POLICE DEPARTMENT, COUNTY OF NASSAU, NEW YORK APPLICANT QUESTIONNAIRE

PDCN 191 - REV. 10/21 PAGE 1 OF 4

The County of Nassau is an Equal Opportunity Employer

INSTRUCTIONS

- A. PRINT ALL INFORMATION LEGIBLY.
- B. Every applicable question must be answered by the applicant. A false statement will be considered cause for rejection.
- C. If you need additional space use item 48. Note the item number the information refers to.
- D. A fingerprint processing fee payable to the "Division of Criminal Justice Services" will be required at a subsequent stage of the application procedure. This fee is not retained by the County of Nassau, but is remitted to New York State. It is non-refundable.
- E. Items marked with an asterisk (*) are to be answered by police officer/peace officer applicants only.

DATE OF	APPLICA		MONTH	DA	\Y 	YEA	AR 												
1. LAST NAME			FIRS	ST NAME					MIE	DDLE N	AME		TIT	LE OF POSIT	ION		GF	RADE COM	IPLETED
2. NUMBER	STREE	ΞT		V	'ILLAG	E/CITY					APT. NO.			COUNTY		\$	STATE	ZIP CO	DE
3. EMAIL										4. ARE	EA CODE F	PHONE	NO.		5.	SOCIAL SE	CURITY NO).	
6. DATE OF BIR		7. CITIZEN] NO	8. * PLA	ACE OF	BIRTH	1								G	9. *NATURALIZED CITIZEN CHECK HERE. GIVE DATE, COURT, STATE AND DOCUMENT NUMBER IN ITEM 48.*			
	EVER USED ANY IF SO, GIVE NAME I IN ITEM 48.	YES NO	LAST NA	AME						FIRS	ST NAME				<u>'</u>	MIDI	DLE NAME		
					R'S LICENSE NO.				STATI	STATE CLASS LICENSE MONTH			SE EXPIRE H DAY	S YEAR					
13. NAME OF P	PERSON AT ABOVE	ADDRESS W	HO CAN	CONTACT	YOU						OR RES	O YOU HAVE ANY ACTIVITIES, COMMITMENTS YES - GIVE DETAILS IN ITEM 48: SPONSIBILITIES THAT MAY HINDER YOU IN NG WORK ATTENDANCE REQUIREMENTS?							S IN ITEM 48.
15. HAVE YOU	EVER SERVED IN	THE ARMED F	FORCES?	· 🗆	YES - I	F YES,	ANSW	ER QUEST	TIONS 1	6 TO 2	1								
								QUESTION	22										
16. BRANCH									18. HAVE YOU EVER BEEN CON- VICTED OF OR PLEAD GUILTY TO ANY MILITARY OFFENSE? YES - GIVE DETAILS II NO				S IN ITEM 48.						
19. ENLISTMEN MONTH DA						20. IF MORE THAN ONE ENLISTMENT CHECK HERE. GIVE OTHER ENLISTMENT DATES IN ITEM 48. 21. DO YOU HAVE AN REMAINING RESERVE OBLIGATION?													
	RESENTLY A MEM) FORCES RESER'	ves 🗀		YES, ANS				3 TO 27					ı						
23. BRANCH	VIE CONTINE.			RESENT F					25. \$	SERIAL	. NO.			26. STAT	US		27. EN	ILISTMENT	EXPIRES YEAR
														☐ ACTIV] INACTIVE	MONTI	H DAY	YÉAR
ESSENTIAL JOB FUNCTIONS AS PUBLISHED? PERFORM THE ESSENTIAL JOB FUNCTIONS?							_												
	NAL RECORDS - LI	ST ALL SCHO	OLS ATTE	ENDED, IN	NCLUD	ING GF	RAMMA	R SCHOOL	L TO PR	RESENT	T. IF ADDIT	IONAL :	SPACE IS	NEEDED, US	SE ITEM	48. GIVE MC	NTH AND Y	EAR.	
ONLY DATES AT FROM	TO							NAME A	ND LOC	CATION						GR	ADUATED?	DIPLO	MA/DEGREE

31. LIST AL	L PREVIO	US ADDRE	ESSES (USE MONTH AND YEAR ONL	.Y)								
FROM	то		ADDRESS (NAME OF OWNER OR RENT OR IF OTHER THAN APPLICANT) OWN, RENT BOARD, ETC.									
-												
32 LISTEV	VERY PLAC	CE YOU W	ERE EMPLOYED - EXCEPT MILITAR	Y SERVIC	E (USE MONTH A	AND YEAR ONLY) IF CURR	ENTLY A COUNTY EMPLOYE	F - GIVE FULL D	ETAILS IN ITEM 48	8		
FROM	то	1		OYER/AD			TYPE OF BUSINESS		N OR TITLE	DO NOT WRITE IN THIS COLUMN		
33. HAVE Y	OU EVER	BEEN CO	NVICTED OF OR PLEAD GUILTY TO	ANY OFFI								
MONTH	DAY	YEAR	CHARGE OR OFFENSE		COURT	TOWN/0	CITY	STATE	DIS	POSITION	OF CHARGE	
24 50 1/2	LI BDESS	ITI V I I AV 'T	CHARGES BENDING AGAINST VOI	LEOD AL	/ OFFENSES		177711 10					
34. DO YO	o presen	IILT HAVE	CHARGES PENDING AGAINST YOU	LOK AN		YES - GIVE DETAILS IN	I I I ⊏M 48.					
35. HAVE Y			D FOR ANY OTHER CIVIL SERVICE E	EXAMINAT		NTY AGENCY? APPOINTED						
TITLE OF EXAMINATION/POSITION				NAME OF ORGANIZATION DAT							YES/NO	
26 DO VO	1111012	IV LICENS	DE IN CONNECTION WITH ANY SHOP	NECC DO								
36. DO YOU HOLD ANY LICENSE IN CONNECTION WITH ANY BUS					NESS, PROFESSION, OR VOCATIONAL TRAINING? ISSUING AGENCY/ADDRESS DATE ISSUED							

OR VOLUN	TEER FIF	EFIGHTER,	OR SERVED AS A PAID EMERGENCY MEDICAL LICE OFFICER?	☐ YES - GIVE DE	ETAILS IN ITEM 48.	38. HAVE YOU EVER BEEN BONDED?	☐ YES - GIVE DETAILS IN IT☐ NO		39. HAVE YOU EVER BEEN REFUSED A BOND?	YES - GIVE DETAILS IN ITEM 48.
40. HAVE Y EVER BEEI MARRIED?	۷ <u> </u>	YES 41. MC	. DATE OF MARRIAGE ONTH DAY YE	AR 42. DATE OF MONTH	DIVORCE DAY YEAR	IF DIVORCED - (GIVE COURT, COUNTY, STATE (OR COUNT	RY	
43. SPOUS	E'S FULL	NAME (GIVE	E ADDRESS IF DIFFEREN	NT THAN YOURS)						
44. DO YO	U HAVE A	NY RELIGIO	US OR OTHER BELIEFS	WHICH WOULD RES	TRICT YOU IN ANY	WAY IN MEETING	ASSIGNED WORK SCHEDULES	6?		IN DETAIL IN ITEM 48.
			OFFICER/PEACE CER/PEACE OFFI							
45.*HAVE`	OU EVE	R BEEN ARR	ESTED FOR ANY OFFEN	ISE? (INCLUDE TRAF	FIC VIOLATIONS. L	IST ALL ARRESTS	REGARDLESS OF THE DISPOS	SITION OF T	THE CHARGE. USE IT	EM 48 FOR ADDITIONAL
MONTH	DATE DAY	YEAR	CHARGE OR OFFENSE		COURT	TOWN/CITY			TATE	DISPOSITION OF CHARGE
46. * DO Y	OU HAVE	ANY PERSO	ONAL RESERVATIONS OF	R RELIGIOUS CONVI	CTIONS WHICH	□ YES - G	GIVE DETAILS IN ITEM 48.			
WOULD PF HUMAN LIF	EVENT Y	OU FROM TA	AKING A HUMAN LIFE IN	ORDER TO PROTEC	TANOTHER	_ □ NO		ADVOCATE	S THE OVERTHROW	OF THE GOVERNMENT OF THE
UNITED ST	ATES OR	ANY OF ITS		CE, VIOLENCE OR OT	THER UNLAWFUL M YES - GIVE DI		BASIC PURPOSE IS TO SUBVE			PRESENT FORM OF GOVERNMENT
48 LISE TE	IIS SPAC	FOR ADDI	TIONAL INFORMATION II	NDICATE ITEM NUME	□ NO	REFERS TO WHE	N ALL ANSWERS ARE COMPLE	TE FILL O	LIT ITEM 49 ON NEXT	PAGE
ITEM NO.	IIS SFAC	_ FOR ADDI	HONAL INFORMATION, II	NDICATE ITEM NOME		TIONAL INFORMA		TE, FILL O	OTTIEM 49 ON NEXT	FAGE.

48. CONTIN	IUED - SPACE FOR ADDITIONAL INFORMATION
ITEM NO	ADDITIONAL INFORMATION
49. PRINT YO	UR FIRST NAME, MIDDLE INITIAL AND LAST NAME AFTER THE WORD "I". DO NOT SIGN THIS APPLICATION, EXCEPT IN THE PRESENCE OF A DULY LICENSED NOTARY PUBLIC.
STATE C	OF NEW YORK SS:
COUNT	OF NASSAU
I,	, being duly sworn, depose and say I am the
ahove na	, being duly sworn, depose and say I am the amed person, I have personally read and answered each and every question herein, applicable to the position for which I have
applied :	and each and every answer is full, true and correct in every respect. I also agree that if the information given is found to be
	ny way, it shall be considered sufficient cause for denial of employment or discharge.
Sworn to	before me this SIGNATURE OF APPLICANT
day of	
	, -

NOTARY PUBLIC