

## **GOLDSBORO POLICE DEPARTMENT PRE-EMPLOYMENT PROCEDURES AND MINIMUM REQUIREMENTS FOR POLICE OFFICERS**

**To complete your application for employment with the Goldsboro Police Department, the following procedures must be followed:**

1. Complete a City of Goldsboro Application and Data Record.
2. Complete a North Carolina Criminal Justice Education and Training Standards Commission Form F-3 (Personal History Statement). This document must be notarized.
3. Attach to your application a copy of your birth certificate and high school diploma or GED.
4. Applicants must sign form PAF-2 (Authorization for Release of Personal Information).
5. Applicants must sign form PAF-1 (Pre-Employment Procedures and Minimum Requirements for Police Officers).
6. No applications will be accepted until a vacancy has been advertised.
7. Only those applicants that meet North Carolina Criminal Justice Education and Training Standards Commission requirements and local requirements will be considered.
8. Completed applications should be returned to the Personnel Department, City Hall, PO Drawer A, Goldsboro, NC 27533.

**Applicants for the position of Police Officer with the Goldsboro Police Department must meet the following minimum requirements.**

1. Be a United States citizen.
2. Be at least 20 years of age.
3. Must not have been convicted of any crime, felony or misdemeanor. This must be validated by SBI and FBI fingerprint record check.
4. Must complete Personal History Statement, City of Goldsboro application and Data Record.
5. Applicant must undergo physical examination, to include x-rays and eye exam, and be determined to be in good health.
6. Applicant must undergo a psychological evaluation, to include reading, writing, and math comprehension.
7. Applicant must meet any other minimum requirements established by the Goldsboro Police Department.

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Witness

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Signature of Applicant

**Goldsboro Police Department**  
**204 S. Center St.**  
**Goldsboro, NC 27530**  
**(919)580-4257**

**Authorization for Release of Personal Information**

I, \_\_\_\_\_, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the Goldsboro Police Department, whether the said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of (but not limited to): any and all criminal records (to include Juvenile charges), the records of educational institutions (both academic and disciplinary) ; financial or credit institutions, including records of loans, the records of commercial or retail credit agencies (including credit reports and ratings), and other financial statements and records where ever filed; medical and psychiatric treatment and/or consultation records, including hospital clinics, private practitioners, and the U.S. Veteran's Administration; employment and pre-employment records, including background reports, efficiency ratings, disciplinary actions, complaints or grievances filed by or against me, Internal Affairs investigations (including polygraph examination reports), and the records and recollections of attorneys at law, or other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had an interest.

I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security Number

Sworn to and subscribed before me this:

\_\_\_\_\_ Day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
(Notary Public's Signature)

Commission Expires: \_\_\_\_\_

# GOLDSBORO POLICE DEPARTMENT

## Check List of Required Documents

PAF-3

Applicant's Name: \_\_\_\_\_

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

<u>No.</u>	<u>Date</u>	<u>Verified By</u>	<u>Name of Document</u>
1.	_____	_____	City of Goldsboro Application
2.	_____	_____	Form PAF-1 (Pre-employment Procedures & Minimum Requirements)
3.	_____	_____	Form PAF-2 (Authorization for Release of Personal Information)
4.	_____	_____	Form PAF-3 (Check List of Required Documents)
5.	_____	_____	NC CJTSC Form-3 (Personal History Statement
7.	_____	_____	Proof of Educational Attainment
8.	_____	_____	Proof of Driver's License
10.	_____	_____	Basic Law Enforcement Training Certificate
11.	_____	_____	Proof of Date of Birth
12.	_____	_____	Proof of US Citizenship

