

MARTA Police Department

Section D

MARTA Reserve Police Officer



Employment Application Guidelines for Police Officers

We appreciate your interest in working for the MARTA Police Department. Please read this page carefully so that your application will include all of the information necessary for consideration.

The application package you have received includes a background questionnaire. When completing this package, **ACCURACY AND COMPLETENESS IS OF UTMOST IMPORTANCE!** Be sure to answer all questions truthfully and completely. Provide all information requested (i.e. names, addresses, zip codes, telephone numbers, etc.) Applications which are not complete cannot be processed.

The package also includes several waivers and release forms that are necessary to process your application and which require your signature. **Three (3) of these forms must be notarized which means they need to be signed in the presence of a notary public.**

In addition, the following items must be returned with the application package.

1. Copy of your high school diploma, GED, or official high school transcript.
2. Copy of your driver's license.
3. Copy of your social security card.
4. An ORIGINAL (not a copy) of your Motor Vehicle Record for the past seven (7) years.
5. Copy of your birth certificate.
6. Copy of your DD214 long form (if applicable).
7. Official college transcript from institution

IF YOU FAIL TO SUBMIT THE ABOVE ITEMS WITH YOUR APPLICATION, YOUR APPLICATION CANNOT BE PROCESSED AND WILL NOT BE CONSIDERED.

Upon completion of your application, you may deliver it in person or mail it to the MARTA Police Department, Background Investigations, 2424 Piedmont Road, NE Atlanta, Georgia 30324-3330. (Police Headquarters is located across from the Lindbergh MARTA station on the North/South line). The background investigation and selection process is a lengthy process and may take, in some cases, up to six (6) months. Applications received by the MARTA Police Department will remain active during the selections process.

If you are selected for an interview, you will be notified by the MARTA Police Department.

If you are not selected for this position, you may re-apply after a period of one (1) year.

Applicant Information Page

STOP → LOOK → AND → READ → IMPORTANT

Things to Know

- All required documentation must accompany your application.
- All questions will be answered truthfully and with complete explanation where applicable.
- If you have questions concerning any part of the process, direct them to the Recruitment office or Background investigator only.
- Appropriate business attire is required for all interviews and testing. No jeans, tennis shoes, sandals, or T-Shirts will be tolerated.
- Applicants should appear for all scheduled interviews and testing on time. If you cannot make an appointment, it is your responsibility to contact the MARTA Police Recruitment office.
- The hiring process can take six months to complete. It is important to keep in touch with your Background Investigator throughout the process informing him or her of any changes to your application.

PHASES OF THE HIRING PROCESS

- Background investigation will consist of checks into his or her employment history, criminal history, driving history, financial history, military history, references, and the polygraph, and fingerprint results. If an applicant is not disqualified after this phase, the file will be submitted through the chain of command up to the Chief of Police.
- The Chief of Police has the final decision on all hiring for the MARTA Police Department. When the applicant receives a conditional offer of employment then the applicant will be administered a pre-employment medical, psychological, and physical agility exam.
- When the applicant passes all of the examinations, the Chief of Police will review the file for final approval.
- When the applicant receives a final approval, the applicant will be notified by Human Resources (Personnel Unit), to come in to sign an offer letter of employment.

All applicants for employment with the MARTA Police Department are subject to a thorough background investigation to verify the accuracy of statements provided within the application, and to confirm your qualification for employment.

The following factors are some of those that would be cause for disqualification:

- Any conviction of an offense punishable by one or more years imprisonment (felony). This includes cases falling under the First Offender Act and expunged/sealed cases
- Any federal, state, or local circumstance that would prohibit you from legally possessing a firearm
- Pending traffic or criminal charges
- Deliberate omissions or falsehoods
- Any repeated convictions of an offense indicating disrespect for the law, a lack of good moral character or disposition towards violence and disorder
- Discharge from employment, where such discharge indicates poor behavior and/or an inability adjusting to discipline
- Any discharge documentation suggesting that service ended under less than honorable conditions
- A conviction for Larceny or Theft over \$500
- A conviction for any domestic violence offense
- Failure to pass all medical, physical, psychological examinations
- Use of illegal drugs in violation of MARTA Police Pre-employment Drug policy
- A conviction for DUI, Alcohol/Drugs within 3 years of the date of the application
- Refusal to submit to Blood Alcohol Content test will be treated as a conviction
- Five (5) or more moving violation convictions within 3 years prior to the date of application
- Three (3) or more convictions for speeding in excess of 30 MPH over the speed limit within the entire driving record
- Three (3) or more chargeable traffic accidents within 5 years prior to the date of application
- A driver's license that is currently suspended, revoked, or expired
- A conviction for vehicular homicide, or hit and run (leaving the scene of an accident)
- Current probation or parole status

Disqualifying Conditions for the MARTA Police

Pre- Qualification

Important- A complete and truthful response to every question herein is required. Any omission misrepresentation or falsification will result in the disqualification of your application. If you are hired and it is later discovered that you falsified your application, you will be terminated from employment. If you have any questions or are unsure about these instructions or a particular item, please contact the Background and Recruitment office at (404) 848- 4268. Remember to be absolutely sure of your answer to all questions, before submitting your application.

Pre-Qualification Questions	Yes	No	Explain
Have you ever been convicted of any offense punishable by one or more years of imprisonment?			
Any federal, state, or local circumstance that would prohibit you from legally possessing a firearm?			
Do you have any pending criminal charges?			
Three (3) discharges or two (2) terminations from employment. Where such discharge indicates poor behavior and /or an inability adjusting to discipline?			
Any military discharge documentation suggesting that service ended under less than Honorable Conditions? A Dishonorable discharge from the Armed Forces will not be accepted.			
Do you have a conviction for Larceny or Theft over \$500.00?			
Do you have a conviction for any domestic violence offense?			
Do you have a conviction for DUI within 3 years of the date of application?			
Have you ever refused to submit to Blood Alcohol Content test?			
Have you had five (5) or more moving violation convictions within (3) years of the date of application?			

Pre-Qualification Questions	Yes	No	Explain
Do you have three (3) or more convictions for speeding in excess of 30 mph over the speed limit within your entire driving record?			
Have you had three (3) or more chargeable traffic accidents within five (5) years prior to the date of the application?			
Do you have a driver's license that is currently suspended, revoked, or expired?			
Do you have a conviction for vehicular homicide, or hit and run (leaving the scene or an accident)?			
Are you currently on probation or parole?			
Have you ever been convicted of obstruction, attempting to elude (traffic or criminal) or assaulting a law enforcement official?			
Do you have any tattoos above the collar, on your neck, or on more than 1/3 of your arms visible when wearing short sleeves?			

MARTA's Health & Wellness Program

MARTA is very interested and values the Health and Wellness of all of our employees. We have initiated several programs to assist in this area. We call our overall program "Taking Control of Your Health". We believe that Knowledge is Power and we offer Simple Strategies for Taking Control of Your Health to our employees on a continuous basis in various different ways. Information is shared with our employees by experts such as physical therapists, nurse educators, public health professionals, exercise physiologists, registered and licensed dieticians and certified diabetes educators.

A central feature of our Health & Wellness Program is information provided by way of our Mobile Health Education Information Centers which provide important health messages for all MARTA employees in a convenient and concise way. Each month, the Mobile Health Education Information Centers, located in 17 facilities throughout MARTA's city wide campus feature a focus health topic of the month along with other information such as tips on healthy eating, simple ways to increase physical activity, along with family focused information and much more.

The Wellness Program includes a walking club, we are calling: "Going The Extra Mile". Studies show that persons who walk at least 30 minutes each day can significantly improve their health status by reducing the risk of diabetes, obesity and heart disease. To learn more about the walking club or submit suggestions, please visit one of the mobile health information centers.

We offer a health information section in our Transit Times News and we also have Health Fairs and our "Race to Fitness Program" which allows weight loss teams to compete throughout the Authority for gifts and prizes for the most weight and body fat lost. We continue to look for ways to improve the health of MARTA employees.

The company also saw the need for onsite exercise facilities and there are four locations throughout the authority:

- Headquarters (fully equipped with lockers)
- South Yard
- Wachovia Annex
- Avondale Yard

Facilities are free of charge and for employee use only!



An equal opportunity employer
With a commitment to diversity in the workforce

Metropolitan Atlanta Rapid Transit Authority
A Standard of Excellence

Application for Employment
(Please print all information.)

For Personnel use only	042534
Application #	_____
Received by	_____

Position(s) Applied for _____

Date of Application _____

LAST NAME		FIRST NAME		MIDDLE NAME		MAIDEN NAME	
ADDRESS		NUMBER		STREET		CITY	
						STATE	
						ZIP CODE	
HOME TELEPHONE () -		BUSINESS OR MOBILE () -		SOCIAL SECURITY NUMBER / /			
DO YOU NOW HOLD A PUBLIC OFFICE? <input type="checkbox"/> YES <input type="checkbox"/> NO		HAVE YOU EVER BEEN EMPLOYED BY MARTA? <input type="checkbox"/> YES <input type="checkbox"/> NO DATES FROM _____ TO _____ POSITION TITLE _____ WHAT WAS YOUR NAME THEN? _____					
PLEASE LIST ANY RELATIVES CURRENTLY WORKING FOR MARTA BELOW:							
NAME OF RELATIVE _____		POSITION HELD _____		RELATIONSHIP _____			
NAME OF RELATIVE _____		POSITION HELD _____		RELATIONSHIP _____			
DO YOU HAVE A VALID DRIVER'S LICENSE? <input type="checkbox"/> YES <input type="checkbox"/> NO	CLASS	DRIVER'S LICENSE NUMBER	STATE OF ISSUE	EXPIRATION DATE			
HAS YOUR LICENSE EVER BEEN SUSPENDED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, WHEN? _____ EXPLAIN CIRCUMSTANCES: _____							
PREVIOUS ADDRESSES (INCLUDE PREVIOUS TEMPORARY AND PERMANENT ADDRESSES COVERING THE LAST 2 YEARS. USE ADDITIONAL PAPER, IF NECESSARY.)							
STREET ADDRESS		CITY	STATE	COUNTY	FROM	DATES TO	
1.							
2.							
3.							
HOW DID YOU LEARN ABOUT US? <input type="checkbox"/> ADVERTISEMENT <input type="checkbox"/> FRIEND <input type="checkbox"/> WALK-IN <input type="checkbox"/> EMPLOYEE. GIVE EMPLOYEE'S NAME: _____ <input type="checkbox"/> EMPLOYMENT AGENCY <input type="checkbox"/> RELATIVE <input type="checkbox"/> COLLEGE/UNIVERSITY NAME _____ <input type="checkbox"/> OTHER (SPECIFY) _____							
HAVE YOU BEEN CONVICTED OF A CRIME IN THE PAST FIVE YEARS, EXCLUDING MISDEMEANORS AND SUMMARY OFFENSES, WHICH HAVE NOT BEEN ANNULLED, EXPUNGED, OR SEALED BY A COURT? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DESCRIBE IN FULL: _____ _____							

FIRST, LAST MI

SOCIAL SECURITY NUMBER

EMPLOYMENT EXPERIENCE

Begin with your current or most recent employment. Give accurate information on all full and part time employment including any periods of unemployment or military service longer than one month. Provide both the month and the year of employment dates. Resumes and additional paper may be included.

The Commercial Motor Vehicle Safety Act of 1986 requires that all prospective applicants for the position of Bus Operator must detail previous employment as a commercial driver As far back as ten years, if applicable.

COMPANY NAME & ADDRESS 1. _____ _____		DATES EMPLOYED		WORK PERFORMED _____ _____ _____
		FROM	TO	
TELEPHONE NUMBER(S) () -		HOURLY RATE/SALARY		_____ _____ _____
		STARTING	ENDING	
JOB TITLE	SUPERVISOR			_____ _____
REASON FOR LEAVING				

COMPANY NAME & ADDRESS 1. _____ _____		DATES EMPLOYED		WORK PERFORMED _____ _____ _____
		FROM	TO	
TELEPHONE NUMBER(S) () -		HOURLY RATE/SALARY		_____ _____ _____
		STARTING	ENDING	
JOB TITLE	SUPERVISOR			_____ _____
REASON FOR LEAVING				

COMPANY NAME & ADDRESS 1. _____ _____		DATES EMPLOYED		WORK PERFORMED _____ _____ _____
		FROM	TO	
TELEPHONE NUMBER(S) () -		HOURLY RATE/SALARY		_____ _____ _____
		STARTING	ENDING	
JOB TITLE	SUPERVISOR			_____ _____
REASON FOR LEAVING				

COMPANY NAME & ADDRESS 1. _____ _____		DATES EMPLOYED		WORK PERFORMED _____ _____ _____
		FROM	TO	
TELEPHONE NUMBER(S) () -		HOURLY RATE/SALARY		_____ _____ _____
		STARTING	ENDING	
JOB TITLE	SUPERVISOR			_____ _____
REASON FOR LEAVING				

ADDITIONAL EMPLOYMENT EXPERIENCE

COMPANY NAME & ADDRESS 5. _____ _____		DATES EMPLOYED		WORK PERFORMED _____ _____ _____ _____
		FROM	TO	
TELEPHONE NUMBER(S) () -		HOURLY RATE/SALARY		
		STARTING	ENDING	
JOB TITLE	SUPERVISOR			
REASON FOR LEAVING				

COMPANY NAME & ADDRESS 6. _____ _____		DATES EMPLOYED		WORK PERFORMED _____ _____ _____ _____
		FROM	TO	
TELEPHONE NUMBER(S) () -		HOURLY RATE/SALARY		
		STARTING	ENDING	
JOB TITLE	SUPERVISOR			
REASON FOR LEAVING				

COMPANY NAME & ADDRESS 7. _____ _____		DATES EMPLOYED		WORK PERFORMED _____ _____ _____ _____
		FROM	TO	
TELEPHONE NUMBER(S) () -		HOURLY RATE/SALARY		
		STARTING	ENDING	
JOB TITLE	SUPERVISOR			
REASON FOR LEAVING				

COMPANY NAME & ADDRESS 8. _____ _____		DATES EMPLOYED		WORK PERFORMED _____ _____ _____ _____
		FROM	TO	
TELEPHONE NUMBER(S) () -		HOURLY RATE/SALARY		
		STARTING	ENDING	
JOB TITLE	SUPERVISOR			
REASON FOR LEAVING				

EDUCATION

HIGH SCHOOL

UNDERGRADUATE
COLLEGE/UNIVERSITY

GRADUATE/
PROFESSIONAL

TECHNICAL/
BUSINESS SCHOOL

SCHOOL NAME & LOCATION																
CIRCLE YEARS COMPLETED	9	10	11	12	1	2	3	4	1	2	3	4	1	2	3	4
DIPLOMA/DEGREE AWARDED					YEAR RECEIVED				YEAR RECEIVED							
DESCRIBE COURSE OF STUDY																
Describe any specialized training, Apprenticeship, skills And extracurricular activities.																

DO YOU HAVE A GED? YES NO DATE RECEIVED ____/____/____ ISSUING INSTITUTION _____

ADDRESS _____

SKILLS

PROFESSIONAL LICENSE OR CERTIFICATE, IF REQUIRED FOR THIS POSITION	LICENSE #	DATE ISSUED	ISSUING STATE	EXPIRATION DATE

List any foreign languages in which you can read and write: _____

List any foreign languages in which you are fluent: _____

Secretarial skills, if required. Typing speed WPM _____ Dictation speed WPM _____

Other skills, including software knowledge: _____

Have you ever had any job-related training in the United States military? _____ Yes _____ No

If yes, please describe: _____

State any additional information you feel may be helpful to us in considering you for employment. _____

Please read the following statements carefully. They are conditions for employment with the Metropolitan Atlanta Rapid Transit Authority (MARTA).

1. The answers given by me to the foregoing questions and the statements made by me are true to the best of my knowledge and belief. I UNDERSTAND THAT ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS OF FACTS CALLED FOR IN THIS QUESTIONNAIRE OR ANY SUPPLEMENTS THERETO, IS CAUSE FOR REJECTION OF MY APPLICATION OR DISCHARGE AT ANY TIME DURING MY EMPLOYMENT.
2. The persons, schools, previous employers, and other organizations named in this application are authorized by me to verify the information I have provided and to provide MARTA with any relevant information that may be required to arrive at an employment decision.
3. A satisfactory medical examination, drug and alcohol tests, and signed medical release statement(s) are required for all new employees in security and safety sensitive positions. Results will be held in confidence by MARTA except where release of such information is required by law.
4. Although management makes every effort to accommodate individual preferences, business needs may at times make the following conditions mandatory: overtime, shift work, a rotating work schedule, or a work schedule that includes Saturday and Sunday. I understand and accept these as conditions of employment.
5. I understand that employment at MARTA is terminable at the will of either the employee or the Authority.
6. I understand that this application is valid for a (6) month period only.
7. I understand that MARTA may procure or prepare an investigative report to verify all information I have provided on the questionnaire. For certain positions, this investigation may include a check of my criminal conviction record. By signing this questionnaire, I authorize MARTA to make such an investigation and release from all liability or responsibility all persons, schools, companies, corporations, state agencies or any other entity supplying or collecting such information. Any copy of this authorization shall have the same authority as the original.

Signature _____ Date _____

Applicant Information Form

Full Name (Last, First, Middle): _____

Position Applied For: _____ Date _____

Lead Source

To help us track our advertising better, check the lead source below that led you to apply for this position:

- | | | |
|---|--|--|
| <input type="checkbox"/> Walk-In | <input type="checkbox"/> Website | <input type="checkbox"/> Cultural, Civic, Religious Organization |
| <input type="checkbox"/> Employee: _____
(Employee's Name) | <input type="checkbox"/> Advertisement: _____
(Publication) | |
| <input type="checkbox"/> College/University: _____
(Specify) | <input type="checkbox"/> Government Agency: _____
(Agency Name) | |
| <input type="checkbox"/> Professional/
Technical School: _____ | <input type="checkbox"/> Employment Agency: _____
(Agency Name) | |
| <input type="checkbox"/> Job Fair: _____
(Specify) | <input type="checkbox"/> Other: _____ | |

Affirmative Action Compliance Data

Federal rules require that we gather the following information on all the applicants. MARTA requests your cooperation in providing the needed information; however, completion of the information below is strictly voluntary and will in no way effect your application for employment.

I. Ethnic Groups:

- Hispanic or Latino Not of Hispanic or Latin origin (Please identify your race below in section II)

II. Race Categories:

- | | |
|--|---|
| <input type="checkbox"/> White (Caucasian), not of Hispanic origin | <input type="checkbox"/> Black (African American), not of Hispanic origin |
| <input type="checkbox"/> American Indian or Alaskan Native | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |

III. Sex

- Male Female Not Specified

IV. Veteran

- Yes No

V. Self-Identifying as Disabled

- Yes No

MARTA IS AN EQUAL OPORTUNITY EMPLOYER

It is MARTA policy that no employee or applicant for employment will be discriminated against because of race, color, creed, religion, sex, marital status, national origin, sexual orientation, ancestry, age, unfavorable military discharge, gender identity or expression, disability, provided that the individual with the disability is able to perform the essential functions of the job which he/she desires to hold with reasonable accommodation by the authority.

Metropolitan Atlanta Rapid Transit Authority



Police Department
2424 Piedmont Road, NE
Atlanta, Georgia 30324

I hereby authorize the MARTA Police Department, or the MARTA Division of Personnel, to receive any criminal history information pertaining to me which may be in the files of any local, state, or federal criminal justice agency. This authorization shall remain in effect from date of signature until such time as my application is rejected or, if employed, my employment is terminated.

I also request and authorize a review and full disclosure of all records concerning me, to any authorized agent of the MARTA Police Department, or the MARTA Division of Personnel, whether the 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 the records of educational institutions; internal investigations and disciplinary records; financial or credit institutions or reporting agencies including loans, the records of commercial or retail credit agencies (including credit reports and/or ratings), and other consultation, including hospitals, clinics, private practitioners, and the US Veterans Administration; employment and pre-employment records; and recollections of attorneys at law, or of other counsel, whether representing me or another person in any case, either civil or criminal, in which I have or have had an interest. I understand that any information obtained by a personal history background investigation which is developed directly or indirectly in whole or in part, upon this release authorization will be considered in determining the suitability for employment by the MARTA Police Department.

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

I hereby release any and all individuals, organizations, previous employers, reporting agencies, and others as stated above from any liability or damage which may result from furnishing the requested information.

Signed this _____ day of _____ of _____.

Signature _____

Printed Name _____

Notary Public

Seal

Date

Metropolitan Atlanta Rapid Transit Authority Police Department
A Nationally Accredited, State Certified Agency



MARTA Police Department

Employment Waiver

I, _____, hereby acknowledge that I fully understand that my employment with the MARTA Police Department is contingent on the results of the Department's complete investigation of my background.

Furthermore, I fully understand that if this investigation reveals any information that would prohibit my continued employment with this department, my appointment then is subject to immediate termination.

I, _____, without any coercion, voluntarily agree to execute and sign this waiver.

Applicant's Signature

Social Security Number

Date

Position Applied For

Witnessed By

Witnessed By

MARTA Police Department

Notice of Polygraph Examination

I understand that I will be required to take a standard law enforcement pre-employment polygraph examination administered by the Georgia Bureau of Investigation or MARTA Police Department at a time and place to be determined by the MARTA Police Department. If I am selected to continue in the MARTA Police Selection process, I will be notified of that date, time, and location for the examination.

Applicant's Printed Name

Applicant's Signature

Date Signed

Witnessed for MARTA Police Department

Metropolitan Atlanta Rapid Transit Authority



Police Department
2424 Piedmont Road, NE
Atlanta, Georgia 30324

Georgia Driver's History Consent Form

I hereby authorize MARTA Police Department, to receive a copy of my Georgia driver's history information as part of my application for criminal justice employment, or for use relative to the performance of my official duties with this agency.

Full Printed Name

Street Address

City

State

Zip Code

Sex

Date of Birth

Drivers License Number

Applicants Signature

Date

Notary Public

Commission Expiration

Metropolitan Atlanta Rapid Transit Authority Police Department
A Nationally Accredited, State Certified Agency



AUTHORIZATION TO RELEASE EMPLOYMENT INFORMATION

TO BE COMPLETED BY APPLICANT:

I hereby authorize any former employer to release to MARTA any and all records related to my prior employment, including salary information, attendance data, internal affairs investigations and conclusions, disciplinary actions, and any other record of any kind whatsoever. A copy of this authorization shall be as valid as the original.

SEAL

Signature
Date
Witness: Notary Public

TO BE COMPLETED BY MARTA:

Applicant's Name: _____ SSN: _____
 Previous Employer: _____
 Address: _____

The applicant identified above has applied for employment with the MARTA Police Department. The applicant has indicated that he/she was in your employment from _____ to _____ in the capacity of _____

Please provide the information requested below and return this form to us in the enclosed envelope at your earliest convenience.

Recruiting Officer
Date

TO BE COMPLETED BY EMPLOYER

Date Hired _____ Date he/she left your employment _____

Position (s) held _____

Reason he/she left your employment _____

Please rate the following areas:	Excellent	Good	Adequate	Unsatisfactory
Attendance	_____	_____	_____	_____
Ability to get along with others	_____	_____	_____	_____
Effective use of time and resources	_____	_____	_____	_____
Overall work performance	_____	_____	_____	_____

Is he/she eligible for re-hire? Yes ___ No ___ If no, why? _____

Do you recommend this applicant? Yes ___ No ___ Comments _____

Signature
Printed Name
Date Signed
Telephone



MARTA DRUG & ALCOHOL POLICY

PLEASE READ CAREFULLY PRE-EMPLOYMENT DRUG & ALOCHOL POLICY STATEMENT

As a public transportation carrier, MARTA is committed to a drug and alcohol free workplace, and to that end intends by its policies and practices to prohibit drug use and alcohol misuse.

All safety-sensitive applicants (or employee transfers from non-safety sensitive to safety-sensitive positions) must undergo urine drug testing prior to hire (or transferring) into a safety-sensitive position.

Under MARTA's own policy, all safety-sensitive applicants (or employees transferring from non-safety sensitive to safety-sensitive positions) must undergo breath alcohol testing following a contingent offer of employment or transfer.

A verified negative drug test result and a negative breath alcohol test result (<0.02 BAC) is required prior to employment. A confirmed positive pre-employment drug and/or alcohol test will disqualify an applicant for employment. Transferring employees with a confirmed positive pre-employment drug and/or alcohol test will be discharged.

Participation in MARTA's Drug & Alcohol program is a condition of employment.

Failure to adhere to MARTA's Drug & Alcohol Program will result in termination.

The Drug & Alcohol Policy can be obtained through the Office of Human Resources. Transferring employees may also obtain a copy from the MARTAnet.


I have read and understand MARTA's policy regarding pre-employment drug and alcohol testing.

Applicant's Name (Print)
(or Transferring Employee's Name)

Social Security Number

Applicant's Signature
(or Transferring Employee's Signature)

Date

<h1>MARTA</h1> Police Department 		Chapter 26	General Order Number 26-110
		Date of Issue 7/7/00	Effective Date 7/7/00
Subject Child Support Enforcement Procedures		Issuing Authority Chief of Police	
Reference	Page 1 of 3	New () Amends () Rescinds (X) General Order 26-110 dated 10/15/96	

Purpose:

The State of Georgia has various statutes requiring the prompt payment of child support obligations. During the 1996 session of the Georgia General Assembly, Senate Bill 227 was passed, and was signed into law by the Governor. This new Statute requires various professional licensing agencies and the driver's license section of the Department of Public Safety to suspend occupational or driver's licenses under certain defined circumstances involving non-payment of court-ordered child support. A peace officer certification issued by the Georgia POST Council must, under prescribed circumstances, be denied or suspended for non-payment of child support. This General Order describes the MARTA Police Department's procedures in responding to the requirements of this law.

Policy:

A police officer, certified or non-certified, employed by the MARTA Police Department must immediately notify the Chief of Police of any suspension or denial of a driver's license or POST certification related to nonpayment of court-ordered child support. This notification will be sent in writing through the officer's chain of command. Failure to immediately make this required notification of a suspended or denied driver's license or POST certification will be grounds for termination of employment.

Beginning immediately at the time an officer is notified of a suspension or denial of a POST certification due to non-payment of court-ordered child support, the officer will not work in any capacity as a MARTA Police Officer until the issue is resolved.

If the officer's driver's license is suspended for non-payment of court-ordered child support, the provisions of General Order 85-102 will apply.

A certified officer who has a POST certification suspended or denied due to non-payment of court-ordered child support will be immediately suspended without pay for a period of time not to exceed thirty days. During that time the officer will have the opportunity to resolve the issue and to have the suspension or denial of a POST certification removed. If the issue is not resolved during this thirty-day period in a manner that allows the officer to return to work in full compliance with all applicable statutes of the State of Georgia, the officer will be terminated.

An officer who is attending the POST mandate school who receives a notice of a suspension of a driver's license for non-payment of child support will be subject to the provisions of General Order 85-102. If a noncertified officer attending POST mandate school receives notice of POST's intent to deny certification of the officer as a Peace Officer because of non-payment of child support,

written notice must immediately be given by the officer to the commanding officer of the Training Unit and the Chief of Police. The officer will be allowed to continue mandate school for a period not to exceed thirty days. If the issue is not resolved during that time period in a manner that will allow the officer to be certified as a Peace Officer, the officer's employment will be terminated. If the officer graduates from mandate school during the thirty day period, and if the issue has not be successfully resolved with POST, the officer will be placed on suspension without pay for the balance of the thirty day time period. If the issue is not satisfactorily resolved by the end of that time period, the officer will be terminated.

All certified and non-certified officers must keep the Department of Public Safety unit that administers driver's licenses notified of their current address. If the officer is required to pay child support under the administration of the Georgia Department of Human Resources, the officer will ensure that the appropriate office within that Department is notified of the officer's current address.

New employees, at the time they are hired, will be provided a copy of this General Order, and they must sign a certification that they understand the provisions of this General Order and its application.

**METROPOLITAN ATLANTA RAPID TRANSIT AUTHORITY
Police Department**

Notice to All Applicants for Employment as Transit Police Officers

As a condition of employment as a MARTA police officer, you are required to obtain and maintain certification as a sworn peace officer under the laws of the State of Georgia. Certification is issued by and may be suspended or revoked by the Georgia Peace Officer Standards and Training Council [POST]. Failure to satisfy the requirements established by POST and applicable state law can result in the failure to receive certification or the suspension or revocation of certification.

At any time during your employment with MARTA as a police officer if you fail to maintain your certification as a sworn peace officer your employment will be terminated.

To be considered for employment as a MARTA police officer, you must be eligible for certification by POST. Under the terms of Senate Bill 227, effective July 1, 1996, POST must deny certification to any individual who has failed to pay court ordered child support for more than sixty days and who: (1) is the subject of a Superior Court order requiring POST to refuse to issue certification or to suspend an existing certification or (2) appears on the Georgia Department of Human resources list of individuals who should be denied certification or licensing by state agencies based upon failure to pay child support. POST must also suspend certifications previously granted to individuals if POST receives notice of nonpayment of child support in either of the ways described above.

By signing this notice, the applicant certifies that:

- (1) He or she is not subject to denial of certification by POST or suspension of an existing POST certification pursuant to SB 227 for failure to pay court ordered child support;
- (2) He or she is not the subject of any superior court order denying or suspending state professional licenses as the result of nonpayment of child support;
- (3) He or she is not listed by the Georgia Department of Human Resources as an individual ineligible for licensing by state agencies as the result of nonpayment of child support; and
- (4) He or she is not the subject of any drivers license suspension proceedings as a result of nonpayment of child support.

The Applicant understands that any failure to obtain POST certification or any subsequent suspension or revocation of POST certification will affect the applicant's employment as a MARTA police officer as described in the attached General Order 26-110, a copy of which has been provided to the Applicant.

Applicant Printed Name

Applicant Signature

Date Signed

MARTA POLICE DEPARTMENT



Pre-Employment Police Candidate Questionnaire

Applicant's Name: _____

Date: _____

MARTA Police Department

PRE-EMPLOYMENT POLICE CANDIDATE QUESTIONNAIRE

Date: _____ Position Applied for: _____

Name: _____
Last First Middle Phone Number

DOB: _____
Month / Day / Year Age Place of Birth

SSN: _____
Mobile Number

Address: _____
Street City State Zip Code

Sex: _____ Weight: _____ Marital Status: _____

Race: _____ Height: _____ Spouse's Name: _____

Current Occupation: _____

Business Address: _____
Street City State Zip Code

The following questions pertain to mandatory requirements of employment with the MARTA Police Department:

1. Do you have a high school diploma or equivalent? _____
2. Are you a Naturalized or United States-born Citizen? _____
3. Have you ever been convicted of a felony? _____
4. Have you ever applied with the MARTA Police Department before? _____
5. Have you ever been employed by a Criminal Justice Agency before? _____
6. Have you ever used or experimented with any type of illegal drugs? _____
If so, please list date, type of drug, and the number of times used: _____

HIGHER EDUCATION

1. Do you have a college degree? _____ If so, list degree type and college or university.

2. If not and you have some college, how many semester or quarter hours do you have? _____

RESIDENTIAL HISTORY

In the space provided below, please list all the places you have lived the past fifteen (15) years beginning with the most recent.

From / To	Street Address / City / State / County

PERSONAL REFERENCES

List five (5) people who have known you for at least five (5) years and are not related to you either by blood or marriage and are not former employers. Examples of personal references may include your family doctor, minister, neighbor, teacher, landlord and friends. Those listed may be asked to appraise your character, ability, experience, personality and other qualities.

1.			
Name of Person	Relationship	# of Years Acquainted	()
Address	City/State	Zip Code	Telephone Number
2.			
Name of Person	Relationship	# of Years Acquainted	()
Address	City/State	Zip Code	Telephone Number
3.			
Name of Person	Relationship	# of Years Acquainted	()
Address	City/State	Zip Code	Telephone Number
4.			
Name of Person	Relationship	# of Years Acquainted	()
Address	City/State	Zip Code	Telephone Number
5.			
Name of Person	Relationship	# of Years Acquainted	()
Address	City/State	Zip Code	Telephone Number

CRIMINAL HISTORY

Have you ever been convicted of or participated in any of the following crime(s) in the past, or are you presently awaiting a court hearing for any of the following crimes?

	Yes	No	Explain
Reckless Driving			
DUI			
Serious Injury by Vehicle			
Assaultive Behavior			
Obstruction of an Officer			
Sexual Offenses			
Theft by Taking			
Theft by Deception			
Theft of Services			
Theft of Lost/Mislaid Property			
Theft by Receiving Stolen Property			
Violation of the GA Controlled Substance Laws			
Homicide by Vehicle			
Fleeing or attempting to elude an Officer			
Impersonating a Law Enforcement Officer			
Robbery			
Armed Robbery			
Forgery			
Credit Card Fraud			

Have you ever been convicted of or participated in any other crimes that were not mentioned above?
Yes _____ No _____

If so, give explanations, dates, county, city, and state that the incident occurred. _____

1. Have you ever been arrested or convicted of any crime excluding traffic offenses?

Yes ____ No ____

If yes, please specify: _____

2. Have you ever plead guilty or nolo contendere to any crime excluding traffic offenses?

Yes ____ No ____

3. Have you ever received a sentence under the First Offender Act?

Yes ____ No ____

4. Have you ever appeared in court (including juvenile) as a defendant to answer any city, Municipal, State or Federal charge(s)?

Yes ____ No ____

If you answered yes to questions 2, 3 or 4 please explain: _____

Were you ever in custody as a juvenile?

Yes _____

No _____

5. **Have you ever been:**

Sentenced to incarceration of any type?

Yes _____

No _____

Placed in a police line-up?

Yes _____

No _____

Have you ever been placed on probation?

Yes _____

No _____

Have you ever been placed on parole?

Yes _____

No _____

Placed in jail?

Yes _____

No _____

Placed in a holding cell?

Yes _____

No _____

Placed in a military stockade?

Yes _____

No _____

Placed in an alternative school?

Yes _____

No _____

Questioned as a suspect of a crime by the police?

Yes _____

No _____

If you answered "yes" to any of the above questions, please explain. _____

THEFTS

- | | | |
|--|-----------|----------|
| 1. Have you ever stolen any money from an employer? | Yes _____ | No _____ |
| 2. Did you ever steal anything from an employer? | Yes _____ | No _____ |
| 3. Have you ever stolen any property from a fellow employee? | Yes _____ | No _____ |
| 4. Have you ever deliberately "short changed" a customer? | Yes _____ | No _____ |
| 5. Have you ever deliberately destroyed any property of an employer? | Yes _____ | No _____ |
| 6. As an adult, have you ever stolen anything from a store? | Yes _____ | No _____ |
| 7. Did you ever alter a price tag in a store? | Yes _____ | No _____ |
| 8. Did you ever forge a check? | Yes _____ | No _____ |
| 9. Did you ever intentionally write a bad check? | Yes _____ | No _____ |
| 10. Did you ever steal anything from a vehicle? | Yes _____ | No _____ |
| 11. Did you ever act as a lookout when anyone else was stealing? | Yes _____ | No _____ |

If you answered "yes" to any of the above questions, please explain: _____

FINANCIAL

1. Have you ever declared or are you about to declare bankruptcy? Yes ____ No ____

If yes, please provide date, location, and circumstances: _____

2. Have you ever had any garnishments? Yes ____ No ____

If yes, please explain: _____

3. Have you ever been ordered by a court to make financial payments? Yes ____ No ____

If yes, please explain: _____

MILITARY

1. Have you ever served in the active Armed Forces of the United States? Yes ____ No ____

If yes, list branch:

A. What branch? _____

B. What date(s) of service? _____

2. What is the type of discharge? (Honorable, dishonorable, general, honorable conditions, etc.)

Be exact: _____

3. If you have anything below an Honorable discharge, please explain why: _____

4. Are you now, or were you ever a member of the United States Reserve Forces?

Yes _____ No _____

If yes, list branch:

A. What branch? _____

B. What date(s) of service? _____

5. Were you ever court-martialed, charged with a crime, the subject of summary court, desk court, captains mast or company punishment, or received any other DISCIPLINARY ACTION while a member of the Armed Forces? Yes ____ No

If yes, please explain here: _____

DRUGS

1. Have you used, sold, or purchased illegal drugs:

In the past 24 hours? Yes ____ No ____

If so, what type of drug? _____

In the past week? Yes ____ No ____

If so, what type of drug? _____

In the past month? Yes ____ No ____

If so, what type of drug? _____

In the past six months? Yes ____ No ____

If so, what type of drug? _____

In the past year? Yes ____ No ____

If so, what type of drug? _____

2. Did you use/try illegal drugs in grammar school? Yes ____ No ____

If so, what type of drug? _____

3. Did you use/try illegal drugs in high school? Yes ____ No ____

If so, what type of drug? _____

4. Did you use/try illegal drugs in college or trade school? Yes ____ No ____

If so, what type of drug? _____

5. Did you use/try illegal drugs in the military Yes. ____ No ____

If so, what type of drug? _____

6. Have you ever used/tried illegal drugs at work? Yes. ____ No ____

If so, what type of drug? _____

7. Have you ever used/tried illegal drugs just prior to reporting to work? Yes ____ No ____

If so, what type of drug? _____

8. Have you ever used/tried illegal drugs at lunch or other breaks at work? Yes ____ No ____

If so, what type of drug? _____

9. Have you ever used/tried illegal drugs just after getting off from work? Yes ____ No ____

If so, what type of drug? _____

10. Have you ever taken alcohol and illegal drugs together? Yes ____ No ____

If so, how many times? _____

What type of drug? _____

Where were you? _____

Last time? _____

11. Have you ever passed or attempted to pass a forged drug prescription? Yes ____ No ____

12. Have you ever been arrested or convicted for a drug violation? Yes ____ No ____

13. Have you ever stolen drugs from anyone? Yes ____ No ____

14. Have you ever sold any substance which you presented or claimed to be an illegal drug?

If you answered "yes" to questions 11, 12, 13, or 14 please explain: _____

GAMBLING

1. Do you have any gambling debts? Yes ____ No ____

If yes, please explain: _____

2. What is the most money you have ever illegally bet? Amount: _____ When: _____

PRIOR CRIMINAL JUSTICE EMPLOYMENT HISTORY

1. Please list other law enforcement agencies to which you have applied for employment: _____

2. Have you ever been employed by a criminal justice or law enforcement agency?
Yes _____ No _____

If yes, please answer the following questions:

Have you ever accepted a payoff? Yes _____ No _____

Have you ever stolen anything from anyone you arrested? Yes _____ No _____

Have you ever stolen anything at the scene of a burglary? Yes _____ No _____

Have you ever kept the property of someone who was arrested? Yes _____ No _____

Did you ever carry a "throw down" weapon? Yes _____ No _____

Have you ever unlawfully entered a business? Yes _____ No _____

Have you ever stolen anything from a car that you had towed in? Yes _____ No _____

Did you ever falsify an expense voucher? Yes _____ No _____

Have you ever received any type of gratuity for dropping a case or disposing of an arrest ticket? Yes _____ No _____

Have you ever tampered with evidence? Yes _____ No _____

Have you ever kept for personal use or for resale any illegal drugs taken from someone who had been arrested, detained, or questioned? Yes _____ No _____

Have you ever illegally destroyed a case file, computer record or official report? Yes _____ No _____

Have you illegally retained seized weapons or property? Yes _____ No _____

Have you ever intentionally falsified a case file, computer entry or official report? Yes _____ No _____

Have you ever planted evidence? Yes _____ No _____

Have you ever "tipped off" a friend, acquaintance, or relative about an active investigation involving them? Yes _____ No _____

Did you ever "cover-up" a criminal offense for a friend or relative? Yes _____ No _____

Since you were first employed in criminal justice work, have you used or sold marijuana, cocaine, or any other illegal drugs? Yes _____ No _____

Have you ever stolen anything from a crime scene? Yes _____ No _____

Has your POST certification ever been suspended or revoked by any state? Yes _____ No _____

While employed by a criminal justice agency, did you ever violate your oath of office? Yes _____ No _____

Have you ever received an oral or written reprimand? Yes _____ No _____

Have you ever been suspended from work? Yes _____ No _____

Have you ever been terminated from employment? Yes _____ No _____

Have you ever been a party to a lawsuit as a result of your actions in the performance of your job? Yes _____ No _____

If you answered "yes" to any of the above questions, please explain: _____

3. Please list all criminal justice or law enforcement agencies you have worked for in the past.

Agency	City/State	Position	Years Employed

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY

The answers given by me to the foregoing questions and the statements made by me are true to the best of my knowledge and belief. I UNDERSTAND THAT ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS OF FACTS CALLED FOR IN THIS QUESTIONNAIRE OR ANY SUPPLEMENTS THERETO, ARE CAUSE FOR REJECTION OF MY APPLICATION OR DISCHARGE AT ANY TIME DURING MY EMPLOYMENT.

I understand that MARTA may procure or prepare an investigative report to verify all information I have provided on the questionnaire. For certain positions, this investigation may include a check of my criminal conviction record. By signing this questionnaire, I authorize MARTA to make such an investigation and release from all liability or responsibility all persons, schools, companies, corporations, state agencies or any other entity supplying or collecting such information. Any copy of this authorization shall have the same as the original.

I further understand that as a condition of employment all Transit Police Officer Candidates must pass the Georgia Peace Officer Standards and Training written entrance examination and successfully complete the POST Academy. Any failure to obtain POST certification or any subsequent suspension or revocation of POST certification will affect the applicant's employment as a MARTA Transit Police Officer.

Signature

Date

**METROPOLITAN ATLANTA RAPID TRANSIT AUTHORITY
DIVISION OF POLICE SERVICES
CONSENT AND AUTHORIZATION FOR RELEASE OF INFORMATION**

I hereby authorize and request that you release to an authorized representative of the MARTA Police Department all requested pertinent information concerning my employment history, driver's license history, credit history, or criminal history record which may be in the files of any state or local criminal justice agency in Georgia.

It is my understanding that this information will be used by the MARTA Police Department **only** for official purposes and will be kept **confidential**. This consent and authorization shall remain in effect from date of signature until such time as my application is rejected or, if employed, my employment is terminated.

I relieve MARTA of any and all liabilities.

Full Printed Name

Street Address

City

State

Zip Code

Sex

Race

Date of Birth

Social Security Number

Applicants Signature

Date

Notary Public

Date

Commission Expiration

Recruiting Officer