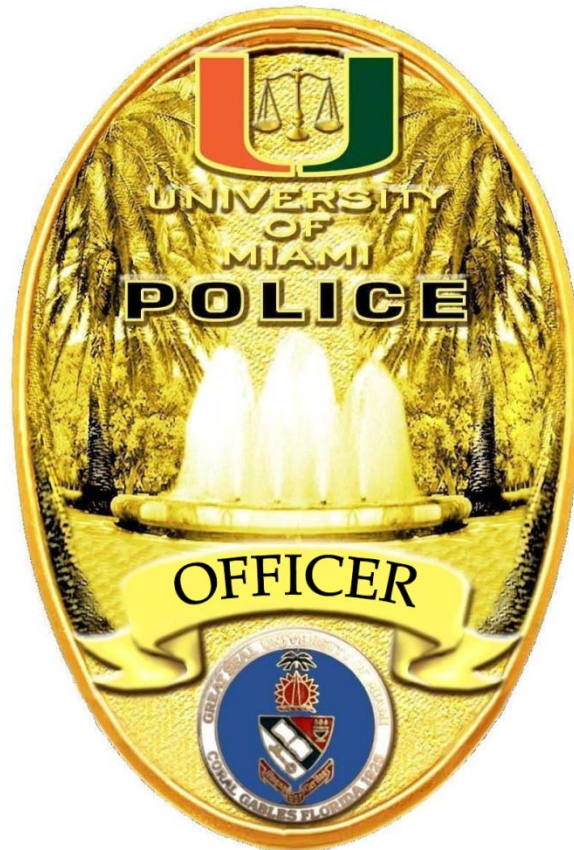


# **U POLICE**

**University of Miami Police Department**

## STUDENT PATROL APPLICATION



Dear Applicant,

Thank you for your interest in employment with the University of Miami Police Department. Please print and complete the following application.

Listed on this page are some of the functions and responsibilities required of Student Patrol Aides. Prior to completing the remainder of the application please ensure that you carefully read the list below. By initialing next to each item you acknowledge your understanding of the listed duty, function, or requirement.

**(Initials)**

- \_\_\_\_\_ I understand that this work may require frequent and prolonged walking, standing, running, sitting, and stooping.
- \_\_\_\_\_ I understand that physical stamina in all of its forms (mental, climate related, etc.) is a basic physical requirement of this position.
- \_\_\_\_\_ I understand that failing to meet the physical requirements required for this position, including inability discovered through job performance, may result in the re-evaluation of my eligibility to work as a Student Patrol Aide.
- \_\_\_\_\_ I understand that work in the Law Enforcement field requires varying shift schedules in accordance with departmental needs. As a result of employment as a Student Patrol Aide I may be required to work nights, weekends, and holidays (during the academic semester).
- \_\_\_\_\_ I understand that as a requirement for this position the University of Miami Police Department maintains the right to obtain fingerprints from me for record keeping and background checks.

Signing below indicates your understanding, and willingness to comply with the above listed requirements, if hired as a University of Miami Student Patrol Aide.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_



**ACADEMIC INFORMATION**

\_\_\_\_\_  
Expected Graduation Date

\_\_\_\_\_  
College

\_\_\_\_\_  
Major(s)

\_\_\_\_\_  
Minor(s)

\_\_\_\_\_  
Average Credit Hours / Semester

\_\_\_\_\_  
Cumulative GPA

**WORK EXPERIENCE (PLEASE COMPLETE IN ADDITION TO YOUR ATTACHED RESUME)**

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Dates of Employment

\_\_\_\_\_  
Supervisor

\_\_\_\_\_  
Contact Number

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Dates of Employment

\_\_\_\_\_  
Supervisor

\_\_\_\_\_  
Contact Number

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Dates of Employment

\_\_\_\_\_  
Supervisor

\_\_\_\_\_  
Contact Number

**ON-CAMPUS REFERENCES (APPLICABLE TO CONTINUING STUDENTS)**

Please provide the name of your present Resident Assistant (if you currently live on-campus), and your former Resident Assistant (if you lived on-campus last year). If you have never resided on-campus please list one University of Miami Staff Member, Administrator, or Professor who may be contacted as a reference.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address

**PERSONAL REFERENCES**

Please list two personal references who can attest to your moral character (non-family members):

_____	_____
Name	Phone Number
_____	_____
Street	Apartment Number
_____	_____
City	State      Zip Code

_____	_____
Name	Phone Number
_____	_____
Street	Apartment Number
_____	_____
City	State      Zip Code

**EMERGENCY CONTACT**

_____	_____
Name	Relationship to You
_____	_____
Mobile Phone Number	Home Phone Number
_____	_____
Street	Apartment Number
_____	_____
City	State      Zip Code



1. Are you eligible to work in the United States?  
 YES       NO
2. Do you have a 2.5 or higher cumulative GPA?  
 YES       No       N/A (Incoming Freshman Only)
3. Have you ever taken, possessed, sold, purchased, or manufactured illegal narcotics?  
 YES       NO  
(If yes, please explain on the additional pages attached)
4. Have you ever been convicted of a crime? (Including misdemeanor, felony, or criminal negligence)  
 YES       NO  
(If yes, please explain on the additional pages attached)
5. Have you ever pled guilty to a crime?  
 YES       NO  
(If yes, please explain on the additional pages attached)
6. Have you ever pled no contest (nolo contendere) or had adjudication withheld on any criminal charge? (Including misdemeanor, felony or criminal negligence)  
 YES       NO  
(If yes, please explain on the additional pages attached)
7. Do you have any criminal charges pending? (Including misdemeanor, felony or criminal negligence)  
 YES       NO  
(If yes, please explain on the additional pages attached)
8. Have you been placed in a pretrial diversion program, pretrial intervention program or had prosecution deferred?  
 YES       NO  
(If yes, please explain on the additional pages attached)
9. Have you ever received a dishonorable discharge from the Armed Forces of the United States?  
 YES       NO
10. Have you ever been issued a traffic citation?  
 YES       NO  
(If yes, please explain on the additional pages attached)
11. Has your driver's license ever been suspended?  
 YES       NO  
(If yes, please explain on the additional pages attached)

12. Have you ever had your fingerprints taken?

YES       NO

If yes, please state:

*When:* \_\_\_\_\_

*Where:* \_\_\_\_\_

*Why:* \_\_\_\_\_

*Who Took Them:* \_\_\_\_\_

*Criminal history will not automatically result in denial or loss of employment.*



**ADDITIONAL DOCUMENTATION**

- Resume
- A photocopy of your Cane Card

**APPLICATION CERTIFICATION**

I hereby certify that all of the facts and information listed on this employment application are true and complete. I understand that any false, incomplete or misleading information given by me on this application may result in a decision not to hire me or in a subsequent decision to terminate my employment with the University of Miami.

I authorize the University and/or its designated representative to investigate, as part of the hiring process, and at any time during the course of my employment, all information submitted in the application process including, but not limited to, criminal background checks, consumer credit reports, scholastic searches, previous employers, references and others, and hereby release the University from any liability as a result of such contact with third parties.

If I receive a job offer, I may be asked to provide documentation, including the following: proof of age, work authorization documents, educational transcripts, professional certifications/licenses and military discharge papers. I understand that employment and completion of the probationary period will not result in an employment contract for any specific term and that both the University and I have the right to terminate my employment at any time.

No manager or representative of the University other than the President or the Provost has any authority to enter into any agreement of employment for any specified period of time or to make any agreement contrary to this statement.

**I certify that I have read, understand and agree with the information contained in the Application Certification.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

**FAIR CREDIT REPORTING ACT** (*Disclosure to Applicants and Employees*)

In compliance with Public Law 91-508 (the Fair Credit Reporting Act), as amended by Public Law 104-208 (the Consumer Credit Reporting Reform Act of 1996) the University of Miami may obtain a consumer report, concerning you for employment purposes and in conjunction with either your application for employment and/or decisions concerning your employment status with the University of Miami .

**I certify that I have read, understand and agree with the above.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

**AUTHORIZATION TO OBTAIN CONSUMER REPORT**

I hereby authorize the University of Miami to obtain a consumer report (including, but not limited to, criminal history, consumer credit reports, motor vehicle reports, abuse registries, workers compensation records as part of your physical, and, in some cases, educational and/or professional credentials) concerning me. It is my understanding that the University of Miami will use this consumer report for employment and/or decisions concerning my employment status with the University of Miami.

**I certify that I have read, understand and agree with the above.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

*(Before taking any adverse action based upon such information, the University will comply with the adverse action requirements of the Fair Credit Reporting Act.)*

**PRE-EMPLOYMENT BACKGROUND INVESTIGATION**

Applicants are subject to a background investigation with Florida Department of Law Enforcement and other state, out of state and local agencies.

Applicants for employment are evaluated on the merits of their qualifications for positions available regardless of the individual's race, religion, color, sex, age, veteran status, national origin, disability or sexual orientation. Conviction of a crime will not necessarily preclude an applicant from consideration for employment with the University of Miami.

**I certify that I have read, understand and agree with the above.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

**ADDITIONAL EXPLANATIONS (FROM P. 7)**

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**All applications must be printed and submitted to:  
Barbara Reed, UMPD Security Coordinator  
5665 Ponce De Leon Blvd (1<sup>st</sup> Floor Ponce Garage)  
Coral Gables, FL 33146  
Phone: (305) 284-6897**

*The University of Miami is an equal opportunity/affirmative action employer.*