

Position: **Police Officer (Testing)**

Application Deadline: Thursday, December 5, 2019 by 5:00 p.m.

Agency: Washington Police Department – Washington, Illinois

Location: – Washington, Illinois (Central Illinois – Peoria Metro Area)

Starting Salary: \$50,956.15 (Lateral Transfer Salary can be higher) (All equipment is issued to new officers)

Qualifications: 1) Applicants must be 20 years and 6 months old by **December 7, 2019**. 2) Have a High School diploma or GED and an Associate's Degree or 60 semester college credit hours or 90 quarter college credit hours from an accredited college or university with a minimum grade of "C" for the required hours, 3) Have no felony convictions. 4) Be a U.S. citizen. 5) Have a valid driver's license.

Responsibilities: Individuals must share the vision & values of the Washington Police Department. The successful applicant must display the highest levels of integrity, sound judgment and ethical standards. We are seeking individuals who are team oriented with a high level of maturity and personal responsibility. Some responsibilities include, but are not limited to: enforcement of the law; prevention of crime; discover commission of crimes; control traffic flow and enforce State & local traffic regulations; perform certain administrative and technical tasks in support of the Department; aggressive, problem solving Patrol strategies; investigation of motor vehicle accidents, as well as misdemeanor and felony complaints; process crime scenes, understand and embrace the philosophy of Community Policing.

Washington is one of the fastest growing communities in Central Illinois with a population of 16,566 as of the 2016 Special Census.

Special Conditions: Applicant must participate in and successfully pass each phase of the process to continue onto the next phase of the selection process;

Phase 1 – Orientation, Phase 2 – Physical Agility Test, Phase 3 – Written Examination, Phase 4 – Oral Test, Phase 5 – Applicant Ride along Evaluation, Phase 6 – Background Investigation, Phase 7 – Preliminary Commission Interview, Phase 8 – Polygraph Examination, Phase 9 – Psychological Examination, Phase 10 – Medical Examination, Phase 11 – Final Physical Ability Test, Phase 12 – Commission Interview.

A MANDATORY ORIENTATION will be given on **Saturday, December 7, 2019, at 7:30 a.m., at Five Points Washington, 360 N. Wilmor Road, Washington, Illinois.**

Physical Agility and Written Examination to follow Orientation Session.

For more information:

Questions can be directed to us on Facebook: [@WashingtonPoliceDepartment](#)
or Twitter: [@Wash_IL_Police](#)

For more information contact:

Kent Henderson, Administrative Officer
Washington Police Department
115 W. Jefferson Street
Washington, IL 61571
khenderson@ci.washington.il.us

**CITY OF WASHINGTON
BOARD OF POLICE COMMISSIONERS**

DOCTOR'S RELEASE

A strenuous physical qualifications test (agility test) established by the Illinois Local Government Law Enforcement Officers Training Board will be conducted by a certified physical fitness instructor. The physical fitness of each applicant will be measured by:

- 1. Threshold Weight
- 2. Sit and Reach Test
- 3. 1 minute sit Up Test
- 4. 1 Repetition Maximum Bench Press
- 5. 1.5 Mile Run

“I hereby certify that _____ is physically capable of participating in this strenuous Physical Qualifications Test (Physical Ability Test).”

Signed: _____

Address: _____

Date: _____

TO BE TURNED IN AT THE PHYSICAL AGILITY TESTING FACILITY

This form is **NOT** to be turned in with the completed application; you will be required to bring this form with you to the physical agility test. If you do not present this form at the physical agility test, you will not be allowed to participate in the test, and will be eliminated from the testing process.

BOARD OF POLICE COMMISSIONERS POLICE OFFICER APPLICATION

APPLICATION CHECKLIST

(This Checklist must be completed and returned with your completed APPLICATION)

Check the box for all appropriate statements, and insure that all documents referred to are attached to your completed APPLICATION.

- You are a citizen of the United States of America.
- You have or will have reached age 20 and 6 months before the date of the examination.
- You are not, and will not be on the date of the examination, over age 35.
- You have attached to your application the following:
 - Your High School diploma or its equivalent; and
 - Proof of one of the following (check the box that applies to you):
 - Associates Degree or higher degree; or
 - A college or university transcript showing you have earned not less than 60 semester hours (90 quarter hours) of credit at an accredited college or university (minimum grade of "C" for each semester hour is required); or
 - Current employment as a full-time police officer; or
 - 30 months of previous experience as a part-time or auxiliary policeman at the local, state or federal level, including "Military Police" service.
- Military service record, if any;
- and Birth Certificate; and
- A copy of a valid motor vehicle operator's license.
- You are a fully-commissioned Police Officer. attach a copy of your certificate of completion of the Minimum Standards Basic Law Enforcement Training Course.
- You have signed your application, and your signature has been notarized.

The completed checklist must be returned with your application to the Police Department, 115 W. Jefferson Street, Washington, IL 61571. Until applications are received by the Police Department, they will not be considered to have been received by the Board of Police Commissioners.

NOTICE TO APPLICANT

YOU ARE HEREBY NOTIFIED that all new police officers must enter into and sign an Employment Agreement with the City of Washington to reimburse the City for hiring and training expenses incurred by the City in the event the new police officer ceases his or her employment within thirty (30) months after the conclusion of the new police officer's field training.

Benjamin Baer
Secretary
City of Washington Police Commission

**CITY OF WASHINGTON
BOARD OF POLICE COMMISSIONERS**

**Orientation Packet
For
Police Written and Physical Agility Exams**

**City of Washington
Patrol Officer Examination**

| | |
|------------------------|--|
| Orientation: | Saturday, December 7, 2019 (Washington, Illinois) |
| Physical Agility Exam: | Saturday, December 7, 2019 (Washington, Illinois) |
| Written Exam: | Saturday, December 7, 2019 (Washington, Illinois) |
| Examination Location: | Five Points Washington, 360 N. Wilmor Road |

APPLICATION INSTRUCTIONS

The Board of Police Commissioners of the City of Washington thanks you for your interest in a position with the Washington Police Department. It will be necessary for you to complete the enclosed Application and Application Checklist, and return them to the Police Department, 115 W. Jefferson St., Washington, IL 61571, no later than **December 5, 2019 at 5:00 p.m.** Applications and Application Checklists received after that date will not be accepted, and individuals whose application and application checklist are received after that date will not be allowed to participate in the testing process.

In order for you to be eligible to participate in the examination process, you must fully complete and return the enclosed Application and Application Checklist. Please complete each box or blank with the appropriate information. If a question or request for information does not apply to you, please print "DNA" in the appropriate space. Continuation sheets have been provided if you need additional space for your answers or responses to any of the questions. Please feel free to reproduce those continuation sheets should you need more space than is provided. You must attach a copy of your driver's license to your Application.

SECTION 1 APPLICATION

Fully complete the Application and Application Checklist for positions with the Washington Police Department. Attach the required documentation to your Application. This will include all of the items noted on the Application Checklist.

Your Application, when filed, must be accompanied by the Application Checklist, fully completed by you. Please insert your name, address, driver's license number, and the other information required in the upper right-hand corner of the Application Checklist, and please check all statements that apply to you. The Application Checklist must accompany your Application.

Please make sure that your Application is signed and notarized before you file it with the Police Department. Applications that are not signed, or are not notarized, will not be deemed to be filed. The completed and signed Application and Application Checklist must be returned to the Police Department, 115 W. Jefferson St., Washington, IL 61571. Until the Application is actually received, in the Office of the Police Department, your Application will not be deemed to have been filed. All Applications must be received prior to **5:00 p.m. on December 5, 2019.**

Any Applications received by the Police Department after that date and time will not be accepted. If you deliver your completed Application to the Washington Police Department, it **will not** be deemed to have been delivered to the Commission until it reaches the Police Department office.

SECTION 2 **ORIENTATION**

Immediately prior to the Physical Agility Test, an Orientation session will be held by the Board of Police Commissioners. Your attendance at the Orientation session is required in order for you to participate in the testing process. You should plan on arriving at the testing location no later than 8:00 a.m. at the Washington, Illinois testing location in order to participate in the Orientation session.

SECTION 3 **PHYSICAL ABILITY TEST**

Immediately following the Orientation, the Board of Police Commissioners will administer the Physical Ability Test. The Physical Ability Test of applicants is the first formal phase of the testing process. The Physical Ability Test is designed to measure a candidate's ability to perform those tasks required by police officers on a daily basis. The attached description of the Physical Ability Test is designed to familiarize you with the physical ability events and provide you with some training to help you prepare for the test. The suggestions provided are not exhaustive. You are encouraged to engage in whatever additional preparation strategies you believe will enhance your chances of performing effectively on the test and on the job. Prior to participating in the Physical Ability Test, you will be required to read and sign a Release of Liability. If you do not sign the Release, you will not be allowed to participate in the Physical Ability Test. You will also be required to present the Doctor's Release that you received with your application materials. If you do not present your Doctor's Release, fully signed and completed, you will not be allowed to participate in the Physical Ability Test.

SECTION 4 **WRITTEN EXAMINATION**

Immediately following the Physical Ability Test, the Board of Police Commissioners will administer the Written Examination. The Written Examination of applicants is the second formal phase of the testing process. You should bring with you not less than two No. 2 pencils. In addition, you will be required to present a valid driver's license, or other acceptable photo identification, to the testing representative. Failure to bring No. 2 pencils or your valid driver's license will result in you being ineligible to participate in the testing process. The Police Officer Series Exam will be administered during this

phase of the testing process. This Examination covers abilities and skills, and must be completed within the applicable time limit.

SECTION 5 SPECIAL NOTICE TO CANDIDATES

Due to the legal requirements under which the Board of Police Commissioners must operate, no exceptions to any rules will be granted. You must attend each test phase (orientation, physical ability test, and written examination) at the date, time and place specified. If you fail to successfully complete any of the test phases, you will be eliminated from further participation in this testing cycle.

SECTION 6 AMERICANS WITH DISABILITIES ACT

Under the Americans with Disabilities Act (ADA), reasonable accommodation must be provided in the job application process to provide a qualified applicant with an equal opportunity to be considered for a job. The Board of Police Commissioners acts as a commission of the City of Washington for purposes of the initial testing steps in the selection process for law enforcement officers. It is obligated to make a reasonable accommodation only for known limitations of an otherwise qualified individual with a disability. It is the responsibility of the applicant with a disability to inform the Board of Police Commissioners that an accommodation is needed to participate in the testing process. The Board is not required to provide an accommodation if unaware of the need. An applicant seeking an accommodation for any phase of the initial testing process must file a written request at least 5 working days prior to the date the testing phase is to be held and for which an accommodation is being sought. If a representative of the Board of Police Commissioners is approached during any phase of the testing process (orientation, physical ability test, or written examination) by a candidate requesting an accommodation in order to participate in that phase of the testing process, the representative will not authorize or approve an accommodation or suggest such approval, and will not allow the candidate to continue in the process with the benefit of the accommodation. *The City of Washington and its elected officials, agents, servants, employees, and members of the Board of Police Commissioners hereby deny and therefore disclaim any and all responsibility or liability to any person or party for any injury, damage, loss, and/or death resulting in any way from use of information contained in the physical ability test and information contained in these instructions.*

SECTION 7 ORAL INTERVIEW

All applicants who have passed the Physical Ability Test and the Written Examination may participate in the Oral Interview. The Oral Interview phase of the testing of

applicants for positions with the Washington Police Department consists of a series of questions that you will be asked to answer or to which you will be asked to respond. The time within which you may answer the questions will be carefully limited. You will be notified of the time, place and date of your Oral Interview shortly after the Commission receives the grades for the Written Examination. Your performance on the Oral Interview will be graded by the Police Commissioners, and a numeric score assigned. You must score a 70 or above to successfully complete this phase of the testing process.

SECTION 8 **ELIGIBILITY REGISTER**

After the completion of the Oral Interview phase of the testing process, an initial eligibility register will be prepared based upon a weighted average of the scores received on the Written Examination and the Oral Interview. All candidates who have passed all phases of the testing process to this point will be ranked based upon the weighted score. Each candidate will be given 10 days within which to request credits for education, military experience, and police service. Those who qualify for the credit(s) and who request the application of the credit, will receive an additional five points added to their composite score. A final eligibility register will then be prepared with the credits applied, and the candidates ranked again. This will then be the hiring list for the Washington Police Department. When a position becomes available, or the Commission expects a position to become available, candidates on the list will be processed through the balance of the test phases. Those candidates who are part-time or full-time police officers with a current PTI certificate, and the candidates at the top of the list will generally be processed first.

SECTION 9 **RIDE ALONG EVALUATION**

Each applicant who passes the Oral Interview may participate in the Ride Along Evaluation. The Ride Along Evaluation is an 8 hour evaluation that consists of you accompanying a Washington Police Officer on his or her work shift. You will be evaluated on your attitude, observation skills, attentiveness, demeanor, character, speech, alertness, ability to communicate, judgment, self-confidence, emotional stability, social skill, and general fitness for the position. You will be required to complete and submit reports or statements prescribed by the Board. You will be notified of the time, place and date of your Ride Along Evaluation shortly after the Commission receives the grades for the Oral Interviews. Your performance on the Ride Along Evaluation will be evaluated by the Board on a Pass/Fail basis.

SECTION 10 **BACKGROUND INVESTIGATION**

Each applicant who passes the Oral Interview must submit to an investigation of his or her background, character, employment, credit, and references, among other things. You may be asked to sign releases, authorizations and consents as may be reasonably necessary to complete the Background Investigation. You will be required to submit to fingerprinting and authorize a privacy release. The results of the Background Investigation, and the fingerprinting, will be evaluated by the Board on a Pass/Fail basis.

SECTION 11 **PRELIMINARY COMMISSION INTERVIEW**

Those applicants who pass the Background Investigation will be scheduled to meet with the Board of Police Commissioners for a Preliminary Commission Interview. The Preliminary Commission Interview provides the Board an opportunity to meet with you and ask you questions about any of the previous phases of the Examination process, as well as any other matters the Board wishes to address. You will be asked questions designed to allow the Board to evaluate and grade you on your general fitness for a position with the Washington Police Department. You will be notified of the time, place and date of your Preliminary Commission Interview shortly after the results of the Background Investigation has been received by the Police Commission. Your performance on the interview will be evaluated by the Board on a Pass/Fail basis.

SECTION 12 **BALANCE OF TESTING PHASES**

All candidates, prior to being hired by the Washington Police Department, must successfully complete the following additional phases of the testing process:

1. Polygraph Examination
2. Psychological Examination
3. Medical and Physical Examination
4. Final Physical Ability Test
5. Final Commission Interview, if necessary.

All candidates who are offered a position with the Washington Police Department must enter into and sign an Employment Agreement. That Employment Agreement requires that the candidate repay a part of the training costs incurred by the City of Washington in training the candidate, if the candidate leaves the employment of the City of Washington within 30 months of being hired. A candidate will not be hired until such an Employment Agreement is signed. Once a candidate is hired, he or she must attend and successfully complete the Police Training Institute (PTI), or the State Police

Academy (Academy). Failure to successfully complete PTI or the Academy will result in termination of employment. The City of Washington utilizes a probationary period for new police officers of 18 months. The probationary period may be extended by the Police Commission for up to an additional 6 months. During the probationary period, the Police Commission receives regular reports from the Chief of Police, training officers, and supervisors of the new officer and evaluates the performance of the new officer. If you have any questions regarding the testing process, or the hiring process, please feel free to contact Administrative Officer Kent Henderson, 115 W. Jefferson Street, Washington, IL 61571, khenderson@ci.washington.il.us.

PHYSICAL ABILITY TEST **INFORMATION SHEET**

It has been well documented that law enforcement personnel (as an occupational class) have serious health risk problems in terms of cardiovascular disease, lower back disorders, and obesity. Law enforcement agencies have the responsibility of minimizing known risks. Physical fitness is a health domain which can minimize the “known” health risk for law enforcement officers. Physical fitness has been demonstrated to be a bona fide occupational qualification (BFOQ). Job analyses that account for physical fitness have demonstrated that the fitness areas are underlying factors determining the physiological readiness to perform a variety of critical physical tasks.

SECTION 1 **SIT AND REACH TEST**

Description:

This test measures the flexibility of the lower back and upper leg area. It is an important area for performing police tasks involving range of motion and is important in minimizing lower back problems. The test involves stretching out to touch the toes or beyond with extended arms from the sitting position. You will be required to sit on the ground or floor with your knees straight and feet flat against a sit and reach box. Your forward movement must be steady and even, not a lurching motion. The sit and reach box is marked in inches.

The score is in the inches reached on a yard stick with 15 inches being at the toes.

Preparation:

Prepare for this test by performing sitting-type of stretching exercises daily. There are two primarily recommended exercises: *Sit and Reach*: Do 5 repetitions of the exercise. Sit on the ground with legs straight. Slowly extend forward at the waist and extend the fingertips toward the toes (keeping legs straight). Hold for 10 seconds. *Towel Stretch*: Sit on the ground with the legs straight. Wrap a towel around the feet holding each end

with each hand. Lean forward and pull gently on the towel extending the torso toward the toes.

SECTION 2 **1 MINUTE SIT UP TEST**

Description:

This test measures the muscular endurance of the abdominal muscles. It is an important area for performing police tasks that involve the use of force and is an important area for maintaining good posture and minimizing lower back problems. The correct sit up for the test will consist of hands clasped behind the head with the fingers interlocked. Your shoulder blades must touch the mat or floor in the down position. **The score is the number of bent leg sit ups performed in 1 minute.**

Preparation:

Prepare for this test by using a progressive routine. Do as many bent leg sit ups (hands behind the head) as possible in 1 minute. At least 3 times a week, do 3 sets (3 groups of the number of repetitions you did in one minute).

SECTION 3 **ONE REPETITION MAXIMUM BENCH PRESS**

Description:

This test measures the maximum weight pushed from the bench press position, and measures the amount of force the upper body can generate. It is an important area for performing police tasks requiring upper body strength. You will be required to lie on your back with your feet on the floor or bench. You will lower the weight to touch your chest, and then return the weight to starting position. **The score is a ratio of weight pushed divided by body weight.**

Preparation:

Preparation for this test will depend upon whether you have access to weights. *If you have access to weights:* determine the maximum weight you can bench press one time. Take 60% of that poundage. This will be the training weight. You should be able to do 8-10 repetitions of that weight. Do 3 sets of 8-10 repetitions adding 2 1/2 to 5 pounds every week. *If you do not have access to weights:* exercise using pushups. Determine how many pushups you can do in one minute. At least 3 times a week, do 3 sets of the amount you can do in one minute.

SECTION 4
1.5 MILE RUN

Description:

This is a timed run that measures heart and vascular system capabilities to transport oxygen. It is an important area for performing police tasks involving stamina and endurance and will help to minimize the risk of cardiovascular problems.

The score for this test is the time in minutes and seconds.

Preparation:

Prepare for the 1.5 mile run on a gradual basis. Below is a gradual schedule that would enable you to perform a maximum effort for the 1.5 mile run. If you can advance the schedule on a weekly basis, then proceed to the next level. If you can do the distance in less time, then that should be encouraged.

| WEEK | ACTIVITY | DISTANCE | TIME | FREQUENCY |
|-------------|-----------------|-----------------|-------------|------------------|
| 1 | Walk | 1 Mile | 20'-17' | 5/week |
| 2 | Walk | 1.5 Miles | 29'-25' | 5/week |
| 3 | Walk | 2 Miles | 35'-32' | 5/week |
| 4 | Walk | 2 Miles | 30'-28' | 5/week |
| 5 | Walk/Jog | 2 Miles | 27' | 5/week |
| 6 | Walk/Jog | 2 Miles | 26' | 5/week |
| 7 | Walk/Jog | 2 Miles | 25' | 5/week |
| 8 | Walk/Jog | 2 Miles | 24' | 4/week |
| 9 | Jog | 2 Miles | 23' | 4/week |
| 10 | Jog | 2 Miles | 22' | 4/week |
| 11 | Jog | 2 Miles | 21' | 4/week |
| 12 | Jog | 2 Miles | 20' | 4/week |

SECTION 5
PERFORMANCE STANDARDS

The following chart shows the Minimum performance standards for each of the tests that make up the physical agility test:

POWER CHART

| Test | Men | | | | Women | | | |
|-------------------|-------|-------|-------|-------|-------|-------|-------|-------|
| | 20-29 | 30-39 | 40-49 | 50-59 | 20-29 | 30-39 | 40-49 | 50-59 |
| Age Group | 20-29 | 30-39 | 40-49 | 50-59 | 20-29 | 30-39 | 40-49 | 50-59 |
| Sit and Reach | 16.0 | 15.0 | 13.8 | 12.8 | 18.8 | 17.8 | 16.8 | 16.3 |
| 1-Minute Sit-Up | 37 | 34 | 28 | 23 | 31 | 24 | 19 | 13 |
| Max Bench Press % | .98 | .87 | .79 | .70 | .58 | .52 | .49 | .43 |
| 1.5 Mile Run | 13.46 | 14.31 | 15.24 | 16.21 | 16.21 | 16.52 | 17.53 | 18.44 |

BOARD OF POLICE COMMISSIONERS

POLICE OFFICER APPLICATION

INSTRUCTIONS: Fill out this application completely and accurately. If your application is made out properly it may increase your chances of employment. All statements in your application are subject to verification. **Incorrect statement(s) will bar or remove you from employment.** If writing space provided is inadequate, use the continuation sheet at the end of this application and identify additional information by question number. Use the term "DNA" ("does not apply") if the question does not apply.

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|---|--|--|---|-----------------------------------|-----------------------|
| 1. NAME (LAST) (FIRST) (MIDDLE) | | | 2. LIST ANY OTHER NAMES, ALIASES YOU HAVE USED, OR BEEN KNOWN BY (INCLUDE MAIDEN NAME, IF APPLICABLE) | | |
| 3. HOME ADDRESS (NO. STREET, CITY, STATE, ZIP CODE & COUNTY) | | 4. HOME PHONE | | 5. SOCIAL SECURITY NO. | |
| 6. WITH WHOM DO YOU LIVE AT THE ABOVE ADDRESS? LIST FULL NAMES & RELATIONSHIPS. | | | | | |
| 7. DATE OF BIRTH | | 8. PLACE OF BIRTH (CITY, STATE & ZIP CODE) | | 9. SEX | 10. HEIGHT FT. IN. |
| 11. WEIGHT | | 12. AGE | 13. COLOR OF EYES | 14. COLOR OF HAIR | |
| 15. ARE YOU A U.S. CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO | | IF "YES" <input type="checkbox"/> NATIVE BORN <input type="checkbox"/> NATURALIZED | | IF "NATURALIZED, GIVE PARTICULARS | |
| 16. LIST EVERY MEMBER OF YOUR IMMEDIATE FAMILY WHO IS STILL LIVING, INCLUDE FATHER, MOTHER, SISTERS & BROTHERS. | | | | | |
| NAME | | RELATIONSHIP | | ADDRESS | |
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ARE YOU A FULLY COMMISSIONED POLICE OFFICER? YES NO (If you answered YES, attach a copy of the certificate of completion of the Police Training Institute, or the equivalent to your application.)

EDUCATION

| 17. LIST THE VARIOUS SCHOOLS YOU HAVE ATTENDED & OTHER INFORMATION REQUESTED. | | | | | |
|--|---------------------------|----------------------------|---------------------|----|-------------------|
| NAME & ADDRESS OF SCHOOL (INCLUDE CITY, STATE & ZIP CODE) | NO. OF YEARS COMPLETED | DATES ATTENDED | GRADUATE | | AVERAGE GRADE |
| GRAMMAR SCHOOLS | | | YES | NO | |
| | | | | | |
| HIGH SCHOOLS | | | | | |
| | | | | | |
| BUSINESS COLLEGES | | | | | |
| | | | | | |
| EXTENSION OR CORRESPONDENCE COURSES | | | | | |
| | | | | | |
| 18. JUNIOR COLLEGE, COLLEGES, OR UNIVERSITIES | NO. OF YEARS COMPLETED | MAJOR OR FIELD OF STUDY | DEGREES ATTAINED | | DATES ATTENDED |
| | | | | | |
| | | | | | |
| | | | | | |
| 19. WERE YOU EVER EXPELLED OR SUSPENDED FROM ANY SCHOOL? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF "YES" EXPLAIN | | | | |
| 20. LIST OTHER FORMAL EDUCATION BEYOND HIGH SCHOOL YOU MAY HAVE INCLUDING SPECIAL TRAINING COURSES | | | | | |
| 21. LIST ANY PROFESSIONAL LICENSES OR CERTIFICATIONS YOU HOLD OR HAVE HELD | | | | | |

DRIVING HISTORY

| | | | |
|---|--|--------------------------------|---|
| 22. CAN YOU OPERATE <input type="checkbox"/> YES AN AUTOMOBILE? <input type="checkbox"/> NO | 23. DO YOU POSSESS A <input type="checkbox"/> YES VALID OPERATOR'S OR CHAUFFER'S LICENSE FROM ILLINOIS? <input type="checkbox"/> NO | IF "YES" DATE OF EXPIRATION | DRIVER'S LICENSE NO. |
| 24. HAVE YOU EVER BEEN <input type="checkbox"/> YES REFUSED AN OPERATOR'S OR CHAUFFER'S LICENSE <input type="checkbox"/> NO BY ANY STATE? | IF "YES" EXPLAIN | | HAVE YOU EVER HAD AN OPERATOR'S OR <input type="checkbox"/> YES CHAUFFER'S LICENSE IN ANY OTHER STATE? <input type="checkbox"/> NO |
| 25. WAS YOUR LICENSE EVER <input type="checkbox"/> YES SUSPENDED OR REVOKED? <input type="checkbox"/> NO | IF "YES" EXPLAIN | | |
| 26. HAS YOUR LICENSE EVER <input type="checkbox"/> YES BEEN PLACED ON PROBATION? <input type="checkbox"/> NO | IF "YES" EXPLAIN | | |

RESIDENCES

| | | | |
|--|-----------------|--|------------------------|
| 27. LIST YOUR RESIDENCES FOR THE LAST TEN YEARS, STATRING WITH YOUR PRESENT ADDRESS. | | | |
| FROM (MO & YR) | TO (MO & YR) | ADDRESS OF RESIDENCE | CITY, STATE & ZIP CODE |
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| 28. DO YOU OWN OR ARE YOU BUYING YOUR OWN HOME? <input type="checkbox"/> YES <input type="checkbox"/> NO | | 29. DO YOU OWN OR ARE YOU BUYING OTHER REAL ESTATE? <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| | | IF "YES" GIVE LOCATION | |

MILITARY SERVICE

| | | | | |
|--|--|-----------------------|---|------|
| 30. HAVE YOU EVER SERVED IN ANY MILITARY ORGANIZATION OF THE U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO | | IF "YES" WHAT BRANCH | | |
| 31. WHAT IS YOUR SERVICE SERIAL NO.? | | 32. HIGHEST RANK HELD | 33. RANK AT DISCHARGE | |
| 34. GIVE DATE & LOCATION OF ENTRANCE TO ACTIVE DUTY (CITY) & (STATE) | | | 35. LIST PERIOD(S) OF ACTIVE SERVICE FROM(DATE) TO(DATE) | |
| | | | | |
| | | | | |
| 36. WHAT TYPE OF DISCHARGE DID YOU RECEIVE (HONORABLE, DIS-HONORABLE, CONDITIONS, ETC.)? | BE EXACT | | | |
| 37. IF YOU HAD NO MILITARY SERVICE EXPLAIN | | | | |
| 38. LIST ALL DRAFT CLASSIFICATIONS YOU HAVE HAD (I.E., 1-A, ETC.) | 39. IF YOU ARE A NON-VET, LIST THE FOLLOWING | LOCAL BOARD NO. | ADDRESS, CITY, STATE & ZIP CODE | |
| 40. WERE YOU EVER CONVICTED AT A COURT-MARTIAL? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF "YES" EXPLAIN | | | |
| 41. ARE YOU NOR OR WERE YOU EVER A MEMBER OF ANY BRANCH OF THE U.S. RESERVE FORCES? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF "YES" <input type="checkbox"/> ACTIVE <input type="checkbox"/> INACTIVE | BRANCH | UNIT | RANK |
| | ADDRESS | | FROM | TO |
| 42. ARE YOU NOW OR WERE YOU EVER A MEMBER OF THE NATIONAL GUARD? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF "YES" WHAT STATE | REGIMENT | UNIT | |
| | RANK | TYPE OF DISCHARGE | FROM | TO |
| 43. LIST ANY DISCIPLINARY ACTION TAKEN AGAINST YOU IN THE NATIONAL GUARD OR RESERVE UNIT | | | | |

CRIMINAL HISTORY

| | | | | |
|---|--|-------------------------|---------------------|---------------------|
| 44. HAVE YOU EVER BEEN CONVICTED OF A CRIME? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "YES" EXPLAIN | DATE | BY WHOM (POLICE AGENCY) | CRIME CHARGED | DISPOSITION OF CASE |
| | | | | |
| | | | | |
| 45. HAVE YOU EVER BEEN PLACED ON PROBATION? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF "YES" EXPLAIN | | | |
| 46. HAVE YOU EVER BEEN REQUIRED TO PAY A FINE IN EXCESS OF \$25.00? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF "YES" EXPLAIN | | | |
| 47. HAVE YOU EVER BEEN REPORTED AS A MISSING PERSON OR AS A RUNAWAY? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF "YES" EXPLAIN DETAILS, INCLUDING JURISDICTION DATES & OUTCOME | | | |
| 48. HAVE YOU EVER BEEN FINGERPRINTED BY A POLICE AGENCY OTHER THAN FOR AN ARREST? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "YES" EXPLAIN | AGENCY | DATE | PURPOSE | |
| | | | | |
| | | | | |
| 49. LIST ALL TRAFFIC CITATIONS YOU HAVE RECEIVED. | | | | |
| LOCATION (CITY) | APPROXIMATE DATE | NATURE OF VIOLATION | DISPOSITION OF CASE | |
| | | | | |
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| 50. ARE THERE ANY WARRANTS TRAFFIC OR OTHERWISE NOW PENDING AGAINST YOU? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF "YES" EXPLAIN | | | |
| 51. HAVE YOU EVER BEEN ARRESTED FOR AN OFFENSE TO WHICH YOU HAVE PLEAD GUILTY? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF "YES" EXPLAIN DETAILS, INCLUDING JURISDICTION DATES & OUTCOME | | | |

EMPLOYMENT HISTORY

| | | | | |
|--|--------|-------------------|--------------|--------|
| 52. HAVE YOU EVER TAKEN A CIVIL SERVICE EXAM? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "YES" EXPLAIN IN DETAIL. | AGENCY | APPROX. EXAM DATE | POS. ON LIST | STATUS |
| | | | | |
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|---|------------------|
| 53. ARE YOU NOW ON ANY ELIGIBILITY LIST? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF "YES" EXPLAIN |
|---|------------------|

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|--|------------------|
| 54. WERE YOU EVER PLACED ON A CIVIL SERVICE LIST & NOT HIRED? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF "YES" EXPLAIN |
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|---|------------------|
| 55. WERE YOU EVER REJECTED FOR ANY CIVIL SERVICE POSITION? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF "YES" EXPLAIN |
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| 56. HAVE YOU EVER SUBMITTED AN APPLICATION FOR APPOINTMENT TO ANOTHER POLICE DEPARTMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO DATE: |
|--|

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|---|-------------------|-------------|-----------|----------|
| 57. HAVE YOU EVER BEEN A LAW ENFORCEMENT OFFICER OR HELD A SIMILAR POSITION? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF "YES" POSITION | DATE (FROM) | DATE (TO) | LOCATION |
| | | | | |
| | | | | |

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|---|------------------|
| 58. WERE YOU EVER DISCHARGED OR FORCED TO RESIGN BECAUSE OF MISCONDUCT OR UNSATISFACTORY SERVICE OR WHILE UNDER INVESTIGATION? <input type="checkbox"/> YES <input type="checkbox"/> NO INCLUDE NAME(S) & ADDRESSES OF EMPLOYERS | IF "YES" EXPLAIN |
| | |
| | |

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| 59. ARE YOU NOW OR HAVE YOU EVER BEEN ENGAGED IN ANY BUSINESS AS AN OWNER, PARTNER OR CORPORATE MEMBER? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF "YES" EXPLAIN |
| | |
| | |

60. LIST ALL JOBS YOU HAVE HELD FOR THE LAST TEN YEARS, INCLUDING PERIODS OF UNEMPLOYMENT. PUT YOUR PRESENT OR MOST RECENT JOB FIRST. INCLUDE MILITARY SERVICE IN PROPER TIME SEQUENCE & TEMPORARY OR PART-TIME JOBS.

| | | | | |
|---|-------------------------------|-------------|-----------|-------------------------------------|
| | EMPLOYER'S NAME | ADDRESS | | TYPE OF BUSINESS |
| 1 | NAME & TITLE OF SUPERVISOR | FROM (DATE) | TO (DATE) | XXXXXX MONTH \$XXX |
| | EXPLAIN WHAT YOUR DUTIES WERE | | | REASON FOR LEAVING |

| | | | | | |
|--|--|-------------|-----------|--|----------------------------|
| 2 | EMPLOYER'S NAME | ADDRESS | | TYPE OF BUSINESS | |
| | NAME & TITLE OF SUPERVISOR | FROM (DATE) | TO (DATE) | XXXXXXXXXX SALARY PER MONTH \$ XXX | EXACT TITLE OR POSITION |
| | EXPLAIN WHAT YOUR DUTIES WERE | | | REASON FOR LEAVING | |
| 3 | EMPLOYER'S NAME | ADDRESS | | TYPE OF BUSINESS | |
| | NAME & TITLE OF SUPERVISOR | FROM (DATE) | TO (DATE) | XXXXXXXXXX SALARY PER MONTH \$ XXX | EXACT TITLE OR POSITION |
| | EXPLAIN WHAT YOUR DUTIES WERE | | | REASON FOR LEAVING | |
| 4 | EMPLOYER'S NAME | ADDRESS | | TYPE OF BUSINESS | |
| | NAME & TITLE OF SUPERVISOR | FROM (DATE) | TO (DATE) | XXXXXXXXXX SALARY PER MONTH \$ XXX | EXACT TITLE OR POSITION |
| | EXPLAIN WHAT YOUR DUTIES WERE | | | REASON FOR LEAVING | |
| 5 | EMPLOYER'S NAME | ADDRESS | | TYPE OF BUSINESS | |
| | NAME & TITLE OF SUPERVISOR | FROM (DATE) | TO (DATE) | XXXXXXXXXX SALARY PER MONTH \$ XXX | EXACT TITLE OR POSITION |
| | EXPLAIN WHAT YOUR DUTIES WERE | | | REASON FOR LEAVING | |
| 6 | EMPLOYER'S NAME | ADDRESS | | TYPE OF BUSINESS | |
| | NAME & TITLE OF SUPERVISOR | FROM (DATE) | TO (DATE) | XXXXXXXXXX SALARY PER MONTH \$ XXX | EXACT TITLE OR POSITION |
| | EXPLAIN WHAT YOUR DUTIES WERE | | | REASON FOR LEAVING | |
| 7 | EMPLOYER'S NAME | ADDRESS | | TYPE OF BUSINESS | |
| | NAME & TITLE OF SUPERVISOR | FROM (DATE) | TO (DATE) | XXXXXXXXXX SALARY PER MONTH \$ XXX | EXACT TITLE OR POSITION |
| | EXPLAIN WHAT YOUR DUTIES WERE | | | REASON FOR LEAVING | |
| 8 | EMPLOYER'S NAME | ADDRESS | | TYPE OF BUSINESS | |
| | NAME & TITLE OF SUPERVISOR | FROM (DATE) | TO (DATE) | XXXXXXXXXX SALARY PER MONTH \$ XXX | EXACT TITLE OR POSITION |
| | EXPLAIN WHAT YOUR DUTIES WERE | | | REASON FOR LEAVING | |
| 61. INDICATE BY NUMBER ANY OF THE ABOVE EMPLOYERS WHOM YOU DO NOT WISH YOU TO CONTACT. | 61. EXPLAIN YOU REASON FOR APPLYING FOR THIS POSITION. | | | | |
| | | | | | |
| | | | | | |

CREDIT HISTORY

| 62. LIST THREE COMMERCIAL OR BUSINESS CREDIT REFERENCES (INCLUDE BANK OR CHARGE ACCOUNT, OR FIRMS YOU HAVE BORROWED MONEY FROM FOR ANY PURPOSE). | | | | | |
|--|---------------|------------------|------------------|----------------|---------|
| NAME & ADDRESS OF FIRM | | TYPE OF BUSINESS | AMOUNT | APPROX. DATE | |
| | | | | OPENED | CLOSED |
| | | | | | |
| | | | | | |
| | | | | | |
| 63. HAVE YOU EVER BEEN SUED? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | IF "YES" EXPLAIN | | |
| 64. LIST ANY OUTSTANDING DEBTS & LIST AMOUNT(S) WHETHER IN ARREARS | | | | | |
| AMT. OF ORIGINAL DEBT | AMT. NOW OWED | IN ARREARS | | AMOUNT OWED TO | |
| | | YES | NO | NAME | ADDRESS |
| \$ | \$ | | | | |
| \$ | \$ | | | | |
| \$ | \$ | | | | |
| \$ | \$ | | | | |
| \$ | \$ | | | | |
| 65. HAVE YOU EVER FILED FOR BANKRUPTCY? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | IF "YES" EXPLAIN | | |

ACQUAINTANCES

| | | | | | |
|--|------------------|-----------------------------------|---------|----------------|--|
| 66. FILL IN BELOW THE NAMES OF THREE ADULTS, NOT RELATED TO YOU & NOT FORMER EMPLOYERS OR REFERENCES, WHO ARE FRIENDS, FELLOW STUDENTS, OR FELLOW WORKERS. NAMES LISTED SHOULD BE THOSE PERSONS WHO HAVE SEEN YOU FREQUENTLY DURING THE PAST YEAR. | | | | | |
| 1 | NAME | | ADDRESS | | HOME PHONE |
| | BUSINESS ADDRESS | BUSINESS OCCUPATION OR PROFESSION | | BUSINESS PHONE | WHAT CAPACITY DO YOU KNOW THIS PERSON? |
| 2 | NAME | | ADDRESS | | HOME PHONE |
| | BUSINESS ADDRESS | BUSINESS OCCUPATION OR PROFESSION | | BUSINESS PHONE | WHAT CAPACITY DO YOU KNOW THIS PERSON? |
| 3 | NAME | | ADDRESS | | HOME PHONE |
| | BUSINESS ADDRESS | BUSINESS OCCUPATION OR PROFESSION | | BUSINESS PHONE | WHAT CAPACITY DO YOU KNOW THIS PERSON? |

REFERENCES

| | | | | | |
|--|------------------|-----------------------------------|---------|----------------|-------------|
| 67. FILL IN BELOW THE NAMES OF FIVE ADULTS NOT RELATED TO YOU & NOT FORMER EMPLOYERS, WHO HAVE KNOWN YOU FOR A PERIOD, PREFEREABLY MORE THAN FIVE YEARS. ALL PERSONS TO WHOM YOU REFER WILL BE ASKED TO APPRAISE YOUR CHARACTER, ABILITY, EXPERIENCE, PERSONALITY & OTHER QUALITIES. | | | | | |
| 1 | NAME | | ADDRESS | | HOME PHONE |
| | BUSINESS ADDRESS | BUSINESS OCCUPATION OR PROFESSION | | BUSINESS PHONE | YEARS KNOWN |
| 2 | NAME | | ADDRESS | | HOME PHONE |
| | BUSINESS ADDRESS | BUSINESS OCCUPATION OR PROFESSION | | BUSINESS PHONE | YEARS KNOWN |

| | | | | |
|---|------------------|-----------------------------------|----------------|-------------|
| 3 | NAME | ADDRESS | HOME PHONE | |
| | BUSINESS ADDRESS | BUSINESS OCCUPATION OR PROFESSION | BUSINESS PHONE | YEARS KNOWN |
| 4 | NAME | ADDRESS | HOME PHONE | |
| | BUSINESS ADDRESS | BUSINESS OCCUPATION OR PROFESSION | BUSINESS PHONE | YEARS KNOWN |
| 5 | NAME | ADDRESS | HOME PHONE | |
| | BUSINESS ADDRESS | BUSINESS OCCUPATION OR PROFESSION | BUSINESS PHONE | YEARS KNOWN |

| | | | |
|--|---------|------------|--------------|
| 68. PERSON(S) TO NOTIFY IN CASE OF EMERGENCY | | | |
| NAME | ADDRESS | HOME PHONE | RELATIONSHIP |
| NAME | ADDRESS | HOME PHONE | RELATIONSHIP |

I hereby certify that there are no willful misrepresentations, or falsifications in this application, and all of my answers are true and correct to the best of my knowledge and belief.

Date: _____

Signature in Full

Subscribed and Sworn to
before me this ____ day
of _____,
20__.

Notary Public

THUMBPRINT

NOTE: Should you successfully complete all other phases of the examination process, you will be subjected to a thorough medical examination prior to appointment. That medical examination may include testing for drugs/narcotics, communicable diseases and alcohol abuse. You will be required to give a thorough medical history and may be required to meet vision standards established by the City of Washington.



