WESTMORELAND COUNTY COMMUNITY COLLEGE

Municipal Police Officers' Training Academy Application

NOTE: A money order, personal check or cashier's check made payable to "Westmoreland County Community College" in the amount of $50 must accompany this application. Failure to remit the application fee will result in your application not being considered. The application fee is not reimbursable should you not be selected for the Westmoreland Municipal Police Officers' Training Academy. This application along with all supporting documents as mentioned in the cover letter must be postmarked by the advertised deadline.

I am applying for: ☐ Part-time Academy ☐ Full-time Academy

GENERAL INFORMATION

Name _____
(Last) (First) (Middle Initial) (Maiden Name)

Home Address _____

Email Address _____

Phone Numbers (Home) _____ (Cell) _____ (Work) _____

Employer's Name _____

Employer's Address _____

Occupation _____

Supervisor's Name _____ Phone Number _____

Date of Birth _____ Place of Birth _____

Marital Status _____ Height _____ Weight _____

Social Security No. _____ PA Driver's License No. _____

Identifying Scars/Marks _____

Military Veteran (if yes, include copy of DD214) ☐ Yes ☐ No Type of Discharge _____

List name, address, occupation and phone number for each of the following (as applicable):

Spouse Name _____

_____

_____

Child(ren) Name(s) _____

_____

_____

_____

_____

_____

EDUCATION

School	Name	Location	Year Began	Year Completed	Degree Awarded, if Any
Elementary					
High School					
College					
Post Graduate					
Business					
Correspondence					
Other					

EMPLOYMENT

List all employers for the past five years beginning with the most recent (include part-time employment)

Employer	Address	Contact Name & Number	Date Began	Date Ended	Reason(s) Left

PRIOR LICENSES, CERTIFICATIONS & POLICE ACADEMIES

List any license or certificate issued to you by/or related to a law enforcement agency/police employment

Certificate/License No. and Year Issued	Agency Involved	Is Certification/License Current?
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No

Indicate by date, location and school name, any basic law enforcement academy attended.

Did you graduate? ☐ Yes ☐ No If no, what was the reason for not completing the program.

REFERENCES

List three references (two personal, one professional)

Name	Address	Phone Number	Occupation

RESIDENCES

List all residences within the past five years beginning with the most recent

Dates (From-To)	Residence Address	Indicate if Owned or Rented

SOCIAL MEDIA

Type of Social Media	Username	Inactive/Active

ARREST & CONVICTION RECORD

Responses to the following questions will determine an individual's eligibility to carry a firearm under state or federal law. This portion of the application must be completed and signed by the applicant. Be sure to check **all** questions Yes or No.

A. Have you ever been arrested or charged with a violation of the laws including traffic violations?..... ☐ Yes ☐ No
If yes, explain below and indicate all arrests, citations and dispositions.
Note: Citations for illegal parking may be omitted.

Date	Location	Charge	Disposition

If more space is needed, use a blank page and attach to this application.

You must provide a copy of your PA driver's history record which may be obtained online at www.dmv.state.pa.us/ Click on "Online Driver & Vehicle Services" then "Request Your Driver History." Attach a copy to this application.

B. 18 Pa. C.S. § 6105(a) prohibits persons convicted of any of the following offenses from possessing, using, controlling, transferring, manufacturing or obtaining a license to possess, use, control, transfer or manufacture a firearm in the Commonwealth of Pennsylvania. A conviction includes a finding of guilty or the entering of a plea of guilty or nolo contendere, whether or not judgment has been imposed, as determined by the law of the jurisdiction in which the prosecution was held. The term does not include a conviction which has been expunged or overturned or for which an individual has been pardoned unless the pardon expressly provides that the individual may not possess or transport firearms.

Have you ever been convicted of a crime enumerated in the *Pennsylvania Uniform Firearms Act*, § 6105(b)?..... ☐ Yes ☐ No
Note: Crimes listed under § 6105(b) appear below.

§ 6105(b) crimes include:

§ 908	Prohibited Offense Weapons
§ 911	Corrupt Organizations
§ 912	Possession of a Weapon on School Property
§*2502	Murder
§*2503	Voluntary Manslaughter
§ 2504	Involuntary Manslaughter, if the offense is based on the reckless use
§*2702	of a firearm Aggravated Assault
§*2703	Assault by Prisoner
§*2704	Assault by Life Prisoner
§ 2709.1	Stalking
§*2716	Weapons of Mass Destruction
§*2901	Kidnapping
§ 2902	Unlawful Restraint
§ 2910	Luring a Child into a Motor Vehicle
§*3121	Rape
§*3123	Involuntary Deviate Sexual Intercourse
§ 3125	Aggravated Indecent Assault
§*3301	Arson and Related Offenses
§ 3302	Causing or Risking Catastrophe
§*3502	Burglary
§ 3503	Criminal Trespass, if the offense is graded a felony of the second degree or higher
§*3701	Robbery
§ 3702	Robbery of Motor Vehicle
§ 3921	Theft by Unlawful Taking or Disposition upon conviction of a second felony
§*3923	offense Theft by Extortion when the offense is accompanied by threats of violence
§ 3925	Receiving Stolen Property, upon conviction of the second felony offense
§ 4906	False Report to Law Enforcement Authorities
§ 4912	Impersonating a Public Servant, if the person is impersonating a law enforcement officer
§ 4952	Intimidation of Witnesses or Victims
§ 4953	Retaliation Against Witness or Victim
§ 5121	Escape
§ 5122	Weapons or Implements for Escape
§ 5501	Riot, if the offense relates to a firearm or other deadly weapon
§ 5515	Prohibiting of Paramilitary Training
§ 5516	Facsimile Weapons of Mass Destruction
§ 6110.1	Possession of Firearm by Minor
§ 6301	Corruption of Minors
§ 6302	Sale or Lease of Weapons or Explosives

C. Have you ever been convicted of an offense under the Act of April 14, 1972 (P.L. 233, No. 64)..... ☐ Yes ☐ No
known as the *Controlled Substance Drug Device and Cosmetic Act* that may be punishable by a term of imprisonment exceeding two (2) years?

D. Are you an individual who has been adjudicated by any court for conduct which, if committed by an adult, would constitute one of the crimes code sections preceded by an asterisk (*) on the preceding page in § 6105(b)? ☐ Yes ☐ No

i. Are you an individual who has been adjudicated delinquent by any court, as a result of conduct which would constitute an offense enumerated under § 6105(b) of the *Pennsylvania Uniform Firearms Act*? ☐ Yes ☐ No

ii. Has it been 15 years since the delinquent adjudication? ☐ Yes ☐ No

iii. Are you thirty (30) years of age or older? ☐ Yes ☐ No

E. Are you a United State citizen? If no, enter immigration identification number ☐ Yes ☐ No

F. Are you subject to an active protection from abuse order, which provides for the confiscation of firearms during the period of time the order is in effect? ☐ Yes ☐ No

G. Have you ever been convicted of a misdemeanor crime of domestic violence? ☐ Yes ☐ No
Note: the conviction must be for a misdemeanor-graded offense and have, as an element, the use or attempted use of physical force, or the threatened use of a deadly weapon, committed by a current or former spouse, parent or guardian of the victim, by a person with whom the victim as a spouse, parent or guardian, or be a person similarly situated to a spouse, parent or guardian of the victim.

H. Are you a fugitive from justice? ☐ Yes ☐ No

I. Have you ever been adjudicated as an incompetent or been involuntarily committed to a mental institution for inpatient care and treatment under § 302, 303 or 304 of the *Pennsylvania Mental Health Act* Act of July 9, 1976, P.L. 817)? ☐ Yes ☐ No

J. Are you now, or have you been, a member of an organization advocating violence or disobedience of the laws of the Commonwealth of Pennsylvania or of the United States? ☐ Yes ☐ No

K. Do you have a favorable credit rating reflecting financial responsibility? ☐ Yes ☐ No
**Please attach a copy of your credit report with this application.*

L. Do you have any reason to believe you are not qualified to be a police officer? ☐ Yes ☐ No

ADDITIONAL INFORMATION

Use the following space to explain or provide any additional information that you want considered. Please include the category of this application that you are commenting on for easy reference.

CERTIFICATION

This application must be completed and signed by the applicant.

WARNING to the applicant: Do not sign and submit this application if any of the information which you have provided is not true and correct.

I certify that this application contains no misrepresentation or falsification, omissions or concealment of material act and that the information given is true and complete to the best of my knowledge and belief.

Signed _____ Date _____

RELEASE OF INFORMATION

I, _____ of _____
Print Name *Print Address*

hereby authorize any former or current employer, any doctor or medical facility or any police officer or criminal justice facility/ agency to release for examination to Westmoreland County Community College any and all records related to my employment history, medical history or criminal history, if any.

I further hereby release and forever discharge said persons, agencies and schools from any liability whatsoever for release of said authorized information.

Signed _____ Date _____