



MORRISON POLICE DEPARTMENT
APPLICATION FOR EMPLOYMENT
321 STATE HIGHWAY 8
MORRISON, COLORADO 80465
303-697-4810
AN EQUAL OPPORTUNITY EMPLOYER
Please Block Print or Type

Date of Application: 11/14/22

Norton Richard Jon
LAST NAME FIRST NAME MIDDLE NAME

[REDACTED] [REDACTED]
DATE OF BIRTH (MM/DD/YYYY) SOCIAL SECURITY NUMBER (Disclosure is Voluntary)

[REDACTED] [REDACTED] [REDACTED] [REDACTED]
PRESENT ADDRESS APT # CITY STATE ZIP

() () [REDACTED]
HOME PHONE WORK PHONE CELL PHONE

Spokane WA M 6 200 Brown Brown
PLACE OF BIRTH SEX HEIGHT WEIGHT HAIR EYES

[REDACTED] CO 11/07/25
DRIVER'S LICENSE NUMBER STATE TYPE EXPIRATION DATE

Are you a legal resident of the United States? YES NO

Can you type? YES NO _____
EST. WORDS PER MINUTE

Are you familiar with computers? YES NO
-Please list software you are familiar with (word, excel etc.) _____

Please list any special training you have had: SWAT, Investigative courses, Kevlar Instructor

Please list any special skills you have: _____

How did you hear of this position: online

RELATIVES, REFERENCES, ACQUAINTANCES

Please list the names of **at least three persons** who are **not related** to you, who have **knowledge of you and your qualifications**.

[REDACTED]	[REDACTED]	[REDACTED]	()
NAME	ADDRESS	HOME PHONE	OTHER PHONE
[REDACTED]	[REDACTED]	[REDACTED]	()
NAME	ADDRESS	HOME PHONE	OTHER PHONE
[REDACTED]	[REDACTED]	[REDACTED]	()
NAME	ADDRESS	HOME PHONE	OTHER PHONE
[REDACTED]	[REDACTED]	()	()
NAME	ADDRESS	HOME PHONE	OTHER PHONE

RELATIVES, REFERENCES, ACQUAINTANCES (Cont)

List individuals with whom you have resided within the past 10 years. List no information prior to your 15th birthday. **Exclude family members.**

NAME	ADDRESS	()	()
		HOME PHONE	OTHER PHONE
NAME	ADDRESS	()	()
		HOME PHONE	OTHER PHONE
NAME	ADDRESS	()	()
		HOME PHONE	OTHER PHONE
NAME	ADDRESS	()	()
		HOME PHONE	OTHER PHONE

Please list all your residences during the last 10 years. Begin with your most current residence and proceed backward. If residence was rented, give the landlord's name, address and telephone number. Include street, apt #, city, state and zip code.

ADDRESS OF RESIDENCE	FROM DATE	TO DATE	REASON FOR LEAVING	LANDLORD NAME, FULL ADDRESS, PHONE
[REDACTED]	10/20	Current		
[REDACTED]	10/19	10/20	Moved to current	Firestone Meadows
[REDACTED]	02/13	10/19	Divorce	
[REDACTED]	02/12	02/13		

EMPLOYMENT DESIRED

Position Police Officer Full time Part-time Reserve Officer

Date you would be available to start Today Are you employed now? YES NO
Will you need to give notice? YES NO

Have you applied at this department before? YES NO If YES, when? _____ Have
you ever been employed by the Town of Morrison? YES NO

If yes to above, when, and in what capacity? _____

How long were you employed? _____ Who was your Supervisor? _____

Reason for leaving? _____

Have you ever applied for a Law Enforcement position? YES NO
When? last several months What Agency? Multiple

Check each step in the process that you completed, and your status:

STEPS: Application Physical agility Orals Background Chief's Oral Board Conditional job offer withdrawn
STATUS: Hired On List Withdrawn Disqualified Failed Oral Failed Written Failed Other, please describe

If more than one agency list on additional information sheet.

Have you ever declared Bankruptcy? YES NO If Yes, when and where? _____

Within the last seven (7) years, have any of your bills been turned over to a collection agency? YES NO
If "YES" give details to include when, firms involved and circumstances: _____

Within the last seven (7) years, have your wages been garnished? YES NO If YES give details to include
when, where, and why: _____

Have you ever been delinquent on child support, income tax, or other tax payments? YES NO If YES give
details to include when, where, and why _____

Are you currently the subject of any type of civil or criminal court action? YES NO If YES give details to
include when, where, and why _____

Do you own your own home or are you buying your own home? YES NO

Are you: Single Married Divorced Living with someone

Spouse or significant other's name [REDACTED]
Maiden name if applicable [REDACTED] D.O.B. [REDACTED]

EMPLOYMENT HISTORY

Please list all jobs starting with your current employer or most recent job and go back 10 years. If needed list on another sheet of paper.

Outdoor lifestyles 151 So Co 72 Arvada 720 404 8401
 Employer or company name Address Phone
Landscape Tech 07/16/22 _____ \$20/hr
 Position held Start Date End Date Salary
 Description of work you did Landscape, construction
 Supervisor Name: Brandon Knight Reason for leaving: Temp. until hired by PD.

Broomfield PD 7 Roscombes Drive Broomfield 303 439 6400
 Employer or company name Address Phone
Police Officer 10/28/15 07/16/22 \$45/hr
 Position held Start Date End Date Salary
 Description of work you did Patrol, K9, Instructor, SWAT
 Supervisor Name: Jason Collins Reason for leaving: left after I/A

Weld County SO 2110 O St Greeley 970 356 4615
 Employer or company name Address Phone
Retention Deputy 05/13 10/15 \$24/hr
 Position held Start Date End Date Salary
 Description of work you did Supervised inmates
 Supervisor Name: Multiple Reason for leaving: Hired by Broomfield

OS Security Associates 9110 E Kenyon Ave Denver _____
 Employer or company name address phone
Security Guard 10/11 05/13 \$9.25
 Position held Start Date End Date Salary
 Description of work you did Armed / unarmmed Security
 Supervisor Name: Robert Anko Reason for leaving: Hired by weld

Employer or company name address phone
 Position held Start Date End Date Salary
 Description of work you did _____
 Supervisor Name: _____ Reason for leaving: _____

Use additional pages if needed

HAVE YOU EVER BEEN FIRED OR ASKED TO RESIGN FROM EMPLOYMENT? YES NO

IF YES PLEASE EXPLAIN _____

MILITARY HISTORY

HAVE YOU EVER SERVED IN THE UNITED STATES MILITARY? YES NO BRANCH OF SERVICE _____

DATES OF ACTIVE SERVICE _____ RANK AT TIME OF DISCHARGE _____

TYPE OF DISCHARGE RECEIVED _____

TYPE OF ASSIGNMENT(S) _____

PRESENT NATIONAL GUARD OR RESERVE MEMBER? YES NO

(Please remember to attach copy of discharge (DD214) papers to application)

HAVE YOU REGISTERED WITH THE SELECTIVE SERVICE? YES NO IF YES, WHEN? 2007-2008

HAVE YOU EVER BEEN THE SUBJECT OF ANY JUDICIAL OR NON-JUDICIAL DISCIPLINARY ACTION WHILE IN THE MILITARY, NATIONAL GUARD OR MILITARY RESERVES? YES NO
IF YES, PLEASE GIVE DETAILS TO INCLUDE BRANCH OF SERVICE, WHEN, WHERE, CIRCUMSTANCES, ETC _____

EDUCATION HISTORY

Please list all schools attended beginning with High School

NAME OF SCHOOL	ADDRESS	GRADE COMPLETED
<u>Lead High School</u>	<u>320 S Main St Lead SD</u>	<u>12th</u>
<u>Black Hills State</u>	<u>1700 University St Spearhead SD</u>	<u>3rd</u>
<u>University of Northern CO</u>	<u>501 20th St Greeley CO</u>	<u>Bachelors</u>
<u>Southern New Hampshire Uni.</u>	<u>2500 W River Road Manchester NH</u>	<u>masters</u>
<u>Meridian University</u>	<u>47th St Petaluma CA</u>	<u>PsyD</u>

DO YOU POSSESS A HIGH SCHOOL DIPLOMA OR G.E.D. FROM A U.S. INSTITUTION? YES NO (attach a copy to application)

DO YOU HAVE A COLLEGE DEGREE? YES NO MAJOR: _____

IF YOU HAVE ATTENDED COLLEGE AND NOT YET OBTAINED A DEGREE, LIST NUMBER OF CREDIT HOURS COMPLETED _____

HAVE YOU OBTAINED A DIPLOMA FROM A TRADE OR BUSINESS SCHOOL? YES NO TYPE: _____

POLICE ACADEMY ATTENDED Weld County Law Enforcement ADDRESS _____

DATE YOU COMPLETED ACADEMY OR DATE YOU EXPECT TO COMPLETE ACADEMY 10/14

DO YOU CURRENTLY HOLD A STATE OF COLORADO POLICE OFFICERS STANDARD AND TRAINING CERTIFICATE? YES NO

COLORADO STATE CERTIFICATION NUMBER 146100 DATE OF ISSUE 10/14

DO YOU SPEAK ANY FOREIGN LANGUAGES? YES NO IF YES WHICH ONE(S) _____

BACKGROUND INFORMATION

(The fact that your record may have been affected by a sealing, an expungement, a release, or a pardon has specific legal implications as to how you answer the following questions.)

HAVE YOU EVER BEEN ARRESTED? YES NO

HAVE YOU EVER BEEN ISSUED A PENAL SUMMONS TO APPEAR IN COURT? YES NO

HAVE YOU EVER RECEIVED A TRAFFIC CITATION? (OTHER THAN PARKING) YES NO

HAVE YOU EVER BEEN CONVICTED OF ANY CRIME OTHER THAN TRAFFIC? YES NO

ARE YOU CURRENTLY THE SUBJECT OF ANY KIND OF PROTECTION ORDER? YES NO

HAVE YOU EVER BEEN SENTENCED TO A COUNTY JAIL, STATE OR FEDERAL PRISON, OR ANY OTHER TYPE OF PENAL INSTITUTION? YES NO

HAVE YOU EVER BEEN IN A DIVERSION PROGRAM, OR ON PROBATION OR PAROLE? YES NO

HAS YOUR LICENSE TO DRIVE EVER BEEN SUSPENDED, REVOKED, OR DENIED? YES NO

HAVE YOU BEEN INVOLVED AS A DRIVER IN A MOTOR VEHICLE ACCIDENT IN THE LAST FIVE YEARS? YES NO

If you have answered "YES" to any of the above please, explain fully in the space below. If more space is needed then use the additional information sheet. Be sure to include dates, locations, agencies, charges, dispositions and any other information we should know about.

Summons / conviction was for underage drinking in 2008/2009
license was suspended for 30 days

10/29/22 - Accident - Rear ended by another vehicle CSP report

11/08/22 - Accident - At fault merged into lane, ex info

ARE YOU NOW, OR HAVE YOU EVER BEEN A MEMBER OF ANY FOREIGN OR DOMESTIC ORGANIZATION, ASSOCIATION, MOVEMENT, OR GROUP OF PERSONS THAT IS, OR WAS, TOTALITARIAN, FASCIST, COMMUNIST, OR SUBVERSIVE IN NATURE, OR WHICH HAD ADOPTED OR EXPRESSED A POLICY OF ADVOCATING OR APPROVING OF THE COMMISSION OF ACTS OF FORCE OR VIOLENCE AS A MEANS TO DENY OTHER PERSONS THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES, OR WHICH SEEKS TO ALTER THE FORM OF GOVERNMENT OF THE UNITED STATES BY UNCONSTITUTION MEANS? YES NO IF YES IDENTIFY THE ORGANIZATION AND EXPLAIN FULLY:

USE OF DRUGS OR NARCOTICS

A yes answer does not necessarily exclude you from being hired

- Have you ever smoked/used Marijuana or Hashish Oil YES NO
- Have you ever used Cocaine, Crack, Ice, Barbiturates, Amphetamines YES NO
- Have you ever used Methamphetamines,(Speed, Crank)? YES NO
- Have you ever abused any type of Prescription Drugs? YES NO
- Have you ever used LSD, Hallucinogens, PCP (Angel Dust, Sherm)? YES NO
- Have you ever used Heroin or other Opiates? YES NO
- Have you ever used Steroids, or pharmaceutical drugs not prescribed for you? YES NO
- Have you ever abused any type of household chemical or inhalant? YES NO
- Do you associate with persons, friends, family etc. that use drugs or Narcotics illegally? YES NO

If you answered yes to any of the above questions, please explain in detail and give the date first used, and the date last used in your explanation. Tricid Marijuana in 2008

MISCELLANEOUS

- Do you object to working nights? (Swing or graveyard shifts) YES NO
- Do you object to working on the weekends? YES NO
- Do you object to working Holidays? YES NO
- Do you object to working 10-12 hour days? YES NO
- Do you object to wearing a uniform? YES NO

Is there anything that has not been asked on this application that would disqualify you from being a police officer in Colorado, or prevent you from performing your duties as a police officer to the fullest extent? YES NO
If YES, please explain _____

OPTIONAL INFORMATION

LIST ORGANIZATIONS, CLUBS, PROFESSIONAL SOCIETIES OR OTHER ASSOCIATIONS OF WHICH YOU ARE, OR HAVE BEEN A MEMBER

WHAT ARE YOUR PERSONAL HOBBIES?

Hunting, fishing, Jiu Jitsu, weights, family outdoors

LIST THE MAGAZINES AND NEWSPAPERS TO WHICH YOU CURRENTLY SUBSCRIBE

LIST ANY IDENTIFYING MARKS, SCARS, TATTOOS, BURNS OR BIRTHMARKS

right arm nearly full sleeve, heart on left ribs, cross upper back

PLEASE COMPLETE THESE QUESTIONS IN YOUR OWN HANDWRITING.

Question: Why do you want this job? How do you think it will benefit you?

I am an experienced officer and will bring that history to the agency with me. I want this position to continue to grow in my career and in doing so help the agency to grow as well.

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for in this application could be cause to be disqualified from consideration for this position if discovered before being hired and could be cause for dismissal if discovered after I am employed. Further, I understand and agree that my employment is for no definite period and regardless of the date of payment of my wages/salary, I may be terminated at any time without any previous notice during any time period of my employment. I understand that I will have to undergo a psychological examination, medical examination, and written tests and oral interviews and may be asked to submit to a polygraph examination as a condition of my employment. I understand that a full investigation of my background will be conducted.

Signature



Date

11/14/22