



**Office of Professional Standards
Background and Recruiting Unit**

REQUIRED DOCUMENTS

The items listed below are needed to complete processing of your application for the position of Police Officer. These items should be turned in with your completed background information booklet. Applicants not returning the material by the deadline will be removed from the eligibility roster. While we realize some documents may take longer to obtain than allowed in this period, every effort should be made to return the completed information. When filling out the background booklet, include **COMPLETE** information including addresses, zip codes, and telephone numbers where specified.

INCOMPLETE BOOKLETS WILL RESULT IN REMOVAL FROM THE ROSTER.

1. A copy of your driver's license
2. A copy of your social security card
3. A copy of your birth certificate and/or naturalization paperwork
4. A copy of your high school diploma or GED certificate, (official transcripts are required if you do not have diploma or certificate)
5. A copy of your DD214 form (if applicable)
6. A copy of your marriage license (if applicable)
7. A transcript of any major court cases you have been involved in (if applicable)
8. A copy of divorce decree (if applicable)
9. An official copy of college transcripts and/or certificates of training you have received
10. A copy of your Georgia and/or Out of State seven (7) year driver's history (this can be obtained through the Department of Driver Services, www.dds.ga.gov), with attached purchase receipt.
11. An official copy of Entrance Exam test results (if applicable)
12. Two passport photographs (this can be obtained at your local CVS, Walgreen's, or Wal-Mart stores)

If you have any questions concerning this process, please call the Background and Recruitment Unit at (770) 477-3534.



Clayton County Police Department Background and Recruiting Unit

AUTOMATIC APPLICATION DISQUALIFIERS NON SWORN

(Effective 04-13-2020)

DRIVING

- ✓ More than five (5) points for moving violations in the past two (2) years.
- ✓ Any current driver's license suspensions
- ✓ Any conviction of driving under the influence of drugs or alcohol, aggressive driving, racing, or leaving the scene of an accident, or any other serious traffic offenses within the past two (2) years.
- ✓ Any serious traffic offenses pending adjudication.

DRUGS

- ✓ Marijuana use at all in the past one (1) year.
- ✓ **Any** excessive drug use, including marijuana (will be reviewed on a case by case basis)
- ✓ Any illegal drug use, other than marijuana, (including anabolic steroids after February 27, 1991) at all in the past 10 years.
- ✓ Any involvement in the sale, distribution, manufacturing or transportation of any illegal drug to include acting as a third party. This includes arranging the sale, distribution, manufacturing or transportation of any illegal drug in the past 10 years.
- ✓ Use of any prescription drug or legally obtainable substance in a manner for which it was not intended within the past three years.

TATTOOS

- ✓ Visible tattoos above or on the neck and/or face are prohibited.
- ✓ Visible tattoos on the hands and fingers are prohibited, but will be considered at the discretion of the Chief of Police.

CRIMINAL CONVICTIONS AND ARRESTS

Note: The term *conviction* and *convicted* refers to the final judgment on a verdict of guilty, a plea of guilty, or a plea of nolo contendere.

- ✓ Conviction of any felony or any crime involving moral turpitude (crimes contrary to justice, honesty, or good morals).
- ✓ Any conviction of fleeing or attempting to elude, or obstruction of a police officer.
- ✓ Any conviction of impersonating a Law Enforcement Officer.
- ✓ Any conviction of family/domestic violence as defined by OCGA § 19-13-1.
- ✓ Any arrest within the previous five (5) years, or any arrest that is pending adjudication.
- ✓ Currently serving a sentence on probation.
- ✓ **Note:** Successful completion of first offender probation means that a person will not be considered to have a criminal conviction; however, **OCGA § 42-8-63.1(b) states that a discharge under first offender probation may be used to disqualify a person from acquiring or maintaining a peace officer certification.** Accordingly, the Clayton County Police Department reserves the right to examine any conduct that involves moral turpitude, violence, felony offense or other behaviors that could adversely affect an applicant's performance as a police officer on a case-by-case basis. Therefore, applicants must disclose any first offender status events and fully explain the circumstances that lead to their arrest.

MILITARY

- ✓ Dishonorable or less than honorable discharge from any military service.
- ✓ General discharges will be judged on a case-by-case basis.

GA POST CERTIFIED OFFICER(S)

Any applicant who holds a POST certification as a Peace Officer, Probation/Parole Officer, Corrections Officer, Jailor, and/or Communications Officer must be in **Good Standing** with the Georgia Peace Officer Standards and Training Council (GA POST) to be considered for the position of Police Officer with Clayton County Police Department.

Untruthfulness and/or the intentional withholding of information on any application, interview, or paperwork associated with the applied position. Examples of intentional withholding of information would include deliberate inaccuracies or incomplete statements.



Office of Professional Standards
Background and Recruiting Unit

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PRELIMINARY INTERVIEW AFFIDAVIT

Non-Sworn Applicants
(01/04/2022)

After reading each requirement below, sign your initials by each line to indicate your acknowledgement and affirmation of the corresponding statement.

- _____ I am a citizen of the United States of America or a legal resident alien.
- _____ I am at least **18** years old.
- _____ I possess a high school diploma or its recognized equivalent.
- _____ I have uncorrected vision of at least 20/200, corrected to 20/20 in one eye and 20/40 in the other eye with no color vision deficiencies.
- _____ I do/will possess a valid Georgia Driver's License by the date of my hire.
- _____ I currently have less than 6 points for moving violations on my driver's license.
- _____ I have never had any disciplinary action (suspension, revocation, etc.) taken against me by any certifying or licensing authority, nor been denied license or certification by such authority.
- _____ I have no record of conviction for a felony crime.
- _____ I have no record of a series of misdemeanor crimes which would indicate a pattern of disregard for the law.
- _____ I have no record of conviction for an offense involving domestic violence (misdemeanor or felony).
- _____ I have never committed a crime involving moral turpitude (without regard to conviction).
- _____ I have never been a member of a street gang.
- _____ I am not currently using any illegal drug.
- _____ I do not have a history of illegal drug usage which would interfere with my successful performance of the duties required of a Police Officer.
- _____ I do not currently abuse alcohol.

I hereby certify and affirm that all answers and subsequent statements made in this questionnaire are true and correct. I further understand that any misrepresentation of material facts will subject me to disqualification for employment consideration, or dismissal from the Clayton County Police Department.

Signature of Applicant

Date

Sworn to and subscribed before me this _____ day of _____, 20____

Notary Seal
Here

Notary Public



**Office of Professional Standards
Background and Recruiting Unit**

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I, _____, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the Clayton County Police Department, Internal Affairs Unit, whether the said records are of a 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 loans, the records of commercial or retail credit agencies (including credit reports and/or ratings), and other financial statements and records wherever filed; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the US. Veteran's Administration; employment and pre-employment records, including background reports, polygraph reports and charts; efficiency ratings; complaints or grievances filed by or against me; and the records and recollections of attorneys at law, or of other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have or have had an interest.

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 Clayton County Police Department. **I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.**

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

Signature: _____

Address: _____

DOB: _____ SSN: _____

Notary Seal
Here

Sworn to and subscribed before me this _____ day of _____, 20____

Notary Public



Office of Professional Standards
Background and Recruiting Unit

CONSENT FORM

I hereby authorize the Clayton County Police Department, Background and Recruitment Unit to receive any criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency.

Full Name (Printed)

Address

RACE _____ SEX _____ DOB _____ SSN _____

Signature

Date

Notary Seal
Here

Sworn to and subscribed before me this _____ day of _____, 20____

Notary Public



**Office of Professional Standards
Background and Recruiting Unit**

APPLICANT EMPLOYMENT VERIFICATION

Do you give the Background and Recruitment Unit permission to conduct a work record check with your current employer? Yes _____ No _____

If you do not wish for us to do so at this time, please list all disciplinary actions taken against you, or pending, by your current employer. This information will be verified prior to your being employed with Clayton County.

Any falsification or omission will result in your name being removed from the eligibility roster.

Signature

Date

Notary Seal
Here

Sworn to and subscribed before me this _____ day of _____, 20____

Notary Public



**Office of Professional Standards
Background and Recruiting Unit**

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I authorize the National Personnel Records Center, St. Louis, Missouri, or other custodian of my military records to release to Clayton County Police Department, Background and Recruitment Unit, information or photocopies from my military personnel and related medical records. This could include a photocopy of my DD214 form, Report of Separation, or Article 15's and/or non-judicial punishment.

Signature

Date

Sworn to and subscribed before me this _____ day of _____, 20____

Notary Seal
Here

Notary Public



Office of Professional Standards
Background and Recruiting Unit

Social Media Usage Affidavit
(Effective October 27, 2014)

Clayton County Police Department Standard Operating Procedure B17: *Use of Social Media* states:

"All new candidates seeking employment as a sworn peace officer shall be required to complete an affidavit indicating their participation in any social media website for the previous three (3) years prior to the date of application. This affidavit will include the name of the sites he/she has joined or has used with the past three (3) years. The candidate may be required to provide Internal Affairs with access to these sites as part of the background investigation process."

Within the previous three (3) years I, _____, have not participated in any form of social media to include, but not limited to, Facebook, Instagram, MySpace, Twitter, etc.

Within the previous three (3) years I, _____, have participated in the following forms of social media:

Candidate Signature

Date

Sworn to and subscribed before me this _____ day of _____, 20_____.

Notary Seal
Here

Notary Public Signature

Applicant Privacy Rights

As an applicant who is the subject of a Georgia only or a Georgia and Federal Bureau of Investigation (FBI) national fingerprint/biometric-based criminal history check for a non-criminal justice purpose (such as an application for criminal justice or non-criminal justice employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulation (CFR), 50.12, among other authorities.

- You must be provided written notification that your fingerprints/biometrics will be used to check the criminal history records maintained by the Georgia Crime Information Center (GCIC) and the FBI, when a federal record check is so authorized.
- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or explained.
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on the information in the criminal history record.
- If agency policy permits, the officials may provide you with a copy of your criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may find information regarding how to obtain a copy of your Georgia criminal history record at the GBI website: <https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions> Information regarding how to obtain a copy of your FBI criminal history record is located at the FBI website: <https://www.edo.cjis.gov>
- If you decide to challenge the accuracy or completeness of your criminal history record, you should contact and send your challenge to the agency that contributed the questioned information. If the disputed arrest occurred in the State of Georgia, you may send your challenge directly to the GCIC. Contact information for the GCIC can be found at <https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions> Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenge entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for the authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

Privacy Act Statement

This privacy act statement is located on the back of the (blue) FD-258 fingerprint card.

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principle Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 02/04/2021

**Applicant Privacy Rights
Notification Signature Form**

Applicant Notification and Record Challenge:

Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure of obtaining a change, correction or updating an FBI identification record is set forth in Title 28, Code of Federal Regulations (CFR), 16.34.

Procedures for obtaining a copy of the FBI criminal history record are set forth in 28 CFR 16.30 through 16.33 or review the [FBI website](#).

Signature

Print Name

Date

Background Investigator: _____
Date of Assignment: _____



**Office of Professional Standards
Background and Recruiting Unit**

APPLICANT WORK LIST

Applicant: _____ DOB: _____ SSN: _____

PAA Test Date / Time: _____ / _____ course time: _____ Pass/Fail

Polygraph Examination Date/Time: _____

Medical Examination Date/Time: _____

Psychological Examination Date/Time: _____

Chief's Interview Date/Time: _____

APPLICATION FILE CHECKLIST

- | | |
|--|--|
| <input type="checkbox"/> Application Documentation | <input type="checkbox"/> Applicant Information Sheet |
| <input type="checkbox"/> HR Application Copy | |
| <input type="checkbox"/> Resume (if provided) | <input type="checkbox"/> Gang Research Request & Response |
| <input type="checkbox"/> Entrance Exam (if applicable) | <input type="checkbox"/> Background Packet |
| Exam Type: _____ | <input type="checkbox"/> Appendix A: GCIC Results |
| <input type="checkbox"/> Screening Process (non-sworn apps) | <input type="checkbox"/> Appendix B: Local Records Checks & related Incident Reports |
| <input type="checkbox"/> PAA Release from Liability | |
| <input type="checkbox"/> POST Record (if applicable) | <input type="checkbox"/> Appendix C: Work History |
| <input type="checkbox"/> Peace Officer | <input type="checkbox"/> Appendix D: Other L.E. Applications |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Appendix E: Personal Verifications |
| <input type="checkbox"/> Preliminary Affidavit/Consent Forms | <input type="checkbox"/> Appendix F: Misc. Certifications |
| <input type="checkbox"/> Identification Documentation | <input type="checkbox"/> Appendix G: Court Documentation |
| <input type="checkbox"/> Driver's License | <input type="checkbox"/> Updated on Applicant Track |
| <input type="checkbox"/> Social Security Card | |
| <input type="checkbox"/> Birth Certificate | |
| <input type="checkbox"/> Naturalization Certification | |
| <input type="checkbox"/> Marriage License | |
| <input type="checkbox"/> Divorce Decree | |
| <input type="checkbox"/> Driver's History/MVR | |
| <input type="checkbox"/> Education: | |
| <input type="checkbox"/> High School Diploma or transcripts | |
| <input type="checkbox"/> College Transcripts | |
| <input type="checkbox"/> Military | Review: Initials/Date |
| <input type="checkbox"/> DD214 | Supervisor _____ |
| <input type="checkbox"/> Letter of Good Standing | |
| <input type="checkbox"/> Fingerprints & Response | Commander _____ |

Clayton County Police Department

ONE MISSION. ONE VISION.

YOUR FUTURE.



Full Name: _____

Position Applied For: _____

INSTRUCTIONS:

READ THIS BEFORE COMPLETING THE PACKET!

- The answers in this packet must be typed or printed legibly in black or blue ink by the applicant.
- All questions must be answered accurately and in complete detail, including when and where explanations are required.
- Regarding any question not applicable to you, write "N/A" as your response to indicate that the question does not apply to you. Do not leave any question or section blank. Failure to provide an answer or response to any question or section may be considered an intentional omission of information and could result in your disqualification from the application process.
- If additional space is needed for any required explanation or other pertinent information in this packet, attach additional pages behind the corresponding question/page and note the number of the question being further explained or supported.

Clayton County Police Department Disclaimer:

It is a requirement that you complete this background packet with TRUTHFUL and COMPLETE responses. Failure to do so will result in disqualification and dismissal from the process. Furthermore, discovery of intentional omissions or inaccurate answers will also be a basis for termination of employment, and could result in criminal prosecution under O.C.G.A. § 16-10-20. All information is subject to verification through a background investigation, to include a polygraph examination.

I understand and acknowledge the *Clayton County Police Department Disclaimer* and do hereby authorize the Clayton County Police Department to conduct a background investigation of all information typed, written and/or provided within this packet for the application process.

Applicant Signature: _____

Date: _____

Applicant Name: _____

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IDENTIFICATION INFORMATION

1. Applicant's Name:

First	Middle	Last	Suffix

2. Aliases and/or Nicknames:

List all known aliases and/or nicknames, to include any legal and maiden names

3. Current Residential Address:

Number	Street	City	State	Zip Code

4. Contact Information:

Cell Number	Other Number	Email

5. Birth and Citizenship Information:

Birth date	Place of Birth	U.S. Citizen Yes or No	Social Security #

6. Citizenship Status. Fill out the box which applies to you (Yes or No):

Natural Born	Naturalized	Resident Alien	Document ID #

7. List all group and/or organization affiliations, memberships and/or hobbies:

EDUCATION & TRAINING

10. High School or GED Information

List all high schools you attended.

School Name/GED Name and Address	Graduate? Yes or No, If Yes, include Date (mm/yyyy)	Diploma or GED

11. College Information

List all colleges, universities, and/or technical schools you attended.

School Name	Time Frame (mm/yyyy)	Type of Degree earned or hours/credits Completed

12. Specialized Training and/or Certifications

List all training and/or certifications you have obtained that you feel are relevant to your application.

Certification and/or Hours Completed	Year Earned	Institution Name

FINANCIAL & LEGAL HISTORY

13. List any additional or secondary sources of income, other than your current primary salary or wages.

Source of Income	Amount (indicate monthly or yearly)

14. List all motor vehicles and/or a motorcycles you currently own or lease:

Make	Model	Year	Tag #	State of Registration

15. Do you owe any money to any current and/or former employers? Yes { } or No { }

If Yes, explain:

16. Have you ever been evicted? Yes { } or No { }

If Yes, explain:

17. Have you ever been involved in any civil litigation (for example, a lawsuit and/or divorce)? Yes { } or No { }

If Yes, explain:

EMPLOYMENT HISTORY

18. List ALL JOBS you have held within the past ten (10) years. Beginning with your most recent or current position and ending with the oldest, include full-time, part-time, temporary, voluntary, military service, internships and all periods of unemployment. Should you need additional space for work history, attach supplemental documentation with information listed in the same format as below.

FULL TIME { } PART TIME { } TEMPORARY { } VOLUNTARY { } UNEMPLOYED { }

FROM _____ TO _____ POSITION _____ SALARY _____

NAME OF EMPLOYER _____

PHONE # _____ FAX # _____

ADDRESS, CITY, STATE AND ZIP CODE

NAME AND TITLE OF SUPERVISOR _____

DUTIES _____

RESIGNED { } LAID OFF { } RESIGNED IN LIEU OF TERMINATION { } FIRED OR TERMINATED { }

REASON FOR LEAVING (be specific) _____

Continued on next page...

FULL TIME { } PART TIME { } TEMPORARY { } VOLUNTARY { } UNEMPLOYED { }

FROM _____ TO _____ POSITION _____ SALARY _____

NAME OF EMPLOYER _____

PHONE # _____ FAX # _____

ADDRESS, CITY, STATE AND ZIP CODE

NAME AND TITLE OF SUPERVISOR _____

DUTIES _____

RESIGNED { } LAID OFF { } RESIGNED IN LIEU OF TERMINATION { } FIRED OR TERMINATED { }

REASON FOR LEAVING (be specific) _____

FULL TIME { } PART TIME { } TEMPORARY { } VOLUNTARY { } UNEMPLOYED { }

FROM _____ TO _____ POSITION _____ SALARY _____

NAME OF EMPLOYER _____

PHONE # _____ FAX # _____

ADDRESS, CITY, STATE AND ZIP CODE

NAME AND TITLE OF SUPERVISOR _____

DUTIES _____

RESIGNED { } LAID OFF { } RESIGNED IN LIEU OF TERMINATION { } FIRED OR TERMINATED { }

REASON FOR LEAVING (be specific) _____

FULL TIME { } PART TIME { } TEMPORARY { } VOLUNTARY { } UNEMPLOYED { }

FROM _____ TO _____ POSITION _____ SALARY _____

NAME OF EMPLOYER _____

PHONE # _____ FAX # _____

ADDRESS, CITY, STATE AND ZIP CODE

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DUTIES _____

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FULL TIME { } PART TIME { } TEMPORARY { } VOLUNTARY { } UNEMPLOYED { }

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DUTIES _____

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FULL TIME { } PART TIME { } TEMPORARY { } VOLUNTARY { } UNEMPLOYED { }

FROM _____ TO _____ POSITION _____ SALARY _____

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ADDRESS, CITY, STATE AND ZIP CODE

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DUTIES _____

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FULL TIME { } PART TIME { } TEMPORARY { } VOLUNTARY { } UNEMPLOYED { }

FROM _____ TO _____ POSITION _____ SALARY _____

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NAME AND TITLE OF SUPERVISOR _____

DUTIES _____

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REASON FOR LEAVING (be specific) _____

FULL TIME { } PART TIME { } TEMPORARY { } VOLUNTARY { } UNEMPLOYED { }

FROM _____ TO _____ POSITION _____ SALARY _____

NAME OF EMPLOYER _____

PHONE # _____ FAX # _____

ADDRESS, CITY, STATE AND ZIP CODE

NAME AND TITLE OF SUPERVISOR _____

DUTIES _____

RESIGNED { } LAID OFF { } RESIGNED IN LIEU OF TERMINATION { } FIRED OR TERMINATED { }

REASON FOR LEAVING (be specific) _____

FULL TIME { } PART TIME { } TEMPORARY { } VOLUNTARY { } UNEMPLOYED { }

FROM _____ TO _____ POSITION _____ SALARY _____

NAME OF EMPLOYER _____

PHONE # _____ FAX # _____

ADDRESS, CITY, STATE AND ZIP CODE

NAME AND TITLE OF SUPERVISOR _____

DUTIES _____

RESIGNED { } LAID OFF { } RESIGNED IN LIEU OF TERMINATION { } FIRED OR TERMINATED { }

REASON FOR LEAVING (be specific) _____

FULL TIME { } PART TIME { } TEMPORARY { } VOLUNTARY { } UNEMPLOYED { }

FROM _____ TO _____ POSITION _____ SALARY _____

NAME OF EMPLOYER _____

PHONE # _____ FAX # _____

ADDRESS, CITY, STATE AND ZIP CODE

NAME AND TITLE OF SUPERVISOR _____

DUTIES _____

RESIGNED { } LAID OFF { } RESIGNED IN LIEU OF TERMINATION { } FIRED OR TERMINATED { }

REASON FOR LEAVING (be specific) _____

MILITARY EXPERIENCE

(All fields must be filled out completely)

Submit a clear and valid DD-214 form with your background packet. If you are currently in an active reserve status, submit a letter of good standing with your DD-214 form.

19. Did you serve in the military? (Yes or No) _____. If you answered "No", move on to page 13.

20. Check all that apply:

Air Force { } Army { } Coast Guard { } Marines { } Navy { } National Guard { }

Reserves { }, What Branch

Other Department of Defense Service { }, name of Department

21. Your dates of Service:

Branch/Dept.	From (Month/Year)	To (Month/Year)	Discharge

22. Character of Service/Discharge Honorable? Yes { } or No { } If "No" please provide an explanation of the type of service/discharge you received below.

Type of Service/Discharge:
Explanation:

23. Have you ever received an Article 15, or Captain's Mast, or any other disciplinary action while in the military? Yes { } or No { } If Yes, explain:

LAW ENFORCEMENT EXPERIENCE

25. List the total number of years and months experience as a certified law enforcement officer in any state and/or country:

Agency Name & State/Country	Address & Contact #	Last Position Held	Time Frame (mm/yyyy)

26. If you hold a Georgia P.O.S.T Certification, provide the certification type and number:
 Type of Certification: _____ Certification Number: _____

27. If applicable, list your Public Safety Certification from any other state and/or country:
 Type of Certification: _____ Certification Number: _____
 State/Country: _____

28. In the table below, list any and all disciplinary action(s) received while working in a law enforcement position. Include any oral or written reprimands, suspensions, demotions or terminations. Include the date of action, reason for the action (i.e., auto accident, insubordination, violation of departmental policy, etc.). If you are currently the focus of an OPEN investigation, internal affairs, and/or administrative DO NOT list any details of the incident.

Name of Agency	Type of Disciplinary Action	Date of Action	Reason for Disciplinary Action

DRIVER HISTORY

(All fields must be filled out completely)

29. Do you have a current and valid Driver's License? Yes { } No { }

If "Yes", provide the following information:

State of Issue	Driver's License #
Classification	Expiration Date

30. List all of the traffic citations you have within the last ten (10) years, except parking tickets:

Date (Mo. /Yr.)	Traffic Violation	Issuing Agency	Disposition

31. Have you ever possessed a Driver's License from another State, other than Georgia?

Yes { } or No { }. If "Yes", list all the following information below:

State of Issue	Driver's License #	Name Issued To	Dates (Mo. /Yr.)

32. Have you ever possessed a Military Driver's License? Yes { } No { }
 If "Yes", provide the following information:

From (Month)	To (Year)

33. Has your license ever been suspended or revoked by any state and/or jurisdiction?
 Yes { } No { }

Date of License	Reason for Suspension	Date of Reinstatement

34. Have you ever been charged or arrested for a DUI/DWI? Yes { } No { }

Date of Incident	Arresting Agency	Disposition

35. Have you ever been refused a Driver's License by any state? Yes { } No { }
36. Has your auto insurance ever been canceled? Yes { } No { }
37. Were you ever denied auto insurance? Yes { } No { }
38. Did you ever obtain a Driver's License under another name? Yes { } No { }
39. Have you ever been involved in an accident that you failed to report? Yes { } No { }
40. Have you ever been involved in any accident as a driver? Yes { } No { }

CRIMINAL HISTORY

Circle either "Yes" or "No"

- 42. Have you ever been arrested or been the subject of a criminal accusation, complaint or indictment or been required to appear as a suspect or defendant in any criminal proceeding or before any prosecuting officer? **Yes or No**
- 43. Have you ever been arrested or been the subject of a delinquent act, status offense or Juvenile Court proceeding? **Yes or No**
- 44. Have you ever been convicted or pled guilty or pled nolo contendere to a misdemeanor crime? **Yes or No**
- 45. Have you ever been convicted or pled guilty or pled nolo contendere to a felony crime? **Yes or No**
- 46. Have you ever received a sentence under the First Offender Act or are you currently serving probation as a sentence under the First Offender Act? **Yes or No**
- 47. Have you ever been:
 - Sentenced to incarceration? **Yes or No**
 - Placed on Probation? **Yes or No**
 - Placed in a holding cell? **Yes or No**
 - Placed in a military stockade? **Yes or No**
 - Placed in a disciplinary school? **Yes or No**
 - Questioned by the police as a suspect of a crime? **Yes or No**
- 48. If you answered "Yes" to any of the questions (#42 through #47) above, an explanation is required. Include the arresting agency, city and state where the incident(s) took place:

49. Have you ever **COMMITTED OR PARTICIPATED** in any of the following crimes or offenses? This question applies whether you were actually **ARRESTED OR NOT ARRESTED**. Place an **"X"** in the "Yes" or "No" column to indicate whether or not you have committed or participated in the crimes and/or offenses listed:

CRIMES/OFFENSES	YES	NO
Animal Cruelty		
Arson		
Assault and/or Battery		
Burglary and/or Attempted Burglary		
Child Abuse (neglect, cruelty, etc.)		
Criminal Possession of Explosives		
Domestic and/or Family Violence		
Driving Under the Influence (DUI)/Driving While Intoxicated (DWI)		
False Imprisonment		
False Report of a Crime		
False Statements to Law Enforcement Officer		
Financial Crime (embezzlement, forgery, fraud, identity theft, etc.)		
Fleeing and Attempting to Elude a Law Enforcement Officer		
Hijacking an Aircraft and/or Motor Vehicle		
Illegal Possession, Manufacturing, Distribution of Illegal Drugs		
Impersonation of Public Officer, Public Employee, Police Officer		
Kidnapping and/or Attempted Kidnapping		
Moral Turpitude Crime (prostitution, pimping, hiring prostitute, etc.)		
Murder and/or Attempted Murder		
Obstruction or Hindering of a Law Enforcement Officer		
Property Crime (criminal damage to property, vandalism, trespass, etc.)		
Public Order (affray, fighting, rioting, inciting a riot, disorderly conduct, public intoxication, etc.)		
Robbery and/or Attempted Robbery		
Sexual Crime (aggravated sodomy, child molestation, child pornography, exploitation of minor, incest, peeping tom, public indecency, rape, statutory rape, etc.)		

CRIMES/OFFENSES	YES	NO
Stalking and/or Aggravated Stalking		
Tampering with Evidence		
Terroristic Threats and/or Acts		
Theft (shoplifting; theft by deception, conversion, services, lost/mislaid property; receiving stolen property; etc.)		
Theft from Employers		
Theft of Motor Vehicle, Parts and/or Components		
Unlawful Eavesdropping (wiretapping, clandestine surveillance, etc.)		

50. If you answered "Yes" for any of the crimes/offenses listed in the table above (question #49), an explanation is required:

HOMELAND SECURITY

(Circle either "Yes" or "No")

- 51. Have you ever been a member of any group or organization that advocates violent dissent or the overthrow of this government or any other government? **Yes or No**
- 52. Have you ever been a member of a group or organization that advocates violence, racism, or other illegal activities? **Yes or No**
- 53. Have you ever committed Treason? **Yes or No**
- 54. Have you ever participated in the use or manufacture of explosive devices or firebombs? **Yes or No**

55. If you answered "Yes" to any of the questions (#51 through #54) above, an explanation is required:

56. Have you ever been a member of a street gang? **Yes or No**

57. Have you ever been associated with a gang member or a street gang? **Yes or No**

58. If you answered "Yes" to any of the questions (#56 through #57) above, an explanation is required. Include the name of the gang member(s) and/or street gang(s) referenced.

GAMBLING

(Circle either "Yes" or "No")

59. Do you have gambling debts? **Yes or No.**

If "Yes", an explanation is required.

60. What is the most money you have legally bet at one time? _____

61. What is the largest amount of money you have ever lost? _____

62. Did you ever borrow money to pay a gambling debt? **Yes or No**

If "Yes", how many times? _____.

63. Did you ever steal money to pay a gambling debt? **Yes or No**

If "Yes", how many times? _____.

DRUG USE & HISTORY

(All fields must be filled out completely)

64. Have you recreationally, experimentally and/or casually tried and/or used marijuana within the past two (2) years? Yes or No

65. Have you ever used marijuana in any form or by any method, including smoking, inhaling, as edibles, ointments, beverages, etc.? Yes or No

66. Put an "X" in the appropriate box in each column for the following drugs which you have recreationally, experimentally and/or casually used or which you are currently using without a medical prescription within the past ten (10) years. Also include, how often, as well as, the Month and Year of first and last time used for each drug listed.

Name of Drug	First Time Month/Year	Last Time Month/Year	How Often	Never Tried/Used
Amphetamines/Uppers				
Barbiturates/Downers				
Cocaine/Coke				
Codeine				
Crack				
Ecstasy (XTC)/MDMA/MDA				
Heroin				
LSD/Acid/STP				
Marijuana				
Methamphetamine				
Mushrooms/Psilocybin				
Oxycodone				
OxyContin				
PCP/Angel Dust				
Percodan/Percocet				
Speed				
Steroids				
Xanax				

67. Have you ever tried and/or used any illegal drug not listed in the chart above?

Yes { } or No { }

If so, specify.

68. If you have indicated trying or using any illegal drug in the questions (#64 through #67) or chart above, an explanation about trying or using the drugs is required:

(Circle either "Yes" or "No")

69. Have you ever tried and/or used illegal drugs recreationally, experimentally and/or casually, just prior to reporting to work? **Yes or No**

70. Have you ever tried and/or used illegal drugs recreationally, experimentally and/or casually, while at work? **Yes or No**

71. Have you ever tried and/or used illegal drugs recreationally, experimentally and/or casually, during breaks at work? **Yes or No**

72. Have you ever purchased and/or received any illegal drugs? **Yes or No**

73. Have you ever sold any substance(s) that you purported or claimed to be an illegal drug? **Yes or No**

74. Have you ever tried and/or used recreationally, experimentally and/or casually, any prescription drugs or medication not prescribed to you? **Yes or No**

75. Have you ever obtained, possessed and/or stolen any prescription drugs or medication that were not prescribed to you? **Yes or No**

76. If you answered "Yes" to any of the questions (#69 through #75) above, an explanation is required:

ALCOHOL USE & HISTORY

(Circle either "Yes" or "No")

77. Have you ever operated a motor vehicle, motorcycle or boat, while under the influence of alcohol? **Yes or No**
78. Have you ever been stopped for driving under the influence, but not arrested? **Yes or No**
79. Have you ever called in sick because of a "hangover?" **Yes or No**
80. Have you ever consumed alcoholic beverages, just prior to reporting for work? **Yes or No**
81. Have you ever consumed alcoholic beverages, while at work? **Yes or No**
82. Have you ever consumed alcoholic beverages, during breaks at work? **Yes or No**
83. If you answered "Yes" to any of the questions (#77 through #82) above, an explanation is required:

REFERENCES & ACQUAINTANCES

84. References

List the names of four (4) persons not related to you by blood or marriage, and not former employers, who have known you for the last five (5) years. All persons you name may be asked to appraise your character, ability, experience, personality and other qualities.

Name of Person	Contact Number	Address	Occupation	Years Known

85. Acquaintances

List the names of four (4) persons not related to you by blood or marriage, not former employers and not one of the references you listed above. These individuals may include friends, fellow students, and co-workers of people you have seen frequently in the past year. All persons you name may be asked to appraise your character, ability, experience, personality and other qualities.

Name of Person	Contact Number	Address	Occupation	Years Known

Dear Applicant,

Thank you for choosing Clayton County Police Department as your future employer. Take a moment to ensure you have successfully completed the background packet, including all fields with "Yes" or "No" answers and written explanations. Understand that failure to complete the background packet in its entirety, or with TRUTHFUL and COMPLETE responses, will result in disqualification and dismissal from the application process. Should you have any questions regarding the background packet, feel free to call the recruiting hotline: (770) 477-3534. Good luck throughout the rest of the process.

Sincerely,

Clayton County Police Department
Office of Professional Standards & Accreditation
Background & Recruiting Unit



Clayton County Police Department Background and Recruiting Unit

ONE MISSION. ONE VISION. YOUR FUTURE.

Recruiter Contact Information:

Lieutenant C. West

EMAIL: cherie.west@claytoncountyga.gov
Contact: (770) 603-5278

Sergeant K. Fowler

EMAIL: kayce.fowler@claytoncountyga.gov
Contact: (770) 472-8038

Police Officer J. Benson, Jr.

EMAIL: james.benson@claytoncountyga.gov
Contact: (770) 477-3787

Police Officer E. Rainer III

EMAIL: earnest.rainer@claytoncountyga.gov
Contact: (678) 610-4712

Police Officer S. Saint Vil

EMAIL: sunsheba.saintvil@claytoncountyga.gov
Contact: (678) 610-4713

Police Officer A. Stroud

EMAIL: aubriel.stroud@claytoncountyga.gov
Contact: (770) 472-8079

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