

City of Bronson

141 S. Matteson Street, Bronson, MI 49028 | Phone: 517-369-7334 | Fax: 517-369-1457

Supplemental Employment Application for Police Officers

Your name: Last _____ First _____ MI _____

Are you 21 years of age or older? YES NO

Are you a citizen of the United States? YES NO

Are you currently certified by the Michigan Commission on Law Enforcement Standards (MCOLES)?

YES NO

If yes, what is your MCOLES number? _____

Are you currently enrolled in a police academy? YES NO

If yes, which academy? _____

When will you graduate? _____

Do you possess a valid Michigan Driver's License? YES NO

Have you ever been convicted of a crime of domestic violence? YES NO

Do you currently have any Personal Protection Orders on file against you? YES NO

If yes, please explain:
