

<div> <b>EDUCATION AND TRAINING</b> <div>Proof of education will be required prior to engagement.</div> </div>									
<b>HIGH SCHOOL</b> <div>Select highest grade completed</div>		NAME OF SCHOOL				LOCATION		<input type="checkbox"/> HIGH SCHOOL DIPLOMA <input type="checkbox"/> EQUIVALENCY DIPLOMA	
10 11 12 13									
<b>COLLEGE, BUSINESS SCHOOL, OR TECHNICAL SCHOOL</b>		NAME OF SCHOOL				LOCATION			
PROGRAM OR COURSE						START DATE YYYY MM		FINISH DATE YYYY MM	
LENGTH OF COURSE	GRADE POINT AVERAGE	CERTIFICATE, DIPLOMA, OR LICENCE AWARDED? (IF NOT – PLEASE PROVIDE DETAILS) <input type="checkbox"/> YES <input type="checkbox"/> NO							
<b>COLLEGE, BUSINESS SCHOOL, OR TECHNICAL SCHOOL</b>		NAME OF SCHOOL				LOCATION			
PROGRAM OR COURSE						START DATE YYYY MM		FINISH DATE YYYY MM	
LENGTH OF COURSE	GRADE POINT AVERAGE	CERTIFICATE, DIPLOMA, OR LICENCE AWARDED? (IF NOT – PLEASE PROVIDE DETAILS) <input type="checkbox"/> YES <input type="checkbox"/> NO							
<b>UNIVERSITY</b>		NAME OF SCHOOL				LOCATION			
PROGRAM OR COURSE						START DATE YYYY MM		FINISH DATE YYYY MM	
MAJOR/MINOR									
LENGTH OF COURSE	GRADE POINT AVERAGE	CERTIFICATE, DIPLOMA, OR DEGREE AWARDED? (IF NOT – PLEASE PROVIDE DETAILS) <input type="checkbox"/> YES <input type="checkbox"/> NO							
<b>UNIVERSITY</b>		NAME OF SCHOOL				LOCATION			
PROGRAM OR COURSE						START DATE YYYY MM		FINISH DATE YYYY MM	
MAJOR/MINOR									
LENGTH OF COURSE	GRADE POINT AVERAGE	CERTIFICATE, DIPLOMA, OR DEGREE AWARDED? (IF NOT – PLEASE PROVIDE DETAILS) <input type="checkbox"/> YES <input type="checkbox"/> NO							
<b>UNIVERSITY</b>		NAME OF SCHOOL				LOCATION			
PROGRAM OR COURSE						START DATE YYYY MM		FINISH DATE YYYY MM	
MAJOR/MINOR									
LENGTH OF COURSE	GRADE POINT AVERAGE	CERTIFICATE, DIPLOMA, OR DEGREE AWARDED? (IF NOT – PLEASE PROVIDE DETAILS) <input type="checkbox"/> YES <input type="checkbox"/> NO							
<b>Education Assessment</b> (if applicable)		<b>(Educational Credential Assessment (ECA) from one of the designated organizations - Certificate - if applicable)</b>							
		NAME OF SCHOOL				LOCATION			
PROGRAM OR COURSE						START DATE YYYY MM		FINISH DATE YYYY MM	
MAJOR/MINOR									
LENGTH OF COURSE	GRADE POINT AVERAGE	CERTIFICATE, DIPLOMA, OR DEGREE AWARDED? (IF NOT – PLEASE PROVIDE DETAILS) <input type="checkbox"/> YES <input type="checkbox"/> NO							
LANGUAGES SPOKEN									
LANGUAGES WRITTEN									

ADDITIONAL EDUCATION INCLUDING COURSES, WORKSHOPS, AND SEMINARS. (ATTACH AN ADDITIONAL PAPER IF NECESSARY)

ADDITIONAL COMPUTER SKILLS, TRAINING, COURSES, ETC ... (ATTACH AN ADDITIONAL PAPER IF NECESSARY)

HAVE YOU EVER WRITTEN THE ACT (*ALBERTA COMMUNICATION TEST*), THE CAAT (*CANADIAN ADULT ACHIEVEMENT TEST*), OR THE WCT (*WRITTEN COMMUNICATION TEST*)? ☐ YES ☐ NO

(If YES – Where & When)

HAVE YOU EVER WRITTEN THE APCAT (*ALBERTA POLICE APPLICANT COGNITIVE ABILITY TEST*)? ☐ YES ☐ NO

(If YES – Where & When)

HAVE YOU EVER APPLIED FOR A POSITION WITH THIS OR ANY OTHER POLICE AGENCY? ☐ YES ☐ NO

(If YES – List Where & When Below. Include previous applications to the Calgary Police Service)

**LIST ALL APPLICATIONS TO THIS OR ANY OTHER POLICE AGENCIES**

POLICE AGENCY	APPLICATION DATE			STATUS (describe reason for non-selection)
	YYYY	MM	DD	

HAVE YOU EVER TAKEN A POLYGRAPH OR COMPUTER VOICE STRESS ANALYSIS EXAMINATION? ☐ YES ☐ NO

AGENCY WHERE POLYGRAPH OR COMPUTER VOICE STRESS ANALYSIS EXAMINATION WAS COMPLETED

YYYY

MM

DD

REASON FOR POLYGRAPH OR COMPUTER VOICE STRESS ANALYSIS EXAMINATION

HAVE YOU EVER BEEN FINGERPRINTED? ☐ YES ☐ NO

REASON FOR FINGERPRINTING

# EMPLOYMENT HISTORY

**Begin with your most recent employer and continue in reverse time order.  
Provide history for the last ten (10) years.  
Provide an explanation for all gaps in employment.**

**MOST RECENT**

EMPLOYER'S NAME

TELEPHONE NUMBER

[      ]

EMPLOYER'S ADDRESS

POSTAL CODE

NAME OF IMMEDIATE SUPERVISOR

SUPERVISOR TELEPHONE NUMBER

[      ]

START DATE  
YYYY    MM

FINISH DATE  
YYYY    MM

POSITION HELD

SUPERVISOR EMAIL

DUTIES/RESPONSIBILITIES

REASON FOR LEAVING

**2nd**

EMPLOYER'S NAME

TELEPHONE NUMBER

[      ]

EMPLOYER'S ADDRESS

POSTAL CODE

NAME OF IMMEDIATE SUPERVISOR

SUPERVISOR TELEPHONE NUMBER

[      ]

START DATE  
YYYY    MM

FINISH DATE  
YYYY    MM

POSITION HELD

SUPERVISOR EMAIL

DUTIES/RESPONSIBILITIES

REASON FOR LEAVING

**3rd**

EMPLOYER'S NAME

TELEPHONE NUMBER

[      ]

EMPLOYER'S ADDRESS

POSTAL CODE

NAME OF IMMEDIATE SUPERVISOR

SUPERVISOR TELEPHONE NUMBER

[      ]

START DATE  
YYYY    MM

FINISH DATE  
YYYY    MM

POSITION HELD

SUPERVISOR EMAIL

DUTIES/RESPONSIBILITIES

REASON FOR LEAVING

# EMPLOYMENT HISTORY

(Continued)

<b>4th</b>		EMPLOYER'S NAME		TELEPHONE NUMBER [     ]	
EMPLOYER'S ADDRESS				POSTAL CODE	
NAME OF IMMEDIATE SUPERVISOR				SUPERVISOR TELEPHONE NUMBER [     ]	
START DATE YYYY   MM		FINISH DATE YYYY   MM		POSITION HELD	
				SUPERVISOR EMAIL	
DUTIES/RESPONSIBILITIES					
REASON FOR LEAVING					
<b>5th</b>		EMPLOYER'S NAME		TELEPHONE NUMBER [     ]	
EMPLOYER'S ADDRESS				POSTAL CODE	
NAME OF IMMEDIATE SUPERVISOR				SUPERVISOR TELEPHONE NUMBER [     ]	
START DATE YYYY   MM		FINISH DATE YYYY   MM		POSITION HELD	
				SUPERVISOR EMAIL	
DUTIES/RESPONSIBILITIES					
REASON FOR LEAVING					
<b>6th</b>		EMPLOYER'S NAME		TELEPHONE NUMBER [     ]	
EMPLOYER'S ADDRESS				POSTAL CODE	
NAME OF IMMEDIATE SUPERVISOR				SUPERVISOR TELEPHONE NUMBER [     ]	
START DATE YYYY   MM		FINISH DATE YYYY   MM		POSITION HELD	
				SUPERVISOR EMAIL	
DUTIES/RESPONSIBILITIES					
REASON FOR LEAVING					

(Continued) - attach additional paper in same format if needed

**EMPLOYMENT  
HISTORY**

<b>7th</b>		EMPLOYER'S NAME				TELEPHONE NUMBER [      ]	
EMPLOYER'S ADDRESS						POSTAL CODE	
NAME OF IMMEDIATE SUPERVISOR						SUPERVISOR TELEPHONE NUMBER [      ]	
START DATE YYYY    MM		FINISH DATE YYYY    MM		POSITION HELD		SUPERVISOR EMAIL	
DUTIES/RESPONSIBILITIES							
REASON FOR LEAVING							
<b>8th</b>		EMPLOYER'S NAME				TELEPHONE NUMBER [      ]	
EMPLOYER'S ADDRESS						POSTAL CODE	
NAME OF IMMEDIATE SUPERVISOR						SUPERVISOR TELEPHONE NUMBER [      ]	
START DATE YYYY    MM		FINISH DATE YYYY    MM		POSITION HELD		SUPERVISOR EMAIL	
DUTIES/RESPONSIBILITIES							
REASON FOR LEAVING							
IF YOU WERE ASKED TO RESIGN, OR WERE FIRED FROM A JOB, OR IF YOU HAVE HAD ANY PERIODS OF UNEMPLOYMENT; PLEASE PROVIDE DETAILS AND EXPLANATIONS HERE:							