**University of California Police Department**

**Community Service Organization EMPLOYMENT APPLICATION**

Please read through the entire application before answering. Respond to all questions as completely and accurately as possible. If you don't answer a question, please explain. All statements are subject to verification. Inaccurate statements may prevent or remove a candidate from employment. If the space provided is inadequate, attach additional page(s) and identify further information. Please type or print legibly in **ink** (blue or black). If you have any questions, please call 893-2325.

**Section A: PERSONAL INFORMATION**

Name:

Other Names Used:

Permanent Address:

Resident Address:

Local Phone Number: Permanent Phone Number:

Date of Birth: Place of Birth:

Class Level:

E-mail address:

Are you a citizen of the United States? Yes No

If not, are you authorized to work in the United States? Yes No

The University of California, in compliance with Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, (45 CFR 86), and Sections 503 and 504 of the Rehabilitation Act of 1973, does not discriminate on the basis of race, color, national origin, religion, sex, or handicap in any of its policies, procedures or practices; nor does the University, in compliance with the Age Discrimination in Employment Act of 1967, as amended, and Section 402 of the Vietnam Era Veterans Readjustment Act of 1974, discriminate against any employees or applicants for employment on the basis of their age or because they are disabled veterans or veterans of the Vietnam Era. This nondiscrimination policy covers admission, access, and treatment in University programs and activities, and application for and treatment in University employment.

In conformance with University policy and pursuant to Executive Order 11246 as amended, Section 503 of the Rehabilitation Act of 1973 and Section 402 of the Vietnam Era Veterans Readjustment Act of 1974, the University of California is an affirmative action/equal opportunity employer. Inquiries regarding the University's equal opportunity and affirmative action policies may be directed to the Affirmative Action Coordinator, at (805) 893-2089.

**Section B: WORK HISTORY**

List below all previous job experience, starting with your last (or current) employment. Be complete. Include zip codes and complete phone numbers.

From Employer Job Titles & Duties

Mo/Yr

To Address

Mo/Yr

Total City & State

Period

Yrs/Mos Type of Business

Hrs/Wk Supervisor Phone

Salary Reason for Leaving

Start

May we contact this employer? Yes No

Last

From Employer Job Titles & Duties

Mo/Yr

To Address

Mo/Yr

Total City & State

Period

Yrs/Mos Type of Business

Hrs/Wk Supervisor Phone

Salary Reason for Leaving

Start

May we contact this employer? Yes No

Last

From Employer Job Titles & Duties

Mo/Yr

To Address

Mo/Yr

Total City & State

Period

Yrs/Mos Type of Business

Hrs/Wk Supervisor Phone

Salary Reason for Leaving

Start

May we contact this employer? Yes No

Last

**Section C: REFERENCES**

List two non-relatives, non-employers who have known you for at least three years.

NAME RELATIONSHIP PHONE OCCUPATION

1.

2.

**Section D: RESIDENCES**

List addresses since entering high school. Start with your present address.

DATES ADDRESS CITY & STATE

1.

2.

3.

4.

**Section E: BACKGROUND**

1. Indicate below the schools you have attended beginning with high school. Include graduate and extension work.

NAME LOCATION DATES ATTENDED YEAR GRADUATED

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

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2. Have you ever been expelled, suspended, or disciplined by any school official? Give details and circumstances.

3. What is your major at UCSB? If you have not declared a major, please list your area of interest.

4. CSOs are expected to work an average of 45 hours per month, including at least three graves (10 p.m. until 4 a.m.). Do you feel that you can do this job and still maintain your desired level of academic achievement and standing? Explain.

5. What is your cumulative G.P.A.?

6. When do you plan to graduate or leave UCSB?

7. Have you ever applied for a job with any Police Department? Yes No

If yes, when, and where?

8. Have you ever been convicted of any crime (including but not limited to misdemeanors and infractions)? Yes No

If yes, give details below. Include the crime, charge, police agency who made the arrest, date of arrest, and disposition of the case.

9. Have you ever been placed on probation? Yes No

If yes, give details below.

10. List past and present extracurricular involvement and/or volunteer experience.

11. List any additional skills or activities that may be relevant.

**Section F: DRIVING RECORD**

Applicants **are required** to provide a copy of their DRIVING RECORD in addition to the information below. (Obtain a complete copy of your record from the Department of Motor Vehicles. There is a $5.00 charge to obtain this record from the DMV.)

1. Do you possess a valid Driver's License? Yes No

If yes, give State issued and number.

2. Has your license ever been suspended, revoked, or placed on negligent status?

Yes No

If yes, give State and reason. Has your license been restored? Yes No

3. Have you ever been involved in a motor vehicle accident? Yes No

If yes, give complete details for each accident, including whether collision or non-collision.

Date: Police Investigation: Yes No

Location: Injury or Non-injury:

Cause of Accident: Who was legally at fault?

Date Police Investigation: Yes No

Location: Injury or Non-injury:

Cause of Accident: Who was legally at fault?

4. List below all traffic citations you have received except for parking tickets.

LOCATION (CITY) APPROX. DATE VIOLATION DISPOSITION

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section G: CSO AGREEMENT**

Please read carefully and answer the following questions. These questions are not arbitrary. They represent some of the duties and responsibilities that are expected of all CSOs.

Will you be able to participate in CSO Training for before the beginning of Fall Quarter? Yes No

Are you willing to work a graveyard shifts (10 p.m. until 4 a.m.)? Yes No

Do you object to working your graveyard shifts on Friday or Saturday nights for a full quarter? Yes No

CSOs work many types of special event hours (e.g. dances, athletic games, fixed post security, etc.), in addition to scheduled shifts. Are you willing to work your fair share of special event hours? Yes No

Are you willing to be called into work on short notice if needed in an urgent or emergency situation? Yes No

The job that CSOs do is one that is performed 365 days a year. This means that CSOs work over vacations. CSOs are required to pick one of the break periods to work, are you willing to do this? Yes No

All CSOs will be expected to work certain major events each year, including Bike Auctions, Halloween, Extravaganza and Commencement. Are you willing to work these events as assigned? Yes No

CSOs work with partners, but partners do not always ride together. Do you object to working alone at night? Yes No

CSO is committed to fair treatment for all individuals and does not condone or allow any form of discrimination (including discrimination based on race, color, sex, sexual orientation, age, physical ability, religion, or national origin). Are you willing to support this commitment? Yes No

**Section H: CERTIFICATION**

I hereby certify that all statements made in the above questionnaire are true.

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

**Section I: AUTHORIZATION TO RELEASE INFORMATION**

As an applicant for a position with the Community Service Organization, I am required to furnish information for use in determining my moral, mental, and physical qualifications. In this connection, I authorize release of any and all information that you may have concerning me, including information of a confidential or privileged nature.

I hereby release you, your organization, or others from any liability or damage which may result from furnishing the information requested.

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