



**STAKE
YOUR
CLAIM**

BEATRICE
CITY • BOARD OF PUBLIC WORKS

CITY HALL

400 Ella Street | Beatrice, NE 68310

Phone: 402.228.5200 Fax: 402.228.2312

BEATRICE POLICE DEPARTMENT

201 North 5th Street | Beatrice, NE 68310

Phone: 402.223.4080 Fax: 402.228.3765

Dear Applicant:

Thank you for your interest in joining our Police Department. We are very excited for the opportunity to get to know you!

As part of our standard civil service hiring process, a background investigation may be conducted regarding your application. Please complete the attached Disclosure and Waiver and the Personal History Statement. The packet may be submitted in the following methods:

- Email to esaathoff@beatrice.ne.gov. We do recommend confirming receipt of packets submitted via email, as our network does not have size limitations for incoming messages.
- Mail or drop off directly to the City Clerk's Office at 400 Ella Street.
 - Business hours are 8:00 a.m. to 5:00 p.m., Monday through Friday.
 - There is also a night drop box available in the drive thru. Please place your packet in a sealed envelope and mark "Attention: Erin Saathoff, City Clerk".

Failure to submit these documents by the deadline will delay your consideration for employment or remove you from consideration for this posting.

In addition to the enclosed packet, please provide us with copies of the following:

- Certified copy of your birth certificate (no photo copies)
- Copy of your Driver's License
- Your High School diploma or GED Certificate (original or transcripts must be received by us in an official sealed envelope from the school or directly from the school via email)
- Your transcripts from colleges or universities (original or transcripts must be received by us in an official sealed envelope from the school or directly from the school via email)
- Your Diplomas or training certificates from any school or other educational institutions
- Your Military discharge papers (must include discharge status – long form)
- Any Civil Court documents relating to you.

As you complete this packet, please read the instructions, and answer carefully. You must provide a response to each section. An accurate and complete form will help expedite your investigation. On the other hand, deliberate omissions or falsifications may result in disqualification. If there is insufficient space on the form for you to include all information required, attach extra sheets to the Personal History Statement. Be sure to reference the relevant section and question number before continuing your answer.

If you have any questions or desire further information, please contact my office at 402.228.5200.

Sincerely,

Erin Saathoff
City Clerk / Civil Service Secretary



BEATRICE POLICE DEPARTMENT APPLICATION BACKGROUND CHECK DISCLOSURE



In connection with your employment application and for other employment purposes, the City of Beatrice/Beatrice Police Department (City) may seek background information about you from a consumer reporting agency. This information will be in the form of a consumer report.

These reports may be obtained at any time after the City receives authorization from you, including any time during the period of your employment if the City hires you. Consumer reports include any written, oral, or other communication of information by consumer reporting agencies bearing on your credit standing, character, general reputation, and other personal characteristics that are expected to be used for employment purposes. Consumer reports may include credit reports, criminal reports, and driving records, among other resources.

Investigative consumer reports include similar information as consumer reports which are obtained through personal interviews with those who are acquainted with you or who may have knowledge of any relevant information about you. Credit Bureau Services, NCIC, NCJIS, or another reporting agency will obtain the reports for the City.

You have the right to request information from the City about the nature and scope of any consumer report on you that is requested by the City. The request must be made in writing and within a reasonable period of time after you have received this disclosure. A copy of a Summary of Your Rights Under the Federal Fair Credit Reporting Act (FCRA) is being provided to you with this disclosure.

Release of Information Waiver and Authorization to Obtain Consumer Reports under the Fair Credit Reporting Act

I acknowledge that I have received and read the Fair Credit Reporting Act background check disclosure above and A Summary of Your Rights Under the Fair Credit Reporting Act (FCRA) (attached at the end of this document), and this authorization. I certify that I understand the documents that I have received.

I hereby authorize the City or its authorized agents, for employment purposes to obtain or prepare consumer reports at any time after it receives this authorization, including any time that I might be employed by the City.

I hereby authorize law enforcement agencies, public and private schools, federal, state, and local agencies and courts, credit bureaus, information bureaus, current and former employers/employees, financial institutions, licensing agencies, governmental agencies, the military, and other individuals and entities to provide any and all information that is requested by Credit Bureau Services, NCIC, NCJIS, or other reporting agencies, or the City.

I certify that the information provided on this form is true and correct. I understand that any information that I provide in an employment application or that I might otherwise disclose during my employment may be used to obtain consumer reports.

I authorize the City of Beatrice/Beatrice Police Department and /or their designated representatives to have full access to my personal records. This release shall include any and all records of past or present employment, personal references, financial data, educational, and medical information. I understand that these records are to be used as part of a background investigation for possible employment purposes.

Applicant Signature: _____ Date: _____

Printed Full Name: _____ Date of Birth: _____ SSN: _____

Current Street Address: _____

City, State, Zip Code: _____

Phone Number: _____

Subscribed and sworn to before me on this _____ day of _____, 20_____.

Notary Public



BEATRICE POLICE DEPARTMENT APPLICATION PERSONAL HISTORY STATEMENT



INSTRUCTIONS TO THE APPLICANT

The information in the Personal History Statement will be used in the investigation into your background to assist in determining your suitability for the position of Police Officer. Please fill out the questionnaire completely and accurately.

Please print in black ink or type your responses. If a question does not apply to you, write N/A (not applicable) in the space provided for your answer. If you need more space to respond to a question, use Page 18 in this packet and identify the additional information by the category.

When listing addresses, include complete street addresses, apartment numbers, City, State, and Zip Code. Include area codes with all phone numbers.

Keep in mind that:

1. **All statements are subject to verification.**
2. **Deliberate inaccuracies, omissions, or falsifications will bar or remove you from employment and will render you ineligible for future employment consideration. This will include disciplinary action and/or termination of employment.**
3. **You must account for all time periods in your background.**

It is to your advantage to respond openly. Any negative factors in your background will be evaluated in terms of the circumstances and facts surrounding its occurrence, and its degree of relevance to the job of Police Officer.

Your signature below indicates that you fully understand the procedures and responsibilities stated above.

Signature: _____

Printed Name: _____

Social Security Number: _____

Date: _____



BEATRICE POLICE DEPARTMENT APPLICATION PERSONAL HISTORY STATEMENT



APPLICANT INFORMATION

Name: _____
Last, First, Middle

Home Address: _____

City, State, Zip Code: _____

Home Phone #: _____ Work Phone #: _____

Hours You Can be Reached at these Phone Numbers: _____

Other Names by which you have been known (nickname(s), maiden name): _____

Social Security #: _____ Date of Birth (Mo/Day/Yr): _____

U.S. Citizen: Yes No Place of Birth (City/County/State): _____

Gender: _____ Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____

List or Describe any Distinguishing Marks, Scars, or Tattoos: _____

Driver's License #: _____ State of Issue: _____

Email Address: _____

EDUCATIONAL HISTORY

List all schools you have attended, beginning with high school.

Name of School	City / State	Dates Attended		Type of Degree
		From	To	



BEATRICE POLICE DEPARTMENT APPLICATION PERSONAL HISTORY STATEMENT



Explain any school suspension or academic probation of any kind: _____

SPECIAL SKILLS & QUALIFICATIONS

List any abilities you feel would advance your performance in the job you are applying for. Please list any certifications or licenses you possess.

EMPLOYMENT HISTORY

List any employment you have had beginning with the most recent. Include military, full time and part time employment, and all periods of unemployment.

Business Name: _____

Address: _____

City, State, Zip Code: _____

Phone #: _____ Job Title: _____

From: (Month/Year) _____ To: (Month/Year) _____

Duties: _____

Supervisor's Name: _____ Co-Worker's Name: _____

Reason for Leaving Employment: _____

Resigned (with notice): Yes No

Quit (no notice): Yes No

Laid Off: Yes No



BEATRICE POLICE DEPARTMENT APPLICATION PERSONAL HISTORY STATEMENT



Business Name: _____

Address: _____

City, State, Zip Code: _____

Phone #: _____ Job Title: _____

From: (Month/Year) _____ To: (Month/Year) _____

Duties: _____

Supervisor's Name: _____ Co-Worker's Name: _____

Reason for Leaving Employment: _____

Resigned (with notice): Yes No Quit (no notice): Yes No Laid Off: Yes No

Business Name: _____

Address: _____

City, State, Zip Code: _____

Phone #: _____ Job Title: _____

From: (Month/Year) _____ To: (Month/Year) _____

Duties: _____

Supervisor's Name: _____ Co-Worker's Name: _____

Reason for Leaving Employment: _____

Resigned (with notice): Yes No Quit (no notice): Yes No Laid Off: Yes No

Business Name: _____

Address: _____

City, State, Zip Code: _____

Phone #: _____ Job Title: _____

From: (Month/Year) _____ To: (Month/Year) _____

Duties: _____

Supervisor's Name: _____ Co-Worker's Name: _____

Reason for Leaving Employment: _____

Resigned (with notice): Yes No Quit (no notice): Yes No Laid Off: Yes No



BEATRICE POLICE DEPARTMENT APPLICATION PERSONAL HISTORY STATEMENT



Business Name: _____

Address: _____

City, State, Zip Code: _____

Phone #: _____ Job Title: _____

From: (Month/Year) _____ To: (Month/Year) _____

Duties: _____

Supervisor's Name: _____ Co-Worker's Name: _____

Reason for Leaving Employment: _____

Resigned (with notice): Yes No Quit (no notice): Yes No Laid Off: Yes No

Business Name: _____

Address: _____

City, State, Zip Code: _____

Phone #: _____ Job Title: _____

From: (Month/Year) _____ To: (Month/Year) _____

Duties: _____

Supervisor's Name: _____ Co-Worker's Name: _____

Reason for Leaving Employment: _____

Resigned (with notice): Yes No Quit (no notice): Yes No Laid Off: Yes No

MILITARY HISTORY

The City complies with Nebraska's Veterans Preference Laws. Have you served in the U.S. Armed Forces: Yes No

Do you wish to claim Veterans Preference in your employment search: Yes No

If yes, include documents showing you receive or are eligible to receive benefits from the U.S. Department of Veterans Affairs and a Form DD214 in order to verify entrance and separation dates, type of separation, and character of service. The spouse of a 100% disabled veteran may claim preference by providing a Form DD214, proof of disability, and a marriage certificate.



BEATRICE POLICE DEPARTMENT APPLICATION PERSONAL HISTORY STATEMENT



PAST MILITARY HISTORY

Branch	Service Number	Dates of Service Month/Year to Month/Year		Type of Discharge	Highest Rank Held
		From	To		

Were you ever subject to any disciplinary action of **any kind**? Explain: _____

Were you ever involved in a Court Martial while in the Service? Explain: _____

Did you receive any commendations, honors, etc.? Explain: _____

Did you receive a discharge other than honorable: Explain: _____

CURRENT MILITARY HISTORY

List any active participation in the military reserves or National Guard

Branch	Service Number	Date of Service (Month/Year to Month/Year)
Unit's Name	Address/City/State/Zip	Phone #
Immediate Commander	Address/City/State/Zip	Phone #
Friend or Associate in the Military	Address/City/State/Zip	Phone #

Were you ever subject to any disciplinary action of **any kind**? Explain: _____

Did you receive any commendations, honors, etc.? Explain: _____



BEATRICE POLICE DEPARTMENT APPLICATION PERSONAL HISTORY STATEMENT



RESIDENCES

List all addresses where you have lived in the last ten (10) years. Begin with your current address and list backwards. Also list the companies or the individuals from whom you have rented these residences.

Address: _____

City, State, Zip Code: _____

From: (Month/Year) _____ To: (Month/Year) _____

Rental Company or Person's Name: _____

Address, City, State, Zip Code: _____

Phone #: _____

Address: _____

City, State, Zip Code: _____

From: (Month/Year) _____ To: (Month/Year) _____

Rental Company or Person's Name: _____

Address, City, State, Zip Code: _____

Phone #: _____

Address: _____

City, State, Zip Code: _____

From: (Month/Year) _____ To: (Month/Year) _____

Rental Company or Person's Name: _____

Address, City, State, Zip Code: _____

Phone #: _____

Address: _____

City, State, Zip Code: _____

From: (Month/Year) _____ To: (Month/Year) _____

Rental Company or Person's Name: _____

Address, City, State, Zip Code: _____

Phone #: _____



**BEATRICE POLICE DEPARTMENT APPLICATION
PERSONAL HISTORY STATEMENT**



Address: _____

City, State, Zip Code: _____

From: (Month/Year) _____ To: (Month/Year) _____

Rental Company or Person's Name: _____

Address, City, State, Zip Code: _____

Phone #: _____

Address: _____

City, State, Zip Code: _____

From: (Month/Year) _____ To: (Month/Year) _____

Rental Company or Person's Name: _____

Address, City, State, Zip Code: _____

Phone #: _____

Address: _____

City, State, Zip Code: _____

From: (Month/Year) _____ To: (Month/Year) _____

Rental Company or Person's Name: _____

Address, City, State, Zip Code: _____

Phone #: _____

Address: _____

City, State, Zip Code: _____

From: (Month/Year) _____ To: (Month/Year) _____

Rental Company or Person's Name: _____

Address, City, State, Zip Code: _____

Phone #: _____



BEATRICE POLICE DEPARTMENT APPLICATION PERSONAL HISTORY STATEMENT



FOREIGN LANGUAGES

Do you have a foreign language ability? Yes No
 If yes, complete the table below and indicate your proficiency as slight, good, or fluent.

Name of Language	Speak	Understand	Read	Write

DRIVER'S LICENSE

List any and all previous and current names under which driver's licenses have been issued to you.

Name	State	License Number

Have your driving privileges ever been restricted? Yes No

Has your driver's license ever been suspended or revoked? Yes No

Have you ever been refused a driver's license? Yes No

Have you ever been involved in any traffic accidents in the last three (3) years: Yes No
 If yes, give date, location, and law enforcement agency.

If yes to any of the above, explain the circumstances.



BEATRICE POLICE DEPARTMENT APPLICATION PERSONAL HISTORY STATEMENT



CIVIL LAWSUITS

List any suits in which you were a defendant (other than divorce-related, i.e. collections, protection orders, personal injury, etc.).

Incident	Month	Year	City	County	State

CRIMINAL and TRAFFIC HISTORY

List **all** traffic tickets, criminal arrests, and/or convictions, including juvenile offenses, that you have **ever** had.

Police Agency	Charge	Month/Year	City/State	Disposition

DOMESTIC VIOLENCE

Have you ever been convicted of any type of crime involving domestic violence? Yes No

Have you ever committed an act of domestic violence? Yes No

Have you ever been involved in a child abuse or neglect investigation of any kind? Yes No

Have you ever had a Protection Order sworn out against you? Yes No

If you answered yes to any of the above questions, explain in the Additional Notes section at the end of this document.



BEATRICE POLICE DEPARTMENT APPLICATION PERSONAL HISTORY STATEMENT



FINANCIAL HISTORY

What is your present salary or wage? _____

Do you have income from any source other than your principal occupation? Yes No

If yes, how much? _____ How often? _____ Source: _____

Have any of your bills been turned over to a collection agency? Yes No

Have you ever purchased goods that were later repossessed? Yes No

Have your wages ever been garnished or assigned? Yes No

Have you ever been delinquent on any Federal Income or State taxes? Yes No

Have you ever written an insufficient fund check that you did not make good? Yes No

If yes, give details of amount, who to, and date of occurrence: _____

If you answered yes to any of the above questions, explain in the Additional Notes section at the end of this document.

COMMUNITY INVOLVEMENT

List any organizations you are a member of or community events you have participated in.

Name of Organization/Event	Type (Social, Fraternal, Professional, etc.)	Number of Years

OTHER AGENCIES APPLIED TO

List all law enforcement agencies or fire departments you have applied to or taken an exam within the last year.

Date	Position Applied For	Agency (City/State)	If Not Hired, Explain Why



BEATRICE POLICE DEPARTMENT APPLICATION PERSONAL HISTORY STATEMENT



ADDITIONAL QUESTIONS

Have you used marijuana, synthetic marijuana, Delta 8, Delta 9, illegal drugs, or abused prescription drugs? Yes No
If yes, name the substance, the frequency of use, and period of uses in the Additional Notes section at the end of this document.

Have you ever bought, sold, distributed, manufactured, or abused illegal drugs? Yes No
If yes, name the substance, the frequency of use, and period of uses in the Additional Notes section at the end of this document.

Do you have any gang affiliations, ties, or associations? Yes No
If yes, explain in the Additional Notes section at the end of this document.

Have you in the past or are you currently now involved in gang activities? Yes No
If yes, explain in the Additional Notes section at the end of this document.

In the past 5 years, have you ever used physical force against another person? Yes No
If yes, explain in the Additional Notes section at the end of this document.

Explain your alcohol consumption habits:

Since the age of 18, have you ever stolen money or property from an employer or someone else? Yes No
If yes, explain the circumstances, item or amount, and when in the Additional Notes section at the end of this document.

Do you have any beliefs (e.g. moral, religious, etc.) which would prevent you from fully performing the duties of a Police Officer including working weekends, evenings, holidays, or night shifts? Yes No
If yes, explain in the Additional Notes section at the end of this document.

REFERENCES

List five (5) persons who know you well enough to provide current information about you. Do not list relatives or former employers.

Name: _____

Home Address: _____

City, State, Zip Code: _____ Home Phone #: _____

Business Address: _____

City, State, Zip Code: _____ Bus. Phone #: _____

Relationship to Candidate: _____ Years Known: _____



BEATRICE POLICE DEPARTMENT APPLICATION PERSONAL HISTORY STATEMENT



Name: _____

Home Address: _____

City, State, Zip Code: _____ Home Phone #: _____

Business Address: _____

City, State, Zip Code: _____ Bus. Phone #: _____

Relationship to Candidate: _____ Years Known: _____

Name: _____

Home Address: _____

City, State, Zip Code: _____ Home Phone #: _____

Business Address: _____

City, State, Zip Code: _____ Bus. Phone #: _____

Relationship to Candidate: _____ Years Known: _____

Name: _____

Home Address: _____

City, State, Zip Code: _____ Home Phone #: _____

Business Address: _____

City, State, Zip Code: _____ Bus. Phone #: _____

Relationship to Candidate: _____ Years Known: _____

Name: _____

Home Address: _____

City, State, Zip Code: _____ Home Phone #: _____

Business Address: _____

City, State, Zip Code: _____ Bus. Phone #: _____

Relationship to Candidate: _____ Years Known: _____



BEATRICE POLICE DEPARTMENT APPLICATION SUPPLEMENTAL QUESTIONNAIRE



This questionnaire will be considered part of your application packet and must be completed and returned (along with all required documentation) prior to the closing date.

Applicant Full Name: _____ Date of Application: _____

Police work, while highly regarded and rewarding, is subject to serious stresses and adverse situations that do make it an unacceptable career for many individuals. Please read the items below and carefully consider them before you submit your application. As a Police Officer you may:

- Have to use lethal force.
- Work daily with angry, disrespectful, manipulative, and unpleasant people.
- Deal with people who are ethnic, religious, moral, and/or educational background far different from your own.
- Spend your career working shift schedules that differ completely from your family and friends.
- Be faced with temptations to bend or break the law.
- Be hurt by people with whom you come in contact.
- Be held to a higher standard of conduct by the public.
- Be subjected to stresses and situations your family and friends will not understand.
- Be put in situations that require you to make serious decisions with little or no time for thought.
- Find yourself unable to socialize with some friends or family members because of their activities.
- Find that some people scorn or dislike you for your career choice.
- Be in assignments that make you unable to go into public places with your family or friends.
- Be subject to extra, overtime, or on-call work that means cancelling personal plans.
- Work on holidays, weekends, nights, or other times you may be used to having for personal time.
- Be subject to having the public second guess your decisions long after you have made them.

1. Are you willing to work 12 hour shifts? Yes No
2. Are you willing and able to work any shifts, weekends, holidays, and overtime? Yes No
3. Are you willing to work extra shifts to ensure adequate coverage for our community? Yes No
4. Are you willing to participate in call backs (report to work when scheduled to be off duty) to staff the police station and/or respond to emergencies? Yes No
5. Are you willing to be assigned to shift work, which includes day, swing, and overnight on a rotation basis?
 Yes No
6. As part of our hiring process, you may be asked to submit a thorough background check and fingerprinting. Is there anything in your past which would show up on a criminal background or fingerprint check that you would like to explain now? Yes No (if yes, explain below)
7. Do you possess a certificate from the Nebraska Law Enforcement Training Center (NLETC)? Yes No
OR I possess certification from another jurisdiction and am eligible for reciprocity from the NLETC
List jurisdiction of current certification: _____
8. Are you eligible and do you agree to enroll in the NLETC? (Please review admission requirements at <https://ncc.nebraska.gov/academy-admission>.) Yes No N/A



BEATRICE POLICE DEPARTMENT APPLICATION SUPPLEMENTAL QUESTIONNAIRE



9. Do you understand and agree that if you are a non-lateral hire requiring certification from the NLETC, you will be required to sign an agreement to repay the City for the training expenses incurred on your behalf if you do not maintain employment with the City for a minimum of twelve (12) months following certification? Yes No N/A
10. Are you willing to work extra hours or shifts and report to work during scheduled times off if needed? Yes No
11. Are you willing to perform required work outside your job description when assigned? Yes No
12. Are you willing to consent to a drug test? Yes No
13. Are you willing to work in a disciplined environment and carry out orders even if you do not agree with them?
 Yes No
14. Are you willing to take instructions and abide by the policies, procedures, guidelines, rules, and regulations of the City of Beatrice and Beatrice Police Department? Yes No
15. Do you have a current, valid Nebraska Driver's License? Yes No
16. Do you understand that maintaining your Nebraska Driver's License will be a requirement of your employment as a Police Officer? Yes No
17. Do you have experience operating a computer? Yes No
18. Are you able to effectively read, write, communicate, and understand the English language? Yes No
19. Do you have military experience? Applicants who have separated from active military service (Active Duty Status) must submit proof of honorable discharge (DD214) with their application to qualify for Veteran's Preference Points.
 Yes No
20. The Beatrice Police Department has a residency requirement that all police personnel must live within forty-five (45) minutes from the Beatrice Police Department Station. New employees must establish residency within six (6) months after completion of the probation period. Do you understand this requirement and agree to establish and maintain residency within the required area? Yes No
21. Are you willing to interact and work with people from a variety of cultural, ethnic, and/or socioeconomic backgrounds?
 Yes No
22. Are you willing to wear a standardized uniform? Yes No
23. Are you willing to attend a high stress academy from a period of several months? Yes No
24. Are you able to successfully pass the training required at the NLETC? **(Please review the physical requirement for admission and certification at <https://ncc.nebraska.gov/academy-admission>.)** Yes No
25. Are you willing to accept daily critique of your job performance and modify you actions accordingly? Yes No



BEATRICE POLICE DEPARTMENT APPLICATION SUPPLEMENTAL QUESTIONNAIRE



26. Are you willing to use legal physical force to protect the public, other police officers, and yourself? Yes No
27. Are you willing to use lethal force to protect the public, other police officers, and yourself? Yes No
28. Are you able to remain calm, professional, and effective when someone is rude, drunk, irrational, confused, obscene, or otherwise discourteous to you? Yes No
29. Are you willing to attend court on your scheduled day off? Yes No
30. Are you willing to attend mandated training on your normal days off? Yes No
31. Do you understand and agree that any visible tattoos or body alterations not approved in advance must be covered while in uniform or on duty? Yes No
32. Are you willing to place yourself in dangerous situations? Yes No
33. Are you able to record information accurately (i.e. not transpose numbers and/or letters)? Yes No
34. Are you able to act in a decisive manner, using appropriate professional judgement? Yes No
35. Are you able to do several things at one time and remain focused on the most critical event under stress?
 Yes No
36. Are you able to actively listen to others for an understanding of their needs and situations? Yes No
37. Are you able to retain you emotional control, honesty, and productivity while under pressure from demanding citizens, shortage of time, personal problems, requirements of supervisors, or other sources? Yes No
38. Are you able to remember numerous details (good memory retention)? Yes No
39. Are you willing and able to maintain dependable work habits, such as reporting to work on time? Yes No
40. Are you able to detach from another individual's emotions, potentially someone you may know personally, yet project an image of professional empathy (i.e. avoid personal involvement)? Yes No
41. Are you able to handle a variety of rapidly flowing information from various sources at one time? Yes No
42. Are you able to quickly report events and information in writing, legibly and accurately? Yes No
43. Are you willing and able to accept responsibility for your actions? Yes No
44. Are you able to set aside personal thoughts and opinions about specific individuals, or situations, and comply with department procedures to provide all citizens the help they need? Yes No
45. Can you speak English clearly and concisely? Yes No



BEATRICE POLICE DEPARTMENT APPLICATION SUPPLEMENTAL QUESTIONNAIRE



46. Can you write in English clearly, accurately, concisely, legibly, and correctly? Yes No

47. Are you able to communicate orally in Spanish or other foreign language? Yes No

If yes, list those languages. _____

APPLICANT STATEMENT

I certify that this Supplemental Questionnaire was completed by me, and that all entries and information furnished are true and complete. I understand that my failure to provide full, true, and complete information herein, or elsewhere during the pre-hire process, will be sufficient reason for: (1) denial of employment, or (2) my later dismissal from employment with the City.

Applicant Signature

Date Completed

Printed Name



BEATRICE POLICE DEPARTMENT APPLICATION A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT



Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street NW, Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street NW, Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer



BEATRICE POLICE DEPARTMENT APPLICATION A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT



reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-567-8688.
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is



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placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:



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TYPE OF BUSINESS:	CONTACT:
<p>1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street NW Washington, DC 20552</p> <p>b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue NW Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group P.O. Box 53570 Houston, TX 77052</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. Division of Depositor and Consumer Protection National Center for Consumer and Depositor Assistance Federal Deposit Insurance Corporation 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Financial Protection 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Assistant General Counsel for Office of Aviation Consumer Protection Department of Transportation 1200 New Jersey Avenue SE Washington, DC 20590</p>
<p>4. Creditors Subject to the Surface Transportation Board</p>	<p>Office of Public Assistance, Governmental Affairs, and Compliance Surface Transportation Board 395 E Street SW Washington, DC 20423</p>
<p>5. Creditors Subject to the Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Division Regional Office</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Administrator, Office of Capital Access United States Small Business Administration 409 Third Street SW, Suite 8200 Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street NE Washington, DC 20549</p>
<p>8. Institutions that are members of the Farm Credit System</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue NW Washington, DC 20580 (877) 382-4357</p>