

- PERSONAL INFORMATION -

Name: _____ / ____ / ____
 Last First MI Date of Birth

Address: _____
 Street Apt #

_____ City State Zip

Contact: _____ @ _____ (____) _____
 E-mail Telephone

- PERSONAL ACKNOWLEDGEMENT -

By submitting this application, I hereby acknowledge and certify that the information provided in this application is true and correct to the best of my knowledge, and that any questions left unanswered may disqualify this application.

- ACADEMIC INFORMATION -

Name of postsecondary school you plan to attend:

 School Name City, State

Type:

- 4-year College/University Cumulative
 2-year College/Junior College Grade Point Average (GPA): _____
 Vocational/Technical/Trade (If this is your first semester, enter N/A.)
 Other: _____

Major Course of Study (if known): _____ Degree Sought: _____
 Associate Bachelor's Certificate Other: _____

Are you a re-entry student? YES NO

(A re-entry student is defined as an individual who began attending college, was unable to complete his or her degree, and after a gap of five years or more, is returning to complete his or her education.)

- ACTIVITIES & COMMUNITY SERVICE -

List all additional employment, academic, and/or community service activities in which you have actively participated during the last four years. If necessary, use additional space provided on page three.

Activity	MCPD	Other	Year(s) of Participation	List only Leadership Position(s) Held
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

- HONORS & AWARDS -

List any special honors or awards you have received over the past five years. If necessary, use additional space provided on page three.

Honor/Award & Granting Authority	MCPD	Other	Year
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____

- MILITARY EXPERIENCE & PUBLIC SERVICE -

Please indicate your military or public service experience:

- | | |
|---|--|
| <input type="checkbox"/> Veteran (Honorably Discharged) | <input type="checkbox"/> Law Enforcement Auxiliary/Cadet |
| <input type="checkbox"/> Reservist | <input type="checkbox"/> None |
| <input type="checkbox"/> National Guard Member | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Firefighter/EMT | |

How many years have you been employed by the Manassas City Police Department? _____

- ESSAY -

DIRECTIONS:

In your own words, respond to the writing prompt below in a separate document. The essay must be double-spaced, using one inch margins, a professional font style at size 11 and not exceeding two pages.

Describe your strongest leadership trait and how you apply this trait to the development of your personal and career goals. Explain how in doing so, you will further enhance the community you serve.

- ACTIVITIES & COMMUNITY SERVICE (ADDITIONAL SPACE) -

Activity	MCPD	Other	Year(s) of Participation	List only Leadership Position(s) Held
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

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Activity	MCPD	Other	Year(s) of Participation	List only Leadership Position(s) Held
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____