REQUEST FOR CANDIDATE'S
EMPLOYMENT RECORD
PD 407-163 (Rev. 08-19)

CAS-19

_____
Date

_____

_____

_____

_____

THIS IS AN INQUIRY CONCERNING: Exam No._____   List No._____

Name	Address	
Employed By You As	From	To
Social Security No.	Date Of Birth	

I hereby give my written consent and request and authorize you to turn over any and all employment records relating to my employment.

I acknowledge by this authorization that I release you from any obligation or liability in the disclosure of the contents of such files and the professional observations or opinions contained therein.

I further request that such records be forwarded to the Police Department Investigator, named below.

_____
Candidate's Signature

_____
Social Security Number

The above named person is a candidate for the position of _____ in the Police Department of the City of New York and states that he/she was employed by you in the capacity and for the period(s) shown above.

I have been assigned by the Police Commissioner to investigate the character and record of this candidate in order to determine his/her eligibility for the position.

You can assist this department in its effort to appoint competent persons of good character if you will furnish the information requested on the reverse side of this letter. All information will be treated as confidential.

Your cooperation and prompt reply will be greatly appreciated.

Rank/Name	Squad No.	E-mail Address

NAME OF FIRM OR AGENCY	TYPE OF BUSINESS OR FUNCTION OF AGENCY	DATE

EMPLOYED		PART TIME OR FULL TIME	TITLE OR DUTY	AVERAGE WEEKLY SALARY	SOCIAL SECURITY NO.
FROM	TO				

IF NOT PRESENTLY EMPLOYED BY YOU, INDICATE MANNER OF LEAVING YOUR EMPLOY

(Check One)

☐ RESIGNED VOLUNTARILY (State reason given.)_____

☐ REQUESTED TO RESIGN (State reason.)_____

☐ DISCHARGED   } Please specify reason _____

☐ LAID OFF   _____

☐ OTHER   _____

CANDIDATE'S EMPLOYMENT RECORD (Check yes or no. If you desire to elaborate, do so in "details.")

Honest	☐ Yes ☐ No	Amenable To Orders	☐ Yes ☐ No	Excessively Late	☐ Yes ☐ No	Was He Ever Disciplined	☐ Yes ☐ No
Sober	☐ Yes ☐ No	Able To Get Along With Others	☐ Yes ☐ No	Excessively Absent	☐ Yes ☐ No	Injured or Given First Aid	☐ Yes ☐ No

IS SUBJECT CONSIDERED "ELIGIBLE FOR REHIRE"?	☐ Yes ☐ No	WOULD YOU PREFER A PERSONAL INTERVIEW TO DISCUSS THE CANDIDATE?	☐ Yes ☐ No

DETAILS OR ADDITIONAL COMMENT:

RESIDENCE ADDRESSES WHILE IN YOUR EMPLOY	
NAMES AND ADDRESS OF PREVIOUS EMPLOYERS	

SIGNATURE	TITLE OF YOUR POSITION	YOUR BUSINESS TELEPHONE NO.

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