

STATE OF OREGON
DEPARTMENT OF STATE POLICE
SWORN EMPLOYMENT APPLICATION

RECRUIT TROOPER
PLEASE TYPE OR PRINT -- USE BLACK INK ONLY

1. APPLICANT (PROVIDE FULL NAMES)

Last _____ First _____ Middle _____

Mailing Address _____

City _____ State _____ Zip Code _____

Home Street Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ email _____

Birth Date _____ Social Security Number _____

List any other last names, which you have used, or by which you have been known. Also include aliases, maiden name, and nicknames.

a. _____ b. _____

2. CITIZENSHIP

Are you a U.S. Citizen? Yes No Naturalized? Yes No

If naturalized give date, place, and court of naturalization:

3. DRIVER LICENSE

Are you a licensed driver? Yes No State _____ License No. _____

List any other states/countries where you have been licensed _____

Has your right to drive ever been suspended or revoked? Yes No

If yes, list states/countries & include date(s) of suspension, reason for suspension, date(s) of reinstatement. Attach any additional information as necessary. _____

4. EDUCATION

Do you possess a high school diploma or GED certificate? Yes No

5. EMPLOYMENT

Present Employer _____

Address _____

Job Title _____ Work Phone Number _____

Lateral Move? Yes No From What Police Agency _____

AN EQUAL OPPORTUNITY EMPLOYER

All qualified applicants will be considered based on their knowledge, skills, and abilities without regard to sex, age, color, creed, national origin, marital status or religious affiliation. Upon request, reasonable accommodations will be considered for those applicants under the Americans with Disabilities Act.

APPLICANT CERTIFICATION

All applicants must read and sign the following certification.

I hereby certify that all statements made in this application or appended to it are true and correct to the best of my knowledge. I am aware that withholding pertinent information or providing information found to be materially (grossly) inaccurate will be cause for refusing further consideration of my application, or will constitute grounds for my termination if I am employed.

I authorize my driving record to be checked. I understand and agree to be subjected to a criminal history background check.

I understand this is not to be considered as an indication of probable appointment by the Department, but is a part of the selection process only.

Signed _____ Dated _____

(Please Print name if submitting electronically)

MAIL APPLICATION TO:
Department of Oregon State Police
Attn: Sworn Applicant Processing
255 Capitol St. NE, 4th Floor
Salem OR 97310
Email to: osp.trooper@state.or.us

FOR MORE INFORMATION:
Telephone: (503) 378-3720
Internet: www.osptrooper.com
E-mail: osp.trooper@state.or.us

THE FOLLOWING TWO SECTIONS ARE VOLUNTARY. We would greatly appreciate your answering the questions, as this will help us in our recruiting efforts. Your answers will not affect your status in any way and will not be part of any evaluation procedure.

Male Female

WHITE (Not of Hispanic origin.) All persons having origins in any of the original peoples of Europe, North Africa, the Middle East.

BLACK/AFRICAN (Not of Hispanic origin.) All persons having origins in any of the black racial groups.

HISPANIC. All persons of Mexican, Puerto Rican, Central or South American, or other Spanish culture or origin, regardless of race.

ASIAN OR PACIFIC ISLANDER. All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian sub-continent, or the Pacific Islands. The area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa.

AMERICAN INDIAN or ALASKAN NATIVE. All persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.

How did you learn about this employment opportunity?

Job Fair (Location) _____

College/University (name) _____

Military Base contact (Location) _____

Media (i.e.: TV, radio, newspaper, etc.) (name) _____

OSP Recruiter (name) _____

Other OSP Employee (name) _____

www.OSPTrooper.com State of Oregon Website www.officer.com Other Website _____

Other (Please explain) _____