

### GRAND RONDE TRIBAL POLICE DEPARTMENT

Office: 503.879.1821 Fax: 503.879.2417 Non-Emergency Dispatch: 503.879.2123

26870 Salmon River Highway, Grand Ronde, Oregon 97347

Mailing Address: 9615 Grand Ronde Road, Grand Ronde, Oregon 97347

## CONFIDENTIAL PERSONAL HISTORY QUESTIONNAIRE

**Candidate Name** 

Please submit photocopies of the following material with this questionnaire, if applicable:

Birth Certificate

Marriage License

Military Records

High School Transcripts

College Transcripts

Drivers License

Social Security Card

Study each question carefully and answer each one fully. If the question does not apply, enter "DNA" in the space provided for the answer. All answers are to be written or printed legibly with pen and ink in your own handwriting if not typed in.

If the space provided to answer the question is insufficient, attach sheets of the same size paper and number the answers to correspond with the questions. This information must be accurately reported because it will be used as a basis for a detailed investigation of your background.

INCLUDE ALL ZIP CODES FOR ALL QUESTIONS REQUIRING AN ADDRESS.



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### **Authority to Release Information:**

I am an applicant for the position of	ecord, job performance, and criminal arrest and I Police Department to ascertain any and all past fications, credit, character, and fitness for the t, and release your organization and all persons ach information. I authorize a true copy of the
<b>School Information Authorization:</b> This is to author Department information regarding my school records a	
Applicant's Signature Date	Print Name
Date of Birth (month/day/year)	Address
Date	City, State, Zip Code
State of OREGON	
County of	
Signed and sworn to (or affirmed) before me on	, 20
by	
Notary Public - State of Oregon	

## **PERSONAL INFORMATION**

1. Position a	pplied for					
2. Full Legal	Name					
-	-	(	)	(	)	
3. Social Sec	curity Number	Hon	ne Phone		Business	s Phone
4. By what o	ther names have	e you been known	? (Middle name, n	ickname, alia	ases, etc.)	
5. During wh	at period and ur	nder what circums	tances?			
6. Current Ad	ddress		City		State	Zip Code
7. Mailing A	ddress (if differe	nt from above)				
8. Height	9. Weight	10.Hair Color	11. Eye Color	12. Age	- 13. Da	- ite of Birth
14. City of Bi	irth		County of Birth		Stat	e of Birth
15 If natural	lized citizen, list	City and State		16	- Date natura	- lized

## **MARITAL STATUS- FAMILY HISTORY**

17.Single / Married / Separated / Divorced / Widowed	18. City / State / Date of Present marriage
19. Spouse's Full Legal Name	
	( )
20. Address (if different than applicant)	Home Phone
21. By what other names has your spouse been known	wn (maiden name, nick name, aliases, etc)
22. Spouse's Birth date	23. Spouse's Occupation
	( )
24. Spouse's Employer	25. Business Phone
26. Name of Former Spouse	27. City/ State/ Date of Former Marriage Performed
28. Address of Former Spouse	29. Grounds for Divorce or Annulment
-	-
30. Who began proceedings? 31. Date Divorce A	action Filed 32. Title of Court Issuing Divorce
33. Location of Court Issuing Divorce	34. Date Final Divorce Filed

35. Amount of Child Sup	port Ordered			
36. Were you ever deling	36. Were you ever delinquent on payments? If yes, explain fully, using extra sheets if needed:			
37. List all children (inclu	de every child born to	you, adopted or step-children included)		
37. List all children (inclu	de every child born to Age	you, adopted or step-children included)  Address (if different from applicant)		

## **RELATIVES AND REFERENCES**

### 38. If living, name the following:

Mother	Address	Phone Number
Father	Address	Phone Number
Father-In-Law	Address	Phone Number
Mother-In-Law	Address	Phone Number
Former Spouse	Address	Phone Number
Former Spouse	Address	Phone Number
Brother(s) & Sister(s)	Address	Phone Number
Brother(s) & Sister(s)	Address	Phone Number
Brother(s) & Sister(s)	Address	Phone Number
Step-Father	Address	Phone Number
Step-Mother	Address	Phone Number
Step-Brother(s) & Step-Sister(s)	Address	Phone Number
Step-Brother(s) & Step-Sister(s)	Address	Phone Number

## **RELATIVES AND REFERENCES continued**

### 39. Other relatives with whom you have a close personal relationship:

Name	Relationship	Address	Phone Number

# 40. Below, please list those individuals with whom you have resided during the last 10 years. List no information prior to your 15<sup>th</sup> birthday.

Name	Relationship	Address	Phone Number

41. Previous Residences. List addresses where you have lived for the last 10 years.	ears. List
your most recent address first. During military service, list all addresses off ba	se other
than government quarters.	

Dates at Address	Complete Address

## **EDUCATION HISTORY**

42. List each junior high school, high school, college or university you have attended. Start with the most recent school you have attended. Use extra sheets of paper if necessary.

Name of School	City/ State	Years Attended	Graduated?	Degree or hours

43. List each trade,	, vocational or business	school you have	attended. L	Jse extra s	heets of
paper if necessary.					

Name of School	City/ State	Years Attended	Graduated?	Course of study

44. If you hold college degrees(s), what is the major subject?
45. One of the requirements is for a police officer to possess a US high school diploma or its equivalent. Please indicate your current situation with regard to this requirement by checking one of the appropriate boxes.
I possess a high school diploma from a US institution.
I passed the GED (General Education Development) test.
I possess a two-year college degree.
I possess a four-year college or university degree.
I do not currently have a high school diploma or its equivalent, but I plan to satisfy the requirement in the
future as follows:
When and how?
46. Were you ever suspended or expelled from any high school, college or university? If so, list the name of the school, reason for the action, and the person's name at the school who

administered the action.

## 47. List all specialized schools and other training courses you have taken. Use extra sheets of paper if necessary.

Name of School	City / State	Years attended	Type of school	Credits / Hours	Type of training

### **WORK HISTORY**

## 48. Begin with your most recent job and list your <u>complete work</u> history in chronological order for the past 10 years.

Include all part-time, temporary, voluntary, and military service. For military service, substitute for the "Name and Address of Immediate Supervisor," the name, address, and rank of the last commissioned officer who was your immediate superior. Use extra sheets of paper if necessary. **INCLUDE ZIP CODES and PHONE NUMBERS.** 

Employed From	Employed To	Name and Address of Employer	
Employer Phone Number		Full-time, part-time, voluntary	
Name and Address of Imm	nediate Supervisor		
Salary		Reason for Leaving	
Job Title(s)		Job Duties	

Employed From	Employed To	Name and Address of Employer
Employer Phone Number		Full-time, part-time, voluntary
Name and Address of Imm	ediate Supervisor	
Salary		Reason for Leaving
Job Title(s)		Job Duties
Employed From	Employed To	Name and Address of Employer
Employer Phone Number		Full-time, part-time, voluntary
		, and an
Name and Address of Imm	ediate Supervisor	
Salary		Reason for Leaving
Job Title(s)		Job Duties
Franksis d Frank	Familian d Ta	Name and Address of Employer
Employed From	Employed To	Name and Address of Employer
Employer Phone Number		Full-time, part-time, voluntary
Name and Address of Imm	ediate Supervisor	
Salary		Reason for Leaving
Job Title(s)		Job Duties

Employed From	Employed To	Name and Address of Employer		
Employer Phone Number		Full time, part time, valuntary		
Employer Friorie Number		Full-time, part-time, voluntary		
Name and Address of Imme	ediate Supervisor			
Salary		Reason for Leaving		
Job Title(s)		Job Duties		
Employed From	Employed To	Name and Address of Employer		
Employer Phone Number		Full-time, part-time, voluntary		
Name and Address of Imme	ediate Supervisor			
Salary		Reason for Leaving		
Job Title(s)		Job Duties		
Employed From	Employed To	Name and Address of Employer		
Employer Phone Number		Full-time, part-time, voluntary		
Name and Address of Immediate Supervisor				
Salary		Reason for Leaving		
Job Title(s)		Job Duties		

Employed From Employed To	Name and Address of Employer
Employer Phone Number	Full-time, part-time, voluntary
Name and Address of Immediate Supervisor	
Salary	Reason for Leaving
Job Title(s)	Job Duties
Employed From Employed To	Name and Address of Employer
Employer Phone Number	Full-time, part-time, voluntary
Name and Address of Immediate Supervisor	<u></u>
Salary	Reason for Leaving
Job Title(s)	Job Duties
49. If you were ever dismissed or asked to re have held, or if you were ever given a verbal job you have held, describe below. Include the reason for discharge or discipline. Use extra	or written reprimand, or suspended from any he name and address of the supervisor, and

## **MILITARY HISTORY**

50. Draft Board Address	Local Number
51. Selective Service Number	52. Current Selective Service Status
53. Branch of Service 54. Da	te Entered Active Duty 55. Date Separated from Active Duty
56. Type of Separation or Discharge 57. S	Service Number 58. Rank at Separation 59. Highest Rank Held
60. Unit (Infantry, Engineers, Medics, ect)	61. Name and Address of Last Duty Post
62. Total Months Combat Duty 63. Total Mo	onths Overseas Duty 64. Present Reserve Obligation (from/to)
65. Branch Served	66. Reserve Unit Assignment and Address
68. Were you separated or dischar of term of service?If yes, explain.	rged for a reason other than completion of normal expiration
69. Were you ever the subject of a	any judicial or non-judicial disciplinary action while in the ? If yes, explain.
	ist any military awards and/or decorations.

## **ARREST RECORD / COURT ACTION**

71. Have you ever been arrested by a law enforcement agency, as a juvenile or adult? If yes explain and give for each incident: 1. Date, 2. Charge, 3. Name of Law Enforcement Agency 4. Disposition/Penalty, 5. Name and address of court, 6. A detailed narrative account of the incident.				
Begin with the most recent case and list <u>all incidents</u> . Use extra sheets of paper if necessary.				
72. Have you ever applied for a special license, credential or clearance? (Include gun permit teacher's credentials, real estate license, private patrol license, etc. Do not include such items as hunting or fishing licenses) If yes, explain.				
73. Have you ever applied for or been denied bond or had one revoked? If yes, explain.				

### 74. Present Vehicles.

Year / Make / License Plate	Date	Purchased	Name of Legal Owner if not Applicant
75. Applicant Driver License Number	76. State	77. Class	78. Expiration
79. Spouse's Driver License Number	80. State	81. Class	82. Expiration
83. Have you ever had a driver license	from anoth	ner state? If	yes, give for each license:
1. State, 2. License number, 3. Dates h			-

84. In the last 7 years, have you ever received, as an adult or juvenile, a traffic citation, other than for parking? If yes, include all citations whether convicted or not.

Date	Offense	Issuing Agency	Disposition

85. Have you ever been placed on probation for a traffic violation? If yes, explain including: 1. Date, 2. Reason, 3. Agency directing.
86. Have you ever had your driver license suspended, revoked, canceled, or restricted? If yes, explain including: 1. Date, 2. Reason, 3. Agency directing.

87. In the last 7 years, have you ever been involved in any traffic crash, major or minor, whether your fault or not?If yes, explain.

Date	City / State	Prop Dmg / Injury/ Fatality	Police Agency	Brief Description of Fault / Who was cited?

### FINANCIAL INFORMATION

88. List all financial liabilities or indebtedness involving you or your spouse. Include contracts, home mortgages, alimony or child support, loans, medical, open charge accounts and credit cards. List <u>all debts</u>. Use extra sheets of paper if necessary.

Creditor Name	Account Number	Month/ Year Incurred	Monthly Payment	Present Balance
				_

### 89. List all vehicle insurance policies held by you or your spouse.

Name of Insured	Insurance Company Name/ Address	Coverage Amount	Premiu Amount

### Answer the questions below. If yes, explain in detail on a separate sheet of paper.

90.	Have you or your spouse ever had an account referred to an agency for collections?	Yes	No
91.	Have you or your spouse ever had your wages attached?	Yes	No
92.	Have you or your spouse ever filed for bankruptcy or been declared bankrupt?	Yes	No
93.	Have you ever had property repossessed?	Yes	No
94.	In the past 7 years, have you ever been refused credit?	Yes	No
95.	Have you ever been refused a life, automobile, or had such a policy canceled?	Yes	No
96.	Do you anticipate any income other than your employment salary? If so, list source and a	mount.	

Source	Monthly Amount	Yearly Amount

## **OTHER INFORMATION**

97. List hobbies, recreational or social activities in which you enjoy participating.

98. List 5 persons who: 1. Are over 21 years-old, 2. Are citizens, preferably with business or professional status, with good standings in the community, 3. Have known you for the past 5 years or more, 4. Are not relatives or past employers.

**NOTE** – If you are not able to list five such persons, list those individuals who most nearly meet all of the above criteria.

INCLUDE ZIP CODES AND PHONE NUMBERS.

1.		
Name/ Address	Home Phone	Relationship
Business Address	Business Phone	Years Known
2. Name/ Address		
Name/ Address	Home Phone	Relationship
Business Address	Business Phone	Years Known
3		
Name/ Address	Home Phone	Relationship
Business Address	Business Phone	Years Known
4.		
Name/ Address	Home Phone	Relationship
Business Address	Business Phone	Years Known
5		
Name/ Address	Home Phone	Relationship
Business Address	Business Phone	Years Known

## PRIOR LAW ENFORCEMENT ONLY

1. List all agencies with whom you have been employed and dates of employment.

Ag	ency/ Address			Date of Employment
2.	How many citize	en compla	ints were filed a	gainst you?
	None	1	2	3 or more
3.	Of these, how m	any were f	founded?	
4.	How many writte	en reprima	nds have you re	eceived?
	None	1	2	3 or more
	Have you ever fi	ired your v	weapon in the li	ne of duty? If yes, explain on a separate
	Yes	No		
6.	Describe any m	otor vehic	le crashes in wl	nich you were involved, while on duty.

		ave you been s cement officer		om duty or received a reduction in
	None	1	2	3 or more
actions	you ever the s as a law enfo n apply, mark	rcement office	vil suit or crim r? Mark one a	inal prosecution, because of your nswer only. If responses "b" and
	No			
	Yes, but the c	harges were dro	opped and no s	settlements were made.
	Yes, and char	ges were uphel	d and settleme	nts were made.
includin	you ever had g ratings of "l onary period.	any unsatisfac Improvement N	tory personne leeded?" Do r	el ratings as a law enforcement officer, not count ratings you received during the
	Yes	No		
10. Did <u>y</u>	ou ever lie or	seriously dist	ort the facts o	f an official report?
	Yes	No		
11. Did <u>y</u>	you ever cove	r up a serious	incident for a	fellow officer?
	Yes	No		
12. Did y	ou ever lie or	commit perjur	y in court or a	ny other official proceeding?
	Yes	No		
	you ever bee robation?	n terminated o	r forced to res	sign from a law enforcement position
	Yes	No		
14. Have probatio		n terminated o	r forced to res	sign from a law enforcement position after
	Yes	No		

paper.				
	Yes	No		
	you ever dam fied the report		uipment, property or vehic	cles and failed to report
	Yes	No		
		ent officer, how many driver regardless o	y on-duty traffic crashes h of who was at fault.	ave you been involved
	None	1 2	3 or more	4 or more
	you intention sheet of pape		(s) from this questionnair	e? If yes, explain on a
	Yes	No		
	you applied fo ars? If yes, ind		t position with another ag	ency within the last
	Yes	No		
Agency		Type of Position	Application Date	Status
			•	

15. Have you ever been the subject of internal affairs investigation as an officer? Do not count investigations regarding citizen complaints. If yes, explain on a separate sheet of

## **ADDITIONAL SHEETS**

This space is provided to continue detailed answers to questions. Be sure to identify the item number to which answers or comments apply.

Item Number	Comments	

### **PENALTY**

Any falsification, withholding or failure to answer all questions completely and accurately may cause forfeiture of all rights to employment or removal from the list of applicants who have been certified for consideration for employment.

### **CERTIFICATION**

I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements and answers to questions and that all statements and answers are true and correct to the best of my knowledge and belief.

Applicant Signature (in ink)	Date