

Indianola Police Department



Employment Application

Applicant Name: _____

Deadline to Return Application: 12/01/2009

Mail application and release form to:

Indianola Police Dept.
P.O. Box 299
Indianola, Ia 50125



Read these instructions carefully before proceeding.
Failure to follow instructions will result in disqualification!

IT IS ESSENTIAL THAT ALL INFORMATION BE CORRECT AND COMPLETE!

Your application will be used as a basis for a background investigation that will determine your qualifications for a position with the Indianola Police Department.

GENERAL REQUIREMENTS:

To be a police officer in the State of Iowa, a person must be certified by the Iowa Law Enforcement Academy (ILEA). The Iowa legislators have given ILEA authority “to set standards for the law enforcement service” in the State of Iowa. If a person cannot or will not meet these standards, they cannot be certified. Local jurisdictions may use stricter criteria than ILEA to select police officer candidates. A detailed explanation for the minimum standards for Iowa Law Enforcement officers can be found in the “Code of Iowa,” Chapters 80B & 400, plus the “Iowa Law Enforcement Academy’s Administrative Rules.” Some of the criteria are as follows.

All applicants must:

- Be able to perform the essential functions of the job with or without reasonable accommodations.
- Have reached the age of 18 years by the established date of the written examination (Retirement) All Indianola full time officers become members of the Municipal Fire and Police Retirement System of Iowa. Mandatory retirement age is 65. (See Chapter 411, “Code of Iowa”)
- Be a graduate of an accredited high school, or possess an equivalency certificate (GED).
- Be a citizen of the United States and a resident of the State of Iowa or intends to become a resident upon being employed.
- Is not by reason of conscience or belief opposed to the use of force when appropriate or necessary to fulfill his/her duties.
- Be able to speak, read, and write the English language.
- Not be addicted to alcohol or drugs. The City of Indianola has a vital interest in maintaining safe, healthful, and efficient working conditions for its employees. Being under the influence of a drug or alcohol poses serious safety and health risks, not only to the user, but to all those who work with or come into contact with the user. The possession, use, or sale of an illegal drug or alcohol in the workplace poses unacceptable risks to the safe, healthful, and efficient operations.
- Be of good moral character. (This implies that the conduct or character of any applicant must be such that his/her job performance as a police officer would not be impeded in any manner.)
- Not have been convicted of a felony or a crime involving moral turpitude. Moral turpitude is defined as “an act of baseness, vileness, or depravity in the private and social duties that a person owes to another person, or to society in general, contrary to the accepted and customary rule of right and duty between person and person.” It might include “justice, honesty, or good morals.” It might include “income tax evasion, perjury, assault, theft, indecent exposure, sex crimes, conspiracy to commit a crime, domestic abuse, stalking illegal drug sales, or any offense in which a weapon was used in the commission of the crime.
- Must have a valid Iowa driver’s or chauffeurs license at the time of employment.

Application Instructions:

The ability to follow directions and complete paperwork properly is an important responsibility of a police officer.

1. Your application should be hand printed legibly in ink.
2. Answer ALL questions completely. If a question does not apply to you, enter "N/A" in the space provided.
3. Avoid errors by reading the directions carefully before making entries on the form. Be sure your information is correct and in sequence before you begin.
4. YOU are responsible for obtaining COMPLETE and VALID addresses (including zip codes). You are also responsible for providing valid phone numbers where requested.
5. If there is insufficient space on the form, attach extra sheet. Be sure to reference the relevant section and question on any supplement pages or attachments.
6. If you have any questions concerning this form, please contact the police department at 515-961-9400.
7. The attached "Authorization for Release of Information" form must be completed, signed.
8. Copies of the following documents should be included with your application and forwarded to the Indianola Police Department before the application due date:
 - Birth Certificate
 - Photocopy of your driver's license
 - Photocopy of your High School diploma
 - College transcripts/diplomas
 - Photocopy of DD214 (military discharge form if applicable)
 - Photocopy of Naturalization papers (if applicable)
 - Photocopy of Marriage Certificate
9. Your failure to properly complete your application may result in the rejection of the application.

Be sure to return your application by the application date.

Selection Process

- Physical Agility Test will be notified of testing date via mail or email
- Written Exam will be notified of exam date via mail or email
- Civil Service Interview
- Certification of top 10 applicants on list by Civil Service Commission
- Conditional Job Offer
- Background Questionnaire Packet
- Background Investigation / Polygraph Examination
- Oral Interview Board
- Psychological Screening
- Medical (Physical) Exam
- Final Job Offer (when position available)
- Uniform Fitting
- Academy (13 weeks)
- Field Training Program

Benefits/Work Conditions

- Attractive Salary Range
- Paid Vacation
- Holiday's worked Bonus Pay (compensated at a rate equal to 2 X their normal hourly rate of pay for each hour actually worked, such pay will be in addition to the usual 8 hours of Holiday pay)
- Uniform Allowance
- Paid Training
- Health and Prescription & Life Insurance
- Health Reimbursement Arrangement (HRA) for medical, dental, vision expenses incurred by employee and his/her dependants eligible for health insurance coverage.
- Tuition Reimbursement
- Retirement plan
- Sick Leave
- The City will pay a portion of the monthly health club membership fee – for family for nine months of the calendar year.

Police work is 24 hour a day, 365 day a year occupation. Officers work nights, weekends and holidays.

Iowa Law Enforcement Physical Agility Standards					
Minimal Physical Fitness Performance chart					
Males			Age		
Test	20-29	30-39	40-49	50-59	60+
Sit & Reach	16.5	15.5	14.3	13.3	12.5
1 Minute Sit-up	38	35	29	24	19
1 Minute Push-up	29	24	18	13	10
1.5 Mile Run	12:51	13:36	14:29	15:26	16:43
Females			Age		
Test	20-29	30-39	40-49	50-59	60 +
Sit & Reach	19.3	18.3	17.3	16.8	15.5
1 Minute Sit-up	32	25	20	14	6
1 Minute Push-up	15	11	9	* 12	* 5
1.5 Mile Run	15:26	15:57	16:58	17:54	18:44

* Females in excess of 49 years of age may do pushups on their knees.

1. SIT AND REACH TEST:

This is a measure of the flexibility of the lower back and upper leg area. It is an important area of 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 a sitting position. The score is in inches reached on a yardstick fastened to an apparatus with 15 inches being at the toes and the one-inch mark closest the body.



2. 1 MINUTE PUSH UP TEST:

This test requires you to push your own weight off the floor. Women may do the push-up on their knees. This measures the amount of force the upper body can generate and is an important area for performing police tasks requiring upper body strength. The number of push-ups performed in one minute calculates the score.



3. 1 MINUTE SIT UP TEST:

This is a measure of the muscular endurance of the abdominal muscles. It is an important area for performing police tasks that may involve the use of force and is an important area for maintaining good posture and minimizing lower back problems. The score is in number of bent leg sit-ups performed in 1 minute.



4. 1.5 MILE RUN

This is a timed run to measure the heart and vascular system's capability to transport oxygen. It is an important area for performing police tasks involving stamina and endurance and to minimize the risk of cardiovascular problems. The score is in minutes and seconds.



HOW DOES ONE PREPARE FOR THE TEST?

1. Preparing for the sit and reach test.
Performing sitting type of stretching exercises daily will increase this area. There are two 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.



2. Preparing for the sit up test:

The progressive routine is to do as many bent leg sit-ups (hand behind the head) as possible in 1 minute. At least 3 times a week do 3 sets (3 groups of the number of repetitions one did in 1 minute)

3. Preparing for the push up test:

If one has access to weights, determine the maximum weight one can bench press one time. Take 60% of that poundage. This will be the training weight. One should be able to do 8-10 repetitions of that weight. Do 3 sets of 8-10 repetitions adding 2.5 lbs. Every week.

If one does not have weight equipment, then the push up exercise can be utilized. Determine how many pushups one can do in one minute. At least 3 times a week do 3 sets of the amount one can do in one minute.

4. Preparing for the 1.5 mile run:

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

Week	Activity	Distance	Time/Minutes	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



Indianola Police Department Application for Employment

Date: _____ Position Applying For: _____

Last Name: _____ First Name: _____ Middle: _____

Race: _____ Sex: _____ Date of Birth: _____ Place of Birth: _____

Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____ Soc.Sec. _____

Alias/maiden or other names used: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email Address: _____ @ _____

Scars or Tattoos: _____ U.S. Citizen? _____ Yes _____ No

Current Address: _____ City _____ State _____ Zip _____

Family Information

Is **Father** Living ___yes ___no? If no, list date and cause of death: _____

Father's Full Name: _____ Date of Birth: _____

Father's Complete Address: _____ Phone Number: _____

Father's Employer: _____ Position held: _____

Is **Mother** Living ___yes ___no? If no, list date and cause of death: _____

Mother's Full Name: _____ Date of Birth: _____

Mother's Complete Address: _____ Phone Number: _____

Mother's Employer: _____ Position held: _____

If you have **stepparents**, list their name, date of birth, address and phone number(s) below:

Are you? Married () Single () Separated () Divorced () Widowed ()

Spouse's Full (Maiden) Name: _____ Date of Birth: _____

Spouse's Address if different from yours:

Spouse's Cell Phone Number: _____ Email address: _____ @ _____

Spouse's Employer: _____ Position Held: _____

Spouse's Employer Address: _____ Phone Number: _____

Date of Marriage: _____ Location: _____

If not married, with whom do you live? _____ Date of Birth: _____

Roommate's Employer: _____ Address: _____ Phone#: _____

List all **former spouses** with full name, date of birth, marriage dates, and current address and phone numbers: _____

List all **children and stepchildren:**

Full Name: *Date of Birth:* *Address:* *Phone Number:*

Are you required to pay **child support**? _____ yes _____ no If so, how much? _____ per _____

Who are payments made to? _____ Are you delinquent? _____ yes _____ no

Please list your **siblings** (brothers, sisters, half brothers, half sisters, step brothers, step sisters):

Relation: *Name:* *Date of Birth:* *Address:* *Phone Number:*

Contacts with Law Enforcement : Drivers License: _____ **State Issued:** _____

List all Traffic Citations regardless whether or not you were convicted:

<i>Charge</i>	<i>Agency</i>	<i>City</i>	<i>State</i>	<i>Disposition</i>	<i>Date</i>

List ALL arrests including juvenile arrests regardless of whether or not you were convicted:

<i>Charge</i>	<i>Agency</i>	<i>City</i>	<i>State</i>	<i>Disposition</i>	<i>Date</i>

Explain any other times you have been detained or questioned by police other than traffic violations:

List ALL law enforcement agencies with whom you have applied (City, County, State Federal):

<i>Agency name</i>	<i>City/State</i>	<i>Date of Application</i>	<i>Position</i>	<i>Status</i>

Military Service

Have you ever been in the military or National Guard? ____yes ____no Type of Discharge:_____

Branch:_____ Enlisted Date:_____ Discharge Date:_____ Rank:_____

Have you served in the military during time of conflict? _____

Financial Information

List all current financial obligations:

<i>Creditor</i>	<i>Balance</i>	<i>Monthly Payments</i>	<i>Delinquent (yes/no)</i>

Have you ever filed bankruptcy? ____yes ____no If yes, date _____

Do you own or rent your home? _____ Landlord's name and phone # if renting:_____

Please list your vehicles:

<i>Year</i>	<i>Make</i>	<i>Model</i>	<i>Color</i>	<i>License Plate #</i>	<i>State</i>

Education

High School Name: _____ Location(city/State) _____

Dates Attended: _____ Did you graduate? _____ yes _____ no Year _____

Colleges and Trade Schools:

<i>Name of School</i>	<i>Location</i>	<i>Dates Attended</i>	<i>Total Hours</i>	<i>Degree earned</i>

Include college transcript when returning application.

Employment

Start with your current employer and list all employers since you began working. It is your responsibility to provide valid phone numbers and complete addresses for each employer.

Employer Name: _____ Phone Number: _____

Start Date: _____ End Date: _____ Supervisor's Name: _____

Position held and duties: _____

Employer's address: _____ City _____ State _____ Zip _____

Salary: _____ Reason for Leaving: _____

Employer Name: _____ Phone Number: _____

Start Date: _____ End Date: _____ Supervisor's Name: _____

Position held and duties: _____

Employer's address: _____ City _____ State _____ Zip _____

Salary: _____ Reason for Leaving: _____

Employer Name: _____ Phone Number: _____

Start Date: _____ End Date: _____ Supervisor's Name: _____

Position held and duties: _____

Employer's address: _____ City _____ State _____ Zip _____

Salary: _____ Reason for Leaving: _____

Employer Name: _____ Phone Number: _____

Start Date: _____ End Date: _____ Supervisor's Name: _____

Position held and duties: _____

Employer's address: _____ City _____ State _____ Zip _____

Salary: _____ Reason for Leaving: _____

Residence History

List all locations where you have actually lived, regardless of period of time for the past ten(10) years beginning with your current address:

<i>From</i>	<i>To</i>	<i>Address</i>	<i>City/State</i>	<i>Zip</i>	<i>Landlord Name & Phone #</i>

References

List character references that personally know you. Do not list employers or supervisors. Do not list people that do not regularly interact with you.

<i>From</i>	<i>To</i>	<i>Address</i>	<i>City/State</i>	<i>Zip</i>	<i>Name & Phone #</i>



INDIANOLA POLICE DEPARTMENT

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I, _____, DO HEREBY AUTHORIZE a review of and full disclosure of all records concerning myself whether said records are of public, private or confidential nature.

The intent of this authorization is to give my consent for full an complete disclosure of records of educational institutions; financial or credit institutions, including records of loans, the records of commercial or retail credit agencies (including credit reports and/or ratings), and other financial statements of records whenever filed; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me and the recollections of attorneys at law, or of other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had an interest.

I understand that any information obtained by a personal history background investigation, including polygraph examination that is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

I UNDERSTAND THAT PROVIDING FALSE OR MISLEADING INFORMATION IS GROUNDS FOR EXCLUSION FROM THE SELECTION PROCESS, OR DISCHARGE IF DISCOVERED SUBSEQUENT TO EMPLOYMENT.

A photocopy of this release for information will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

I have read and fully understand the contents of the AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION.

Signature

Date