



GARDENA POLICE DEPARTMENT

1718 WEST 162nd STREET / GARDENA, CALIFORNIA 90247-3732 / WWW.GARDENAPD.ORG / PHONE (310) 217-9600

**GARDENA POLICE DEPARTMENT
PRELIMINARY BACKGROUND QUESTIONNAIRE**

POSITION APPLIED FOR _____

HOW DID YOU HEAR ABOUT GARDENA PD? _____

NAME _____ DOB _____ AGE _____

SSN# _____ CDL# _____ CELL PH# _____

ADDRESS _____ CITY/STATE/ZIPCODE _____

Part of the screening process for a position with the Gardena Police Department is a thorough background investigation. This questionnaire is the first step in the background process for all positions in the Police Department. The information you provide in your background will be verified through a variety of sources. If it is discovered that you have made false, misleading, or inaccurate statements, you WILL be disqualified from the process. If you have been hired before the inaccuracy has been discovered, you will be dismissed. Negative information revealed in the questionnaire may or may not be grounds for disqualification, but DISHONESTY IS ALWAYS GROUNDS FOR DISQUALIFICATION!

1. List **ALL** citations, other than parking violations, you have received in the last five years. Include the nature of the violation(S), date, issuing agency and disposition.

2. List **ALL** traffic collisions you have been involved in as the driver, on public or private property, with or without a police report, in the last five years.



3. Have you **EVER** been arrested, detained or the subject of a criminal investigation as a juvenile or an adult? If so, list the offense, date, agency, and disposition.

4. In the last year, have you **EVER** driven a vehicle while under the influence of alcohol or drugs, including medicines? (Under the influence can be as little as consuming one alcoholic beverage)

5. Have you **EVER** been disqualified, deselected, or removed during a background interview/investigation with any police department, fire department or public safety agency? **OR** are you currently in backgrounds with any police department, fire department or public safety agency?

6. Have you **EVER** been terminated (fired), asked to resign or quit an employer to avoid being fired?

7. Have you **EVER** been involved in a domestic violence incident with your spouse, relative, domestic partner or significant other?

8. Have you **EVER** committed **ANY** theft including from an employer, shoplifted, or taken anything that did not belong to you? If yes, list the item(s), date(s), and victim's name(s).

9. Have you **EVER** had any bills sent to collections, filed for bankruptcy, had civil judgments against you, had property repossessed or suffered a foreclosure?

10. Have you **EVER** possessed, used, ingested, consumed, or experimented with ANY of the following?

SUBSTANCE:	YES	NO	DATE LAST USED	METHOD OF USE (smoked, injected, etc)
2CB (Nexus)				
Amphetamines (uppers, whites, bennies)				
Barbiturates (downers, reds)				
Bodybuilding supplement(s)				
Club Drugs				
Cocaine				
Crystal Meth				
GHB (liquid-X, "G," scoop, fantasy)				
Hashish, hash oil				
Heroin (smack, junk, black tar)				
Inhalants [nitrous oxide (N2O), laughing gas, glue, paint, aerosols, etc.] (NOS)				
Ketamine (K, special K, Vitamin K)				
LSD (acid, blotter acid)				
Magic Mushrooms (psilocybin, shrooms)				
MDA				
MDMA (ecstasy, XTC, X)				
Medication(s) NOT prescribed to you				
Methamphetamine (speed, ice, crank)				
Opium, Morphine				
Other Hallucinogen(s)				
Other Illegal Drugs (anything you think was a drug)				
PCP (angel dust, sherms)				
Peyote (mescaline, buttons)				
Rock Cocaine (crack)				
Rophynol (roofies)				
Steroids				
Spice, Salvia, Fentanyl				
Alpha PVP, Flakka (gravel), Krokodile				
Bath Salts				

CLEARLY EXPLAIN EACH SUBSTANCE USED:

“I certify that all the information provided in this questionnaire is correct and complete to the best of my knowledge. I understand that any omission or misstatement of fact WILL lead to my disqualification or dismissal from the process or if appointment has been made.”

Applicant signature: _____

Date: _____

Investigator signature: _____

Date: _____