

CERTIFICATION OF PENALTY

I hereby declare that all statements and information provided by me to the Polson Police Department during all phases of my pre-employment background investigation, and in all pre-employment screening processes are true and complete to the best of my knowledge and belief. I understand that any misstatements of material fact, willful omission of material fact or willful deception will be cause for disqualification and rejection without appeal as a candidate for employment for any position within the Polson Police Department. I fully understand that any misstatements, omissions or deceptions made by me that may be discovered after such time as I may be employed by the Polson Police Department are grounds for disciplinary action, up to and including termination of employment.

Applicant's Signature

Date

Subscribed and sworn to before me on the _____ day of _____, 20_____

Notary Signature

Printed or Typed Notary Name
Notary Public for the State of _____
Residing in _____
My Commission Expires _____