



PERSONAL HISTORY STATEMENT FOR VILLAGE POLICE OFFICERS

Alaska Police Standards Council
PO Box 111200
Juneau, Alaska 99811-1200
Ph: 907 465-4378

GENERAL INSTRUCTIONS: Handprint or type an answer to EVERY QUESTION. If the question does not apply to you, respond with N/A. If space available is insufficient, use section #23 or a separate sheet and precede each answer with the number of the referenced block. DO NOT MISREPRESENT OR OMIT a requested fact since the statements made herein are subject to verification to determine your qualifications for employment.

1. Last Name, First Name Middle Name				
2. Other Names, Maiden, Alias(es), Nickname(s)				
3. Mailing Address			City	State
				Zip Code
4. Present Residence Address			City	State
				Zip Code
Residence Phone No.		Business Phone No.		Cell Phone No.
				Email
5. Date of Birth (<i>Month, Day, Year</i>)		Place of Birth (<i>City, County, State</i>)		
		Attach a copy of birth or baptismal certificate.		
7. U.S. Citizen Yes <input type="checkbox"/> No <input type="checkbox"/>		If Naturalized, Certificate Number		Date, Place, and Court
		Name of Spouse or Significant Other (<i>Last, First, Middle</i>)		
8. Marital Status Married <input type="checkbox"/> Single <input type="checkbox"/>		Address (<i>Street, City, State</i>)		
Spouse or Significant Other's Phone:			Spouse or Significant Other's Email:	
Name and Present Address of Spouse(s) if Divorced or Separated:				
Name			Address	
Name			Address	
9. Children and Dependents List all your children, including stepchildren and adopted, give the following information:				
Name	Date of Birth	Place of Birth	Residence Address	Live with Whom?

For use by Village Police Officer Applicants ONLY

(Revised 9/19)

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10. Military Status:		Attach a copy of your DD 214	
Have you served in the U.S. Armed Forces? Yes <input type="checkbox"/> No <input type="checkbox"/>	If YES, Branch	Serial Number	
Type of Discharge	Date of Service From To	Rank	
<p>A. While in the military, were you ever arrested, detained, summoned, or placed on restricted duty for an offense which resulted in a trial by deck court or by summary, special or general court-martial, Article 15, captain's mast or an equivalent proceeding? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, give date, place, law enforcing authority or type of court or court-martial, charge and action taken for each incident, using separate sheet or section 23 to record this information.</p>			
<p>B. Are you now a member of the U.S. Reserve or National or State Guard organization? Yes <input type="checkbox"/> No <input type="checkbox"/></p>			
11. Education:		Attach diploma or certificate of graduation	
A. List all high schools attended. Name, Location, Dates Attended	Address	Dates Attended	Years Completed
			Graduated Yes No <input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/> <input type="checkbox"/>
<p>C. List your vocational or technical training. List all public safety training. Give the name for each and the location of school, dates attended, subjects studied, certificate, and any other pertinent data. Include college courses in Criminal Justice or Law Enforcement.</p>			
<p>12. Do you speak a language other than English? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, what language(s) do you speak?</p>			
13. Special Qualifications and Skills:			
<p>A. Have you ever applied for certification or been certified as a law enforcement officer Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, where and when?</p>			
<p>B. Have you ever had a law enforcement certification revoked or suspended? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, where, when, and why?</p>			
14. Vehicle Operator's License (<i>Drivers, Commercial Drivers License, etc.</i>): Give the following information concerning any vehicle operator's license you have held or now hold. If more space is needed, please list information in section 23.			
Kind of License and Number	Place of Issue	Date of Expiration	Restrictions
<p>Have you ever been denied issuance of a license or have you ever had a license suspended or revoked? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain fully:</p>			
15. Family:			
<p>List in the order given, showing relationship, parents, guardians, stepparents, foster parents, parents-in-law, spouse, former spouses, brothers, and sisters. Include any others you have resided with or whom a close relationship existed or exists.</p>			
Relationship/Date	Name	Present Address if living	
Father			
Mother			
<p>If any person listed above is not a U.S. citizen by birth, give the date and place of birth, the date and port of entry, alien registration number, naturalization certificate number, and place of issuance.</p>			

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16. Employment: Begin with your most recent job and list your work history for the past TEN years, including part-time, temporary or seasonal employment; **include all periods of unemployment.**

From Date	Name and Address of Employer		Reason for leaving?	Job Title
To Date			Description of Duties	
Salary	Name of Supervisor	Phone	Name of Co-worker	Phone
From Date	Name and Address of Employer		Reason for leaving?	Job Title
To Date			Description of Duties	
Salary	Name of Supervisor	Phone	Name of Co-worker	Phone
From Date	Name and Address of Employer		Reason for leaving?	Job Title
To Date			Description of Duties	
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Salary	Name of Supervisor	Phone	Name of Co-worker	Phone
From Date	Name and Address of Employer		Reason for leaving?	Job Title
To Date			Description of Duties	
Salary	Name of Supervisor	Phone	Name of Co-worker	Phone

Have you ever been fired, discharged, asked to resign, furloughed, put on inactive status for cause, or disciplined, in any position (*except military*)? Yes No If yes, state circumstances:

Have you ever resigned (*quit*) after being informed your employer intended to discharge (*terminate or fire*) you for any reason? Yes No If yes, explain, giving name and address of employer, approximate date, and reasons in each case.

17. Arrest, Detention, and Litigation: <i>(Show all arrests including traffic, except parking)</i> .					
If the answer to any of these questions is YES, list the date, place, and full details of each incident on a separate sheet or in section #23.					
A. Have you ever been arrested or detained by law enforcement? Yes <input type="checkbox"/> No <input type="checkbox"/> . When, where, and why were you detained?					
B. Have you ever been convicted of a crime? Yes <input type="checkbox"/> No <input type="checkbox"/> . Please list all convictions, even if they were suspended, expunged, or pardoned:					
C. Have you ever been fingerprinted for any reason (<i>arrest, job applicant, etc.</i>)? Yes <input type="checkbox"/> No <input type="checkbox"/> . When and why were you fingerprinted?					
D. Have you ever been convicted of a misdemeanor crime of domestic violence? Yes <input type="checkbox"/> No <input type="checkbox"/> . If yes, when and where did this occur?					
E. Have you ever been served with, or subject to, a court ordered protective order? Yes <input type="checkbox"/> No <input type="checkbox"/> . If yes, when and where did this occur?					
F. List all traffic citations ever received (<i>except parking</i>) including the date, place and full details of each incident.					
18. Drug Use:					
Within the past twelve months, have you used any illegal drug(s) or other illegal substances? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, complete the following:					
Name of Drugs					Date of last use
19. Residences: List all residences for the past 10 years, beginning with your present address.					
Month and Year		Address	City	State or Country	Landlord and Phone No.
From	To				
20. References:					
CHARACTER REFERENCES (do not include relatives, former employers, or persons living outside the United States or its Territories). List only character references who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors. List a minimum of three (3) character references. Use Section 23 for additional references.					
Name		Street	City & State	Phone	Email
21. Organization Membership:					
Yes	No				
<input type="checkbox"/>	<input type="checkbox"/>	Are you now or have you ever been a member of or affiliated with any organization or association which, according to your knowledge at the time of your membership, advocated the overthrow of the government of the United States or of this state by force, violence, or other unconstitutional means, or which has adopted the 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 of this state?			
<input type="checkbox"/>	<input type="checkbox"/>	If so, was your membership in or affiliation with the organization or association, with the specific intent to achieve the overthrow of the government of the United States or of this state by force, violence or other unconstitutional means, or to commit acts of force or violence to deny other persons their rights under the Constitution of the United States or of this state?			
If YES to either of the questions above, describe the circumstances. Attach additional sheets for a full detailed statement. Specify nature and extent of association with each organization, including office or position held, also include dates, places, and credentials now or formerly held.					

22. Are there any incidents in your life not mentioned herein which might reflect upon your suitability to perform the duties which you may be assigned or which might require further explanation? Yes No If YES, give details:

23. Remarks or additional information from previous questions:

**ALASKA POLICE STANDARDS COUNCIL
ACKNOWLEDGEMENT & OFFICIAL
INFORMATION RELEASE**

I, _____ authorize release of all information pertaining to me from the records of credit bureaus, educational institutions, military services, law enforcement agencies and present and past employers, to my prospective employer and the Alaska Police Standards Council. I also authorize the Alaska Police Standards Council to release to any law enforcement agency, information which the council obtains regarding my qualifications to be a certified officer.

A photocopy or electronic copy of this authorization is as valid as the original. This authorization does not expire until the Alaska Police Standards Council is notified in writing.

I hereby certify that I have personally completed each page of this form and any attached supplemental page(s), and that all statements made are true and complete to the best of my knowledge and belief. I understand that any misstatement of material fact may subject me to disqualification; or, if I have been appointed, may disqualify me from continued employment.

I further agree and consent in advance to being summarily discharged without cause or hearing if any of the information that I have provided contains any misrepresentation or falsification or if any requested information has been knowingly omitted. I acknowledge that information on this form will be used by the council to determine my eligibility and qualifications for employment, training, and certification.

I swear and affirm, under penalty of Perjury (AS 11.56.200) and/or Unsworn Falsification (AS 11.56.210), that the information provided in this Personal History Statement is true and accurate to the best of my knowledge.

Done at _____ on the _____ day of _____, _____.
(City), (State)

Applicant

Sworn and Subscribed before me
This _____ day of _____, _____.

Notary Public in and for the state of _____

My commission expires _____