt	Monthly Payment	Debt balance



19. Are you a co-signer of someone's outstanding loan? Yes  No

If yes, explain: \_\_\_\_\_

20. If employed, do you anticipate income other than salary? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

21. Can you keep up with your present financial obligations on what you will earn here?

Yes  No

If no, explain: \_\_\_\_\_

22. Do you gamble? Yes  No

23. Do you owe any gambling debts? Yes  No

If yes, explain: \_\_\_\_\_

## **O. Social Networking**

1. Have you ever been a member of a social networking site of any kind? This includes hosting, posting, or visiting any network under your real name, assumed name or moniker used in connection with the site. Yes  No

2. List the social network and your user name(s) for each

Name of social network:

User name:

Name of social network:	User name:

3. List all email addresses you have ever used:

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4. Have you ever posted any comments or pictures on a social networking site, whether yours or another person's, that may contain material considered inappropriate based on race, color, sex, religion, national origin, age or disability? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

5. Have you ever posted any comments, sexually explicit pictures, or pictures of conduct that may be considered publicly embarrassing on a social networking site, whether yours or another person's? Yes  No  If yes, explain: \_\_\_\_\_

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6. Have you ever posted or viewed pictures or images of juveniles engaged in any activity that is unlawful? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Did you clean your site in preparation for this interview or job search? Yes  No

If yes, what material was removed? Why? \_\_\_\_\_  
\_\_\_\_\_

**P. Law Enforcement Experience**

IF YOU HAVE NEVER SERVED IN ANY CAPACITY WITHIN A LAW ENFORCEMENT ENTITY, MARK THE "N/A" BOX AND GO TO THE NEXT SECTION.

N/A

1. Indicate whether you have any of the following law enforcement experience: (answer each question)

- a. Sworn/commissioned weapon carrying officer      Yes  No
- b. Police reserve      Yes  No
- c. Military police officer      Yes  No
- d. Corrections/detention      Yes  No
- e. Civilian job title: \_\_\_\_\_

2. Number of years' experience as a sworn police officer: \_\_\_\_\_

3. How many law enforcement agencies have you worked for as a sworn police officer? \_\_\_\_\_

4. How many law enforcement agencies have you worked for as a civilian? \_\_\_\_\_

5. How many citizen complaints have been filed against you? \_\_\_\_\_

If any, explain: \_\_\_\_\_  
\_\_\_\_\_

6. How many of these complaints were sustained or found to be true? \_\_\_\_\_

If any, explain: \_\_\_\_\_  
\_\_\_\_\_

7. How many reprimands (written or oral) have you received? \_\_\_\_\_

Explain and list dates: \_\_\_\_\_  
\_\_\_\_\_

8. How many times have you been suspended, demoted, or dismissed? \_\_\_\_\_

Explain and list dates: \_\_\_\_\_  
\_\_\_\_\_

9. Were you ever the subject of a civil or criminal prosecution (lawsuit)? Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

10. Other than while on training status, have you ever had any unsatisfactory personnel ratings?

Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

11. As a sworn officer, have you ever violated any controlled substance (illegal narcotic) laws? Yes  No   
If yes, explain: \_\_\_\_\_
12. Have you ever used illegal drugs while on duty? Yes  No   
If yes, explain: \_\_\_\_\_
13. Have you ever used illegal drugs while employed with a law enforcement agency? Yes  No   
If yes, explain: \_\_\_\_\_
14. Have you ever consumed alcohol while on duty? Yes  No   
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_
15. Have you ever lied or distorted the facts in a police report? Yes  No   
If yes, explain: \_\_\_\_\_
16. Did you ever cover up a violation for a fellow officer or fellow employee? Yes  No   
If yes, explain: \_\_\_\_\_
17. Did you ever lie or commit perjury in court testimony or any official proceeding, including an internal affairs investigation? Yes  No   
If yes, explain: \_\_\_\_\_
18. Have you ever been terminated or forced to resign from a law enforcement position **during** the probation period? Yes  No   
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_
19. Have you ever been terminated or forced to resign from a law enforcement position **after** the probation period? Yes  No   
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_
20. Have you ever been involved, in any manner, with an Internal Affairs investigation? Yes  No   
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

21. Have you ever falsified information regarding damage to departmental equipment/vehicles?

Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

22. Have you ever failed to report damage to departmental equipment/vehicles you were responsible for?

Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

23. Have you ever used “excessive force” or more force than was necessary to affect an arrest?

Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

24. How many on-duty traffic collisions have you been involved in? \_\_\_\_\_

In how many of those were you cited and/or deemed out of policy? \_\_\_\_\_

25. While on duty or on work premises, have you engaged in **any** type of sexual activity? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

26. Did you ever accept a gratuity in violation of your department’s policy? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

27. Have you ever converted items of evidence or property to your personal use in violation of your department’s policy? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

28. Do you know of any crimes committed by other officers that have not been discovered?

Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

**Q. Prior Applications**

Please list the names of any law enforcement agencies at which you have applied for any position. If you have applied with an agency more than once, include all dates and positions applied for with that agency. If necessary, make a copy of this page or use the “Further Explanations” page.

Agency	City/State	Position Applied For	MM/YY	How far in the process did you get?

**R. Summary Questions**

28. Did you give any answers on this questionnaire that you know are false? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

29. Are you concealing any information, which would prevent you from being employed by this department? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

30. Did you cheat, lie, or commit fraud in any way on your application or evaluation process for this job? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

31. Have you made application to this department at the request of any subversive organizations?

Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

32. Have you had any other involvement in illegal activities or committed any crimes that have yet to be disclosed? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**S. Summary Statement**

- 1. Do you have any knowledge or information (in addition to that specifically called for in the preceding questions) which is or which may be relevant, directly or indirectly, in connection with an investigation or your eligibility or fitness for the position for which you are applying?

This includes, but is not limited to, knowledge or information concerning your character, physical and mental condition, temperance, habits, employment, education, subversive activities, family, association, criminal record, traffic violation, residency, or otherwise.

Yes  No

If yes, explain: \_\_\_\_\_

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**POLICE OFFICER AND DETENTION OFFICER  
APPLICANTS ONLY**

If, during the course of your duties as a police officer (detention officer), a situation arose whereby you were faced with the lawful and necessary taking of a human life, would you be able to do so?

Yes \_\_\_\_\_ No \_\_\_\_\_ If No, explain: \_\_\_\_\_

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

**CERTIFICATION**

I hereby certify, under penalty of A.R.S. 13-2701 and 39-161, that the entries on this questionnaire are true, complete, and correct to the best of my knowledge and belief. These entries are made in good faith. I understand that knowingly and willfully making a false statement on this form constitutes a violation of the law and is cause to initiate action to suspend or revoke certified peace officer status.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**T. Required documents**

*Initial each box*

- Make **copies** of all the documents listed below and **attach them to the back of this packet**
  
- You will later need to bring **originals** of all documents if you are invited to a background interview
  - Birth certificate
  - Driver license
  - Social security card
  - High school diploma or GED
  - Proof of citizenship if a naturalized citizen
  - Marriage certificate(s) or divorce decree(s), if applicable
  - Military Service Record Form DD214 (**Must be Copy 4**), if applicable
  - College diploma(s), if applicable
  - Bankruptcy papers, if applicable

➤ IF you cannot locate a required document, list on the further explanations page what first step you have taken to reacquire that document.

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I certify that the above entries are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that knowingly and willfully making a false statement on this form constitutes cause to revoke, refuse, or suspend employment with the City of Chandler.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Revised 12/16/2020



## **Final Checklist**

Ready to turn in your packet? Make sure the following are complete:

- Page 3 is completed and signed
- All required copies are attached
- Pages are clipped neatly together

When turning in your background packet, make sure that it is **NOT**:

- Double-sided
- Stapled
- In a folder or envelope

If you have any questions, please contact the Hiring Unit at **CPDrecruiting@ChandlerAZ.gov** or **480-782-3960**.