



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

(To be completed by applicant)

This form **must** be clearly printed in black ink or printed from a computer. All questions **must** be answered, if applicable. If not, indicate **N/A (Not applicable)**. Pages which are **not** completed and legible **will not** be considered. If space is not sufficient for complete answers, or you wish to furnish additional information, **attach additional sheets** of the same size as this form and refer to the question answered. **ATTENTION:** If any pages are missing from this questionnaire when turned in, the applicant will not be considered. **(18 pages)**

Position Desired: \_\_\_\_\_ Date: \_\_\_\_\_

**PERSONAL INFORMATION**

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Height: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Social Security#: \_\_\_\_\_

All Email Addresses: \_\_\_\_\_

Home Phone# (\_\_\_\_) \_\_\_\_\_ Work# (\_\_\_\_) \_\_\_\_\_ Cell#(\_\_\_\_) \_\_\_\_\_

List **All** Social Media accounts and user names:

Other names used (Nicknames, aliases, maiden name, former names changed legally or otherwise): \_\_\_\_\_

Are you legally eligible for employment in the USA: \_\_\_\_\_ .

(For Males Only) Have You Registered with the Selective Service? \_\_\_\_\_ .

If not, Explain. \_\_\_\_\_



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

Please list **All States** you have received a Driver's License and list the Driver's License Number.

_____	_____	_____	_____
(State)	D/L Number	(State)	D/L Number
_____	_____	_____	_____
(State)	D/L Number	(State)	D/L Number
_____	_____	_____	_____
(State)	D/L Number	(State)	D/L Number

**Driving History and Vehicle Information**

List **ALL** Vehicles Registered under your name, to include the make, model, license plate numbers and current valid insurance information (Carrier and policy number).

---



---



---

Have you **ever** been denied vehicle insurance? \_\_\_\_\_.

Have you **ever** filed an insurance claim? \_\_\_\_\_.

Have you **ever** made a false insurance claim? \_\_\_\_\_.

Have you **ever** been involved in an automobile crash where you were the driver? \_\_\_\_\_

Has any vehicle crash **ever** been determined to be your fault? \_\_\_\_\_ was a ticket issued? \_\_\_\_\_

If you answered **yes** to **any** of the above questions write a detailed statement below:  
where it occurred, when, how and the outcome.

---



---



---



---



---



---



---



---



---



---



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

**MILITARY SERVICE**

Have you **ever** been a member of the armed forces, United States or Foreign? \_\_\_\_\_

Branch of Service: \_\_\_\_\_ Service#: \_\_\_\_\_

Date of Entry: \_\_\_\_\_ Date of Discharge: \_\_\_\_\_

Type of Discharge: \_\_\_\_\_ Place of Discharge: \_\_\_\_\_

Reason for Separation: \_\_\_\_\_

Rank upon Entry: \_\_\_\_\_ Rank of Discharge: \_\_\_\_\_

Reserve Obligation: \_\_\_\_\_  
(Active) (Inactive) (Until what date)

Eligible to reenlist: \_\_\_\_\_

Military Citations and awards received:  
\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

List **any** Disciplinary Actions or Military Courts received:

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Date) (Command) (Location) (Nature of Charge)

\_\_\_\_\_  
(Disposition) \*If you have other disciplinary action, please attach sheets.



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

**Job Related**

Have you ever quit any job without giving notice? \_\_\_\_\_

Have you ever been fired from any job? \_\_\_\_\_

Have you ever lied to your supervisor? \_\_\_\_\_

Have you ever faked an injury on the job? \_\_\_\_\_

Have you ever been suspended from any job? \_\_\_\_\_

Have you ever received any disciplinary action from any job? \_\_\_\_\_

If you answered yes to any of the above questions please explain in detail.

Lined area for providing a detailed explanation for any 'yes' answers to the previous questions.

\* If extra pages are needed, please attach \*Revised 12/11/18



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

List below present and past employment for the past 10 years, beginning with your most recent.  
**Include periods of unemployment.** Continue on a separate sheet of paper if necessary.

Name and Address of Company and Type of Business	Employment Dates	Beginning Salary	Ending Salary	Reason for Leaving	Supervisor
_____ _____ _____					
Telephone:					

Describe the work you did:

Name and Address of Company and Type of Business	Employment Dates	Beginning Salary	Ending Salary	Reason for Leaving	Supervisor
_____ _____ _____					
Telephone:					

Describe the work you did:



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

Name and Address of Company and Type of Business	Employment Dates	Beginning Salary	Ending Salary	Reason for Leaving	Supervisor
_____ _____ _____					
Telephone:					

Describe the work you did:

Name and Address of Company and Type of Business	Employment Dates	Beginning Salary	Ending Salary	Reason for Leaving	Supervisor
_____ _____ _____					
Telephone:					

Describe the work you did:



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

**FINANCIAL STATEMENT**

- Are you currently meeting your financial obligations? \_\_\_\_\_
- Are you currently late on **any** bills (more than 30 days)? \_\_\_\_\_
- Are you able to pay your bills on time when they are due? \_\_\_\_\_
- Have you **ever** been contacted by **any** Collection Agency regarding **any** outstanding unpaid debt? \_\_\_\_\_
- Have any of your bills **ever** gone to Collections? \_\_\_\_\_
- Have you **ever** been sued in court for the collection of **any** debt contracted by you? \_\_\_\_\_
- Have you **ever** filed for Bankruptcy? \_\_\_\_ Have you **ever** been declared officially bankrupt? \_\_\_\_
- Have you **ever** had your wages Garnisheed? \_\_\_\_\_
- Have you **ever** used false or fraudulent information to obtain credit? \_\_\_\_\_

If the answer to any of the above questions is **yes**, please give the date, name of court and location of court. Also give a detailed statement explaining your answer.

(Date)	(Court)	(Location of Court)
(Date)	(Court)	(Location of Court)
(Date)	(Court)	(Location of Court)

Statement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

**FAMILY DATA**

Present Marital Status: **Circle One**- Single, Married, Widowed, Separated, Divorced

**If** divorced, give date, name and location of court granting the decree: \_\_\_\_\_,  
\_\_\_\_\_, \_\_\_\_\_ (Date)  
(Court) (Location of Court)

**Present or Former Spouse:**

Present Spouse Phone #

Name: \_\_\_\_\_ Maiden name: \_\_\_\_\_  
(Last) (First) (Middle)

Present address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_ Place of Marriage: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Employment Address: \_\_\_\_\_, City: \_\_\_\_\_, State: \_\_\_\_\_

Occupation: \_\_\_\_\_ Phone #'s: \_\_\_\_\_;

List the names, ages and relationship of **all** persons living with you:

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_





**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

Father's Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(Last) (First) (Middle) (Maiden)

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_

Are **any** of the people living with you a convicted felon? \_\_\_\_\_

Have you ever been involved in **any** domestic violence? \_\_\_\_\_

Have **any** of your family members been a member of **any** criminal street gang? \_\_\_\_\_

Have you **ever** been a member of **any** criminal street gang? \_\_\_\_\_

Have you **ever** been involved in any physical altercation? \_\_\_\_\_

If you answered **yes**, to **any** of the above questions, please provide a detailed statement to include the location, date and names of who were involved.

**Statement:**

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

---

**PAST ADDRESSES:**

Please list your addresses for the past **Ten Years**. If you served in the Armed Forces, list your **Duty Stations** while in the military. Start with your **Present Address**.

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(From/To) (Address) (City) (State)  
Property Name: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Name/Manager) (Address) (Phone)

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(From/To) (Address) (City) (State)  
Property Name: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Name/Manager) (Address) (Phone)

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(From/To) (Address) (City) (State)  
Property Name: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Name/Manager) (Address) (Phone)

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(From/To) (Address) (City) (State)  
Property Name: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Name/Manager) (Address) (Phone)

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(From/To) (Address) (City) (State)  
Property Name: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Name/Manager) (Address) (Phone)



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

**MISCELLANEOUS INFORMATION**

Have you **previously** served as a Law Enforcement Officer? \_\_\_\_\_

If **yes**, state in what capacity, location, date and reason for leaving: (List All)

\_\_\_\_\_  
\_\_\_\_\_

List Law Enforcement Agencies you have applied for in the past three years.

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Date) (Agency) (Location) (Status)

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Date) (Agency) (Location) (Status)

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Date) (Agency) (Location) (Status)

**SKILLS/CERTIFICATIONS/BILINGUAL**

List any specialized skills, certification, or bilingual proficiencies you possess:

Skills: \_\_\_\_\_

Certifications: \_\_\_\_\_

Bilingual (list the language proficiency you possess): \_\_\_\_\_



BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT

**LEGAL HISTORY**

Have you **ever** been **arrested OR charged** with **any** criminal offense? \_\_\_\_\_

Have you **ever** had **any** police contact? \_\_\_\_\_ (list all)

Have you **ever** had the police called on you? \_\_\_\_\_

Have you **ever** been questioned or detained by the police? \_\_\_\_\_

Have you **ever** committed a crime where you were not caught? \_\_\_\_\_

Have you **ever** been required to furnish bail/bond for appearance in **any** court of law? \_\_\_\_\_

Have you **ever** been convicted in **any** court of **any** criminal charge-**Felony or Misdemeanor?** \_\_\_\_\_

Have you **ever** received a **Traffic Summons** for **any** violation of traffic laws? \_\_\_\_\_ (list all)

If the answer to **any** of the above questions is **yes**, explain below in detail. Please give the date, location and state, charge and final disposition in each case.

_____	_____	_____	_____
(Date)	(Location & State)	(Charge)	(Final Disposition)
_____	_____	_____	_____
(Date)	(Location & State)	(Charge)	(Final Disposition)
_____	_____	_____	_____
(Date)	(Location & State)	(Charge)	(Final Disposition)
_____	_____	_____	_____
(Date)	(Location & State)	(Charge)	(Final Disposition)
_____	_____	_____	_____
(Date)	(Location & State)	(Charge)	(Final Disposition)

**Statement:**

---



---



---



---



---



---



---



---



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

**Narcotic/ Drug/ Alcohol Information**

Have you **ever possessed, used, or distributed any** illegal drug or substance, such as: Marijuana, Heroin, Speed, LSD, Cocaine, Hashish, others? \_\_\_\_\_

Have you **ever** abused prescription drugs? \_\_\_\_\_

Have you **ever** taken a prescription drug that was not prescribed to you by a doctor? \_\_\_\_\_

Have you **ever** sold prescription drugs illegally? \_\_\_\_\_

Have you **ever** consumed alcohol underage? \_\_\_\_\_

Have you **ever** supplied alcohol for someone who is underage? \_\_\_\_\_

If the answer is **yes** to **any** of the above, describe the circumstances in **detail**.

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Date) (Drug) (Date) (Drug)

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Date) (Drug) (Date) (Drug)

**Statement:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

---

**LEGAL HISTORY CONTINUED**

If you answer **yes** to any of the below questions please provide a detailed statement to include when (date), location, and names. Who else would know these things about you.

- Have you **ever** trespassed? \_\_\_\_\_
- Have you **ever** committed arson? \_\_\_\_\_
- Have you **ever** committed a sexual assault? \_\_\_\_\_
- Have you **ever** sold drugs illegally? \_\_\_\_\_
- Have you **ever** shoplifted? \_\_\_\_\_
- Have you **ever** stolen anything? \_\_\_\_\_
- Have you **ever** forged any document? \_\_\_\_\_
- Have you **ever** knowingly issued a bad check? \_\_\_\_\_
- Have you **ever** used tobacco underage? \_\_\_\_\_

**Statement:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

**EDUCATION**

List the name, address and telephone number of all schools attended, the course of study, and the highest level of education achieved (i.e., AA Degree, 60 credit hours, etc).

1. \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,  
(Name and year attended) (Address) (City or County)  
\_\_\_\_\_, (\_\_\_\_\_) \_\_\_\_\_,  
(State) (Telephone Number) (Credit Hours)  
\_\_\_\_\_  
(Courses Taken)  
\_\_\_\_\_  
(Highest Level of Education Achieved)

2. \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,  
(Name and year attended) (Address) (City or County)  
\_\_\_\_\_, (\_\_\_\_\_) \_\_\_\_\_,  
(State) (Telephone Number) (Credit Hours)  
\_\_\_\_\_  
(Courses Taken)  
\_\_\_\_\_  
(Highest Level of Education Achieved)



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

**PERSONAL REFERENCES**

\* You may use your references from your application **ONLY IF** you have known them for at least 4 years  
add any additional \*

List the name, address, telephone number and email of three (3) personal references **not** related  
to you and have known you for at **least four (4) years**:

1. \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,  
(Name) (Address) (City or County)  
\_\_\_\_\_, (\_\_\_\_\_) \_\_\_\_\_,  
(State) (Telephone Number) (Email)

2. \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,  
(Name) (Address) (City or County)  
\_\_\_\_\_, (\_\_\_\_\_) \_\_\_\_\_,  
(State) (Telephone Number) (Email)

3. \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,  
(Name) (Address) (City or County)  
\_\_\_\_\_, (\_\_\_\_\_) \_\_\_\_\_,  
(State) (Telephone Number) (Email)

List **any** clubs, social or fraternal organizations, professional or trade unions or associations to  
which you are currently a member of or have been a member in the past.

Do you have **any** relatives currently working for the City of Williamsburg? If yes please list

\* If extra pages are needed, please attach \*Revised 12/11/18





**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

name(s) and type of relationship. \_\_\_\_\_



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

**DISCLOSURE INFORMATION**

The following statement is to be given to each individual seeking employment with the **Williamsburg Police Department**. Each applicant is subjected to a complete background investigation conducted by a representative of the **Williamsburg Police Department**.

The **Williamsburg Police Department** is involved in the process of hiring applicants only to the extent of background investigations, interviews and recommendations. The Police Department is not authorized to offer employment to an applicant and no statement made by a member of the Police Department shall be construed as a job offer to the applicant.

\*\*\*\*\*

Before signing this release, be **sure** that **all** information represents the Entire Truth as it relates to the questions asked. **Any** Misrepresentation or Omission given by the applicant will be **Immediate Grounds for Termination** of employment or elimination from the Selection Process. Applicant and WPD personnel will go over each section and make sure everything is correct and accurate. **NOW** is this time to disclose, correct or add any information. There will not be time later to add or correct information. What is handed in is what will be used as the full background check process. Copies of the following on page 18 may be handed in later in a timely manner if they were not included when the original background questionnaire was handed in.

---

(Signature of Applicant)

---

(Date)



**BACKGROUND INVESTIGATION FORM  
WILLIAMSBURG POLICE DEPARTMENT**

**INVESTIGATOR REVIEW**

- \_\_\_\_\_ Read Disclosure/ Sign Disclosure
- \_\_\_\_\_ Birth Certificate (Copy)
- \_\_\_\_\_ Social Security Card (Copy)
- \_\_\_\_\_ Diploma (Copy)
- \_\_\_\_\_ DD 214 (Military) (Copy)
- \_\_\_\_\_ Driver's License (Copy)
- \_\_\_\_\_ Notarized Release of Information
- \_\_\_\_\_ College Transcripts (Copy)
- \_\_\_\_\_ Go over each section

I certify that I have reviewed this Background Questionnaire with the above named applicant and that the applicant has acknowledged that information given is true and accurate to the best of their knowledge.

\_\_\_\_\_ (Investigator)

\_\_\_\_\_ (Date)

Additional Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_