



CAERNARVON TOWNSHIP POLICE DEPARTMENT

3307 MAIN ST., P.O. Box 52, MORGANTOWN, PENNSYLVANIA 19543

Office Phone: (610) 286-1012 Emergency: 911 Fax: (610) 286-1002

JOHN W. SCALIA,
Chief of Police

AUTHORITY FOR RELEASE OF INFORMATION (Background Investigation Waiver)

Having made application for certification or employment as a law enforcement officer within Caernarvon Township, Berks County Pennsylvania, I hereby authorize for one year, from the date of execution hereof, any authorized representative of the Caernarvon Township Police Department bearing this release to obtain any information pertaining to my employment, credit history, education, residence, academic achievement, personal information, work performance, background investigations, polygraph examinations, any and all internal affairs investigations or disciplinary records, including any files that are deemed to be confidential and/or sealed.

I also authorize release of any criminal justice records of arrests, citations, detentions, probation and parole records, or any police reports or other police records in which I may be named for any reason, including any files that are deemed to be juvenile and confidential.

I hereby direct you to release this information upon the request of the bearer, whether in person or by correspondence. I further authorize the bearer to make copies of these records. This release is executed with the full knowledge and understanding that these records and information are for the official use of the Caernarvon Township Police Department in fulfilling official responsibilities, which may include sharing the records or information with other criminal justice agencies.

I hereby release you, as the custodian of such records, and employer, educational institution, physician, hospital or other repository of medical records, credit bureau or consumer reporting agency, including its officers, employees, and related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it.

A copy of this form will be as effective as the original. I hereby authorize the National Records Center, St. Louis, Missouri, or other custodian of my military record to release information or copies from my military personnel and related medical records, including a copy of my DD 214, Report of Separation, or other official documents from the United States Military denoting discharge status or current active military status to Caernarvon Township Police Department, 3307 Main Street, Morgantown Pennsylvania 19543.

Signed: _____ Printed: _____ Date: _____



CAERNARVON TOWNSHIP POLICE DEPARTMENT

3307 MAIN ST., P.O. Box 52, MORGANTOWN, PENNSYLVANIA 19543

Office Phone: (610) 286-1012 Emergency: 911 Fax: (610) 286-1002

JOHN W. SCALIA,
Chief of Police

Instructions to the Applicant – Personal History Statement

The information that you provide in this Personal History Statement will be used in the background investigation to assist in determining your suitability for the position of Caernarvon Township Police Officer.

- It is your responsibility to complete this form and provide all required information.
- If you are filling out a printed copy of this form, neatly print in blue or black ink.
- You must respond to all items and questions. If a question does not apply to you, write “N/A” (not applicable) in the space provided for your response.
- If you need more space for any response, use the last page of this form and identify The additional information by question number.

Disqualification

There are very few *automatic* bases for rejection. Even issues of prior misconduct such as prior illegal drug use, driving under the influence, theft or even arrest or conviction are usually not, in and of themselves, automatically disqualifying. However, *deliberate misstatements or omissions* can and often will result in your application being rejected, regardless of the nature or reason for the misstatements/omissions. In fact, the number one reason individuals “fail” background investigations is because they deliberately withhold or misrepresent job-relevant information from their prospective employer.

BOTTOM LINE: You are responsible for providing complete, accurate and truthful responses.

In accordance with the U.S. American with Disabilities Act, the Genetic Information Nondiscrimination Act (GINA), and the Pennsylvania Fair Employment and Housing Act, applicants are not expected or required to reveal any medical or other disability-related information about themselves or their family members in response to questions on this form.

I have read and I understand the above instructions.

Signed: _____ Printed: _____ Date: _____

CAERNARVON TOWNSHIP POLICE DEPARTMENT

Authorization for Disclosure of Social Networking Information

I, _____, give my permission for the Caernarvon Township Police Department to have access to my personal social networking accounts for purposes of my background check. If my accounts are set to “private” I will log into the account in the presence of the Background Investigations Officer and allow him or her to review the content of the account(s). Access to the account(s) must be granted immediately upon request.

I understand that the information present on my personal social networking account(s) is part of my background investigation. Any information that is racist, sexist or would bring discredit upon my candidacy for the position that I am applying for, may disqualify me for further consideration with the Caernarvon Township Police Department.

I understand that refusal to all the Background Investigations Officer access to my personal social networking account(s) will disqualify me from further consideration for employment with the Caernarvon Township Police Department.

Failure to report any social networking accounts that are active will result in immediate disqualification of future or present employment with the Caernarvon Township Police Department.

By signing this document, I am agreeing to provide the Background Investigations Officer immediate access to my personal social networking accounts.

I do not have a social networking account

I authorize the Background Investigations Officer access to my social networking accounts(s)

I do not authorize the Background Investigations Officer access to my social networking accounts(s)

Candidate Signature

Date

Background Investigations Officer

Date

Facebook: _____ Google + _____ Twitter _____ YouTube _____ Pinterest _____

MySpace _____ Instagram _____ Other _____ Other _____