



RCIPS

We Care, We Listen and We Act

ROYAL CAYMAN ISLANDS POLICE SERVICE

IMPORTANT NOTICE

PLEASE DO NOT REMOVE THIS COVER PAGE FROM THE APPLICATION.

This application form must be completed by the applicant in the person's own handwriting with ink, must be in block letters, and signed by him/her self.

To qualify, all applicants must:

- Be at least 18 years old.
- Be physically fit.
- Not have any criminal convictions in this jurisdiction or elsewhere.
- Truthfully declare all the information required in the application form.

Please note - the completed application must include the following:

- Two passport sized photographs; photocopies will NOT be accepted.
- True legible copies of academic qualifications, clearly stating your grades or passes. Do not attach originals, as they may not be returned.
- Must be signed before a Notary Public or Justice of the Peace (JP).

Please notify us immediately if you do not wish to pursue this application further.

Authorisation/Waiver

I hereby authorise The Royal Cayman Islands Police Service or their bona fide representative to contact any present or past employers, schools, financial institutions, the armed forces, medical institutions and others to obtain the information required in order that I may be considered for employment with the organisation.

I also permit the release of any such information that may be required by the Royal Cayman Islands Police Service and waive any and all rights to legal proceedings against them or any bona fide representative.

Print name

Signature

Date



RCIPS

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ROYAL CAYMAN ISLANDS POLICE SERVICE

Human Resources Dept
P. O. Box 909 GT
Grand Cayman KY1-1103
Cayman Islands
Email: rcipshr@gov.ky
Fax: (345) 946-2418

For Official Use

Date received:

Enlistment Application

The Royal Cayman Islands Police Service is an equal opportunity employer and will not discriminate against any person because of race, color, religion, ethnicity, gender, age, national origin, disability, veteran or marital status or other legally protected status.

Please affix two most recent, full faced passport size photographs here.

I. Personal Details

The information given on this form will be treated in strictest confidence.

BLOCK LETTERS PLEASE

Position Applied For: _____ Date: _____
DD/MM/YY

Surname _____ Maiden Name, if married _____
Mr/Mrs/Miss/Ms

First Name _____ Middle Name(s) _____

Have you ever used or been known by any other names i.e. nickname(s), aliases, etc.? _____ Yes/No

If Yes, please state all other names known by: _____

Mailing Address: _____ Zip/Postal Code: _____
If local, P.O. Box Number

Apartment Name/House Number/Street District/Country or City/State/Country

Business Address: _____

Telephone Numbers: Home - Business - Cell -

Age: Date of Birth: Place of Birth:

DD/MM/YY

Height: Weight:

Are you a citizen of the Cayman Islands? Yes/No If No, state Nationality:

Do you have Cayman Status? Yes/No If Yes, date granted: _____

DD/MM/YY

Do you have Cayman Residency? Yes/No If Yes, date granted: _____

DD/MM/YY

If you have Caymanian connections, please explain:

If currently residing in the Cayman Islands, please state how long you have **continuously** resided here: Years - / Months - / Weeks - / Days -

Please state Cayman address, if applicable:

What type of passport(s) do you possess?

Passport No. Place of issue: Date of issue:

(Please attach a photocopy of the picture page)

DD/MM/YY

Passport No. Place of issue: Date of issue:

(Please attach a photocopy of the picture page)

DD/MM/YY

Please state the countries you have traveled to in the past twelve months and purpose:

Please circle status: Married / Single / Separated / Co-habiting / Divorced / Widowed

If married/co-habiting, please give name and nationality of spouse/partner:

Number of Children: Age(s): Other Dependants:

Please give name and address of your parents:

How did you learn about us? (Please circle one of the below) _____

Advertisement / Friend / Walk-In / Employment Agency / Relative / Police Officer / Other

Have you previously filed any Application(s) with the Royal Cayman Islands Police Service? Yes/No

If Yes, give date(s): _____

Have you previously been employed with the Royal Cayman Islands Police Service? Yes/No _____

If Yes, state position you served in and date: _____

Are you currently on "laid-off" status and subject to recall by your employer? Yes/No _____

Would you be willing and able to travel if required to? Yes/No If No, give explanation as to why not: _____

Is there any problem with your Immigration status (Visa, Work Permit, etc.) that would prevent you from lawfully becoming employed in this country? (Please note that proof of Citizenship or Immigration Status will be required upon employment) Yes/No If Yes, give details: _____

Please circle your availability to work: Full-time / Part-time / Shifts / Holidays / Weekends _____

May we contact your present employer? Yes/No If No, give reason: _____

On what date would you be available to start work? _____

Have you ever been convicted of a crime in a Court of Law? Yes/No If Yes, please complete the Criminal History section below. _____

II. Criminal History

Please answer the following questions completely and accurately. Although a conviction will not necessarily disqualify an Applicant from employment, any falsification or misstatement of facts or failure to disclose details of such convictions may be considered as a deliberate attempt to conceal information and will be sufficient to disqualify you.

Have you ever been arrested or prosecuted for any offence -Traffic/Criminal/Immigration? _____

Yes/No If Yes, give details: _____

Have you any court convictions? Yes/No

Please give details of convictions for any offences, including traffic convictions and/or any court appearances. State if any formal cautions by the Police for offences, including warning letters. You must include spent convictions under the Rehabilitation of Offenders Law (Revised 1998). If you have been convicted or cautioned for any offence you may still be eligible for consideration, depending on the nature and circumstances of the offence.

If Yes, provide details required below:

Date: _____ Nature of Charge: _____

Agency: _____ Sentence: _____

Date: _____ Nature of Charge: _____

Agency: _____ Sentence: _____

Date: _____ Nature of Charge: _____

Agency: _____ Sentence: _____

III. Civil Court

Are you now, or have you ever been, involved in a lawsuit? Yes/No If Yes, please advise

what type of lawsuit and the results: _____

IV. Military History

Are you currently in, or have you ever served in, a Military Service or paramilitary organisation?

Yes/No If Yes, name Country, Branch of Service and period(s) of active duty: _____

Please circle below the type of Discharge you received for each period served: _____

Honourable / Dishonourable / Medical / Honourable Conditions / Other

If Other, state type: _____

Have you ever been court-martialed? Yes/No If Yes, give details and outcome: _____

V. Education/Qualifications (Academic/Professional)

Please provide information requested below. **Attach copies of certificates gained regarding all secondary school, college, university courses, etc. completed.**

Primary School

Name/Address of School Dates Attended (MM/YY)

Years Completed Diploma/Degree/Passes

Primary School

Name/Address of School Dates Attended (MM/YY)

Years Completed Diploma/Degree/Passes

Middle School

Name/Address of School Dates Attended (MM/YY)

Years Completed Diploma/Degree/Passes

Middle School

Name/Address of School Dates Attended (MM/YY)

Years Completed Diploma/Degree/Passes

High School

Name/Address of School

Dates Attended (MM/YY)

Years Completed Diploma/Degree/Passes

High School

Name/Address of School

Dates Attended (MM/YY)

Years Completed Diploma/Degree/Passes

University/ College

Name/Address of School

Dates Attended (MM/YY)

Years Completed Diploma/Degree/Passes

University/ College

Name/Address of School

Dates Attended (MM/YY)

Years Completed Diploma/Degree/Passes

State degree of fluency in any foreign languages:

Describe any specialized education, technical, professional or occupational training, apprenticeship, and/or skills:

Describe any job-related training received in the Military or Paramilitary. (Include any job-related Military service assignment and volunteer activities.)

List any professional, business, trade, or civic activities and offices held.

Other Qualifications – List special job-related skills and qualifications acquired from employment or other experience:

Circle all of the skills acquired and/or equipment operated that apply to you:

PC	Photocopier	Microsoft Word	List any other:
Calculator	Printer	Excel	_____
Typewriter	Scanner	PowerPoint	_____
Fax Machine	Lotus 1-2-3	Internet Explorer	_____

VI. Employment Record

Are you presently, or have you ever been, employed by any other Law Enforcement Agency? _____

Yes/No If Yes, what is the name of the Agency, the capacity you were in, and how long were you employed there? _____

Have you ever been fired, or been asked to resign from any job? Yes/No If Yes, give explanation: _____

Are you currently employed? Yes/No If Yes, how much notice do you have to give your _____

current employer? _____ If No, how long have you been unemployed? _____

Are you related to anyone employed by the Royal Cayman Islands Police Service? Yes/No _____

If Yes, to whom, and what is the relationship? _____

Have you always been treated fairly by your employers? Yes/No If No, explain: _____

Have you ever been subject to disciplinary action? Yes/No If Yes, please give details: _____

Have you had any experience with shift work? Yes/No _____

List below all of the jobs you have held in the last ten (10) years, with your present or most recent job listed first. If applicable, include any Military Service or temporary/part-time employment in the proper time sequence. If you require more space, please attach additional sheets.

Present/Most Recent Employment

Name and Address of Employer: _____

Position Held: _____

From: _____

(MM/YY)

To: _____

(MM/YY)

Name and Title of Supervisor: _____

Final Salary/Benefits: _____

Please outline your main responsibilities and any key achievements: _____

Reason for leaving: _____

May we contact your present employer? Yes/No _____

Previous Employment

Name and Address of Employer: _____

Position Held: _____ From: _____ To: _____
(MM/YY) (MM/YY)

Name and Title of Supervisor: _____

Final Salary/Benefits: _____

Please outline your main responsibilities and any key achievements: _____

Reason for leaving: _____

May we contact your past employer? Yes/No _____

Name and Address of Employer: _____

Position Held: _____ From: _____ To: _____
(MM/YY) (MM/YY)

Name and Title of Supervisor: _____

Final Salary/Benefits: _____

Please outline your main responsibilities and any key achievements:

Reason for leaving: _____

May we contact your past employer? Yes/No _____

Name and Address of Employer: _____

Position Held: _____ From: _____ To: _____
(MM/YY) (MM/YY)

Name and Title of Supervisor: _____

Final Salary/Benefits: _____

Please outline your main responsibilities and any key achievements:

Reason for leaving: _____

May we contact your past employer? Yes/No _____

Name and Address of Employer: _____

Position Held: _____ From: _____ To: _____
(MM/YY) (MM/YY)

Name and Title of Supervisor: _____

Final Salary/Benefits: _____

Please outline your main responsibilities and any key achievements:

Reason for leaving: _____

May we contact your past employer? Yes/No _____

Name and Address of Employer: _____

Position Held: _____ From: _____ To: _____
(MM/YY) (MM/YY)

Name and Title of Supervisor: _____

Final Salary/Benefits: _____

Please outline your main responsibilities and any key achievements:

Reason for leaving: _____

May we contact your past employer? Yes/No _____

Name and Address of Employer: _____

Position Held: _____ From: _____ To: _____
(MM/YY) (MM/YY)

Name and Title of Supervisor: _____

Final Salary/Benefits: _____

Please outline your main responsibilities and any key achievements: _____

Reason for leaving: _____

May we contact your past employer? Yes/No _____

VII. Residences

List every place you have resided in the past ten (10) years, beginning with your current address.

From: _____ To: _____ Street Address: _____
(MM/YY) (MM/YY)

_____ P.O. Box Number: _____ Country: _____

Landlord's Name/Address: _____

From: _____ To: _____ Street Address: _____
(MM/YY) (MM/YY)

_____ P.O. Box Number: _____ Country: _____

Landlord's Name/Address: _____

From: _____ To: _____ Street Address: _____
(MM/YY) (MM/YY)

_____ P.O. Box Number: _____ Country: _____

Landlord's Name/Address: _____

From: _____ To: _____ Street Address: _____
(MM/YY) (MM/YY)

_____ P.O. Box Number: _____ Country: _____

Landlord's Name/Address: _____

From: _____ To: _____ Street Address: _____
(MM/YY) (MM/YY)

_____ P.O. Box Number: _____ Country: _____

Landlord's Name/Address: _____

From: _____ To: _____ Street Address: _____
(MM/YY) (MM/YY)

_____ P.O. Box Number: _____ Country: _____

Landlord's Name/Address: _____

From: _____ To: _____ Street Address: _____
(MM/YY) (MM/YY)

_____ P.O. Box Number: _____ Country: _____

Landlord's Name/Address: _____

VIII. Driving History

Can you operate a motor vehicle? Yes/No _____ Do you hold a current Cayman Islands Driver's

Licence? Yes/No _____ If Yes, give date of issue and Licence number: _____

Any endorsements? Yes/No _____ If Yes, when? _____

Have you ever held a Driving Licence issued by any other Country? Yes/No If Yes, give

Country and Licence number:

Has your Licence ever been revoked or suspended? Yes/No If Yes, give reason(s):

Do you have vehicle liability insurance? Yes/No Is your Vehicle Registration current? Yes/No

Have you received a citation for moving violation(s) in the past seven (7) years? Yes/No

If Yes, please give details:

How many traffic accidents have you had in the past seven (7) years? Number: If any, give dates:

Have you ever been charged as a result of a traffic accident? Yes/No If Yes, give details:

IX. References

Give the names of six (6) persons, who are not relatives and not Police Officers, who have known you well, for a period of more than five (5) years.

Name	Address
------	---------

P.O. Box No.	Country	Postal Code/Zip Code
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Business Address

Business Phone	Other Contact Number, i.e., Residential/Cell Phone
----------------	--

Name	Address		
	P.O. Box No.	Country	Postal Code/Zip Code

Business Address

Business Phone	Other Contact Number, i.e., Residential/Cell Phone		
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Name	Address		
	P.O. Box No.	Country	Postal Code/Zip Code

Business Address

Business Phone	Other Contact Number, i.e., Residential/Cell Phone		
----------------	--	--	--

Name	Address		
	P.O. Box No.	Country	Postal Code/Zip Code

Business Address

Business Phone	Other Contact Number, i.e., Residential/Cell Phone		
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Name	Address		
	P.O. Box No.	Country	Postal Code/Zip Code

Business Address

Business Phone

Other Contact Number, i.e., Residential/Cell Phone

Name

Address

P.O. Box No.

Country

Postal Code/Zip Code

Business Address

Business Phone

Other Contact Number, i.e., Residential/Cell Phone

X. Miscellaneous Information

What are your main hobbies and interests?

Are you a current member of the Special Constabulary? Yes/No If Yes, give date you
joined that organisation:

Have you ever had life, health, vehicle or property insurance refused or cancelled? Yes/No
If Yes, state reason(s):

Are you a member of, or have any connection with, any political organisation or movement or
trade union within or outside the Cayman Islands? Yes/No If Yes, give details:

Do you, or does any member of your immediate family or your husband's/wife's family, own or have any interest, direct or indirect, in any Night Club, Dance Hall, Liquor Store, Bar, or Beer and Wine sales outlet? Yes/No If Yes, indicate type of establishment, name of place of business, and name of person(s) or firm under which it is operated:

Have you ever used any drug(s) not prescribed for you? Yes/No If Yes, name the drug(s):

Have you used any drug(s) in the last six (6) months? Yes/No If Yes, name the drug(s):

Please give a brief statement as to why you wish to join the Royal Cayman Islands Police Service.

APPLICANT'S CERTIFICATION AND AGREEMENT

I understand that any false statements made by me on this Application or any supplement thereto, or any false statement made to any representative of the Royal Cayman Islands Police Service during the Interview process, will be sufficient grounds for immediate discharge, no matter when discovered.

I understand and agree that the Royal Cayman Islands Police Service will make a thorough investigation of my character, reputation and past employment. I authorise the giving and receiving of any such information requested by the Royal Cayman Islands Police Service, and

hereby release all former employers and their agents of any liability for any information they may give to the Royal Cayman Islands Police Service. I hereby waive any rights or claims I may have, whether presently fully developed or not, against the Royal Cayman Islands Police Service or its agents or employees, arising out of, or resulting from the release, authorised or unauthorised, of the information received pursuant to or in connection with the Royal Cayman Islands Police Service's handling, processing, or investigation of my Application with them.

I agree to a physical examination if requested, testing for the use of illegal drugs, controlled substances or alcohol, prior to hiring, and at any time during my employment, based upon reasonable suspicion and the Cayman Islands Government regulations.

I hereby acknowledge that the first twenty-four (24) months of my employment with the Royal Cayman Islands Police Service constitutes a probationary period.

Applicant's signature

Date

The RCIPS reserves the right not to consider any Application which has not been fully completed by the Applicant, or signed in the presence of a Notary Public or JP.

NOTE: Please sign this Application in front of a Notary Public or Justice of the Peace (JP).

Sworn before me this _____ day of _____ 20__.

Notary Public

Justice of the Peace