

Auxiliary Security Officer Application
University of Delaware Police Department
413 Academy St Newark, DE 19716



Position: Auxiliary Security Officer

Supervisor: Sergeant Joelle Ryan, *Joelle.Ryan@Udel.edu*

Auxiliary Security Officers are part-time miscellaneous wage employees who work alongside police and security officers at the University of Delaware Police Department. Under general supervision, they serve as a uniformed member of the University of Delaware Police Department performing routine and diverse duties at University locations throughout the State of Delaware. Requiring independent judgment in the application of prescribed procedures and methods related to University services. Promotes safety and security among the University community; takes corrective action as required in accordance with established rules, regulations and procedures; requires the exercise of tactful and assertive interpersonal communication skills.

Special Requirements: Minimum of a High School Diploma/GED with three years of related experience, prior law enforcement experience preferred, or equivalent combination of education and experience; Possession of a valid motor vehicle operator's license; Must also pass a comprehensive background investigation including driving record, financial status and criminal history. *Base rate of pay: \$20/hour*

Directions: Complete and return to Sgt Ryan at above address. If possible, please type entries.

Full Name: _____ Date of Birth: _____ Gender: M F

Permanent Address: _____

Phone Number: _____ Email address: _____

United States Citizen: **Yes** **No** If non-US citizen, Visa Type: _____

Valid Driver's License: **Yes** **No** DL State: _____ DL Number: _____

Mark Yes or No. If you answer yes to any of the first three questions, provide details on a separate sheet. A conviction or judgment does not necessarily mean disqualification.

- | | | |
|---|------------|-----------|
| 1. Have you ever been involved in a traffic accident? | Yes | No |
| 2. Have you ever been arrested for a criminal offense? | Yes | No |
| 3. Have you ever consumed, possessed, or sold illegal drugs or controlled substances? | Yes | No |

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|---|------------|-----------|
| 5. Have you ever consumed prescription drugs that were not prescribed to you? | Yes | No |
| 6. Do you have any other employment obligations? | Yes | No |
| 7. May we contact your current employer? | Yes | No |
| 8. Are you now or have you ever been employed by the University of Delaware? If yes, what department and dates? | Yes | No |
| 9. Do you have any past or present military service or obligations? (If yes, include DD Form 214) | Yes | No |

Education: List current and previous high schools, trade schools, and colleges. Use separate sheet if needed.

1. Institution name: _____ Dates attended: _____
Concentration: _____
Address/Phone: _____

2. Institution name: _____ Dates attended: _____
Concentration: _____
Address/Phone: _____

Character References: List three references that are NOT previous employers or relatives.

1. Name: _____ Relation: _____
Address: _____ Phone: _____

2. Name: _____ Relation: _____
Address: _____ Phone: _____

3. Name: _____ Relation: _____
Address: _____ Phone: _____

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Employment History: List all current and previous employers. Use separate sheet if needed.

1. Name of Company: _____ Dates Employed: _____
Address: _____
Supervisor's name: _____ Phone: _____
Describe Duties: _____

Reason for leaving: _____

2. Name of Company: _____ Dates Employed: _____
Address: _____
Supervisor's name: _____ Phone: _____
Describe Duties: _____

Reason for leaving: _____

Give additional information about your skills, qualifications, or any other information that may be useful to know when evaluating your application. Use separate sheet if needed.

Statement of Understanding:

By initialing below, I hereby certify that the answers given in this statement are full and true to the best of my knowledge and belief. I understand that any false information, omissions, or misrepresentations of facts called for in this application may be cause for rejection of my application or dismissal at any time during my employment. _____

Information Release:

By initialing below, I do hereby authorize the release of all information requested by the University Of Delaware Police Department pertaining to their background investigation for a part-time position. This includes any record of criminal or traffic arrests. _____

Signature: _____

Date: _____