



Nokomis Police Department

22 South Cedar St., Nokomis, IL 62075
(217)563-7138 Fax: (217)563-7002



POLICE OFFICER EMPLOYMENT APPLICATION PACKET

Completion of the Police Officer Employment Application Packet is the first step in the employment process. The information on these forms will be used to judge your qualifications for the position of police officer. Read all of the questions carefully and answer all questions completely and honestly.

You must complete this application packet yourself. Type or print the forms using a ball point pen. Do not leave any blank spaces. If a question does not apply, write "DNA" in the answer space. All information in this application is subject to verification. Any false, misleading, or incomplete information will result in your application being eliminated from consideration.

This packet contains the following forms:

- Police Officer Employment Application
- Waiver of Liability and Release Form
- Credit Information Release Form
- Pre-employment Drug Screen Consent Form
- Police Officer Position Description

Return the entire packet to the address below: *(Please do not staple.)*

**Nokomis City Hall
22 South Cedar Street
Nokomis, IL 62075**

Office Use Only: Date received _____



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POLICE OFFICER EMPLOYMENT APPLICATION

Instructions

You must complete this application yourself. It may be printed in ink or typed. Your ability to completely and honestly complete this application is part of the process to determine your suitability for employment. If you intentionally leave out any information that might be detrimental to obtaining a job, such as past drug use or other crimes, it will automatically eliminate you from consideration for employment. The fact that you may have used drugs, committed a theft or another illegal act will not automatically eliminate you, but the omission of it during the application process will. Once submitted, this application becomes the property of the City of Nokomis

Basic Personal Information

Type of employment desired: Full-Time Part-Time Auxiliary Police

Name: _____
Last First Middle (Full)

Please list any other names that you have used: _____

Home Address: _____
Street City State Zip

Social Security Number: _____ E-mail address: _____

Telephone: _____
Home Number Daytime Number Cell Number

Driver's License: _____
Number State Type

Date of Birth: _____ Place of Birth: _____
City State County

Eligibility

1. Are you at least 21 years of age? Yes No

2. Do you have a legal right to work in the United States? U.S. Citizen

3. Are you a licensed peace officer in the State of Illinois? Yes No

4. If yes, where and when did you obtain your license? _____
POST Training Academy or Department

_____ *Address City State Zip Date*

5. Has your IL peace officer's license ever been suspended? Yes No

6. If yes, explain the circumstances on a separate sheet.

7. Are you a commissioned/licensed peace officer in another state of the U.S.? Yes No

8. If yes, in which state did you receive your commission/license? _____

9. If Yes, when and where did you obtain your license? _____

POST Training Academy or Department

Address

City

State

Zip

Date

10. Have you applied for a position with the City before? Yes No

11. If yes, when and previous position(s) applied for: _____

Military Service

Please make copies of all applicable service records including any discharge papers and attach to this application.

Branch: _____ Serial Number: _____

Date of Service: _____ to _____ Reserve Status: _____

Type of discharge: _____ If not honorable, explain: _____

Grade and duty assignment at discharge/separation: _____

Are you registered for the Selective Service? Yes No

Are you a member of the Reserves or National Guard? Yes No

If yes, give unit, location, grade and duty assignment: _____

Unit

Location

Grade

Duty Assignment

Education

Please complete the information that applies and attach copies of your diplomas or copies of your course schedule and grades to the application.

If you did not complete high school, do you have a GED? Yes No

SCHOOL NAME

**ADDRESS,
PHONE NUMBER**

**GRADUATE
Yes/No Dates Enrolled**

**COURSE OF
STUDY/MAJOR**

<i>High School</i>			
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<i>College/Univ.</i>			
<i>Graduate School</i>			
<i>Other</i>			

Specialized Skills and Training

Do you speak another language other than English? Yes No Fluent? Yes No

If yes, please list: _____

Briefly list any computer skills you have. If you have copies of any certificates for computer training you have received, please attach them to the application: _____

Please list any social internet sites (Facebook, MySpace, personal blogs) that you have an active or past account with: _____

Briefly list any training or skills, including firearms that would be of assistance in the job you are applying for. If you have any copies of certificates for any training, please attach them to the application: _____

Personal History

1. Do you know of any reason you could not pass a background check? Yes No

2. Have you ever been fired or asked to resign from a job? Yes No

3. Have you ever received disciplinary action from an employer? Yes No

4. Have you ever stolen from an employer? Yes No

5. Have you ever committed a crime for which you were not arrested? Yes No

6. Have you ever assisted someone in committing a crime? Yes No

7. Have you ever falsified a police report? Yes No

8. Have you ever accepted money not to report a crime? Yes No

9. Have you ever slept on the job? ___Yes ___No
10. Has any driver's license issued to you ever been suspended or revoked? ___Yes ___No
11. Have you ever used, sold, or otherwise handled in an illegal manner any
Controlled substance? ___Yes ___No
12. Have you ever been bonded? ___Yes ___No
13. Have you ever been refused bond? ___Yes ___No

If you answered yes to any of the questions listed above, please write a brief explanation for that question on a separate sheet. List the question number. If you are interviewed, you will be asked about any "yes" answers. Any "yes" answers will be closely examined during a background check. A "yes" answer does not automatically eliminate you from consideration for employment. Your omission of these facts will automatically eliminate you from consideration.

Traffic, Civil Court and Criminal Record

Please list your history of any traffic citations, any civil court actions in which you were or are a defendant, any arrests, convictions, and court actions. If additional space is needed, list on a separate sheet.

	<i>Type of Case</i>	<i>Jurisdiction</i>	<i>City, State</i>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____

Financial Status

List all creditors or persons to whom you are financially obligated. If additional space is needed, list on a separate sheet:

NAME	ADDRESS	BALANCE	MONTHLY PAYMENT

Have you every declared bankruptcy? ___Yes ___No

If yes, give date and circumstances: _____

Employment History

NOTICE: Start with your current job, if employed, and list your past employment in reverse order. Include all employment from high school to the present. Account for any time that you were unemployed by stating the nature of your activities. If additional space is needed, list on a separate sheet.

Company: _____ Position: _____ FT PT
Address: _____ City: _____ State: _____ Zip: _____
Dates from _____ to _____
Supervisor's Name: _____ Telephone No: _____
Job Duties: _____
Reason for leaving: _____

Company: _____ Position: _____ FT PT
Address: _____ City: _____ State: _____ Zip: _____
Dates from _____ to _____
Supervisor's Name: _____ Telephone No: _____
Job Duties: _____
Reason for leaving: _____

Company: _____ Position: _____ FT PT
Address: _____ City: _____ State: _____ Zip: _____
Dates from _____ to _____
Supervisor's Name: _____ Telephone No: _____
Job Duties: _____
Reason for leaving: _____

Company: _____ Position: _____ FT PT
Address: _____ City: _____ State: _____ Zip: _____
Dates from _____ to _____
Supervisor's Name: _____ Telephone No: _____
Job Duties: _____
Reason for leaving: _____

Company: _____ Position: _____ FT PT
Address: _____ City: _____ State: _____ Zip: _____
Dates from _____ to _____
Supervisor's Name: _____ Telephone No: _____
Job Duties: _____
Reason for leaving: _____

Please Read Carefully Before Signing This Application

I declare that the foregoing statements are true and correct to the best of my knowledge and belief. I realize that falsification of any information on this application is grounds for disqualification. I further understand that any misrepresentation or omission of facts upon this application will be sufficient cause for cancellation and/or separation from City service if I have been employed.

Applicant Signature: _____ Date: _____

The Nokomis Police Department tests applicants at least once each year or as needed to fill vacancies. This is what will happen with our application.

1. Your application is reviewed to ensure you meet the minimum qualifications for a police officer position and for accuracy, legibility and completeness.
2. If the application is accepted, you will receive a letter notifying you of acceptance. Letters are not sent for rejected applications.
3. Your application will be placed on file until a test is scheduled.
4. All applicants on file will be notified by mail of the next test date.
5. Failure to appear on the scheduled test date disqualifies the applicant and their application will be discarded. You must submit a new application for the next testing period.



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WAIVER OF LIABILITY AND RELEASE FORM

In consideration of the Nokomis Police Department and the City of Nokomis, Illinois, hereinafter referred to as the Agency, processing my application of employment, I, _____ herby Irrevocably agree to the following terms and conditions: *Full Name (typed or printed)*

1. The term "background investigation" as used in this document refers to any and all information and sources of information that the Agency, in its sole discretion, may deem necessary to obtain or contact, to determine my fitness as a candidate of employment with the Agency.
2. I hereby release from liability and promise to hold harmless under any and all possible causes of legal action, any officer, agent, or employee of the Agency who my conduct my background investigation.
3. I hereby release from liability and promise to hold harmless under any and all possible causes of legal action, any and all person and entities who shall furnish any information or opinions to the officers, agents, or employees of the Agency who conduct my background investigation.
4. I authorize any person or entity contacted by the Agency's officers, agents, or employees during the course of my background investigation, to furnish such officer, agents, or employees any information, opinions they may have, and hereby expressly waive any and all legal privileges, the clergyman – penitent privilege, the husband-wife privilege, and the accountant – client privilege.
5. I hereby release from liability and promise to hold harmless, under any and all possible causes of legal action, the political subdivision, the Agency or any of its officers, agents or employees for any statements, acts or omissions in the course of my background check.
6. I expressly waive all of my legal rights and causes of action to the extent that the Agency background check may violate or infringe upon these legal rights and causes of action.
7. I expressly agree that I will never, under any circumstances, attempt to obtain the results of my background investigation as conducted by the Agency, realizing such information must of necessity remain confidential.

DO NOT SIGN BEFORE READING

This release from liability given by me to the political division, the Agency, its officers, agents and employees, and all others as mentions above, shall apply to my right of action of any nature whatsoever that might accrue to me, my heirs, or my personal representative.

Date: _____ Signature of Applicant: _____

Date of Birth: _____ Social Security Number: _____

Driver's License Number and State: _____

Date: _____ Witnessed by: _____



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CREDIT INFORMATION RELEASE FORM

Consumer Report Disclosure

By this document, the City of Nokomis discloses to you that the consumer report may be obtained for employment purposes as part of the pre-employment background investigation and at any time during your employment. Please sign below to signify receipt of the foregoing disclosure.

Applicant Full Name (typed or printed)

Applicant Signature

Date

Witness Signature

Date

Consumer Report Authorization

This document shall authorize shall authorize the procurement of a consumer report by the City of Nokomis as part of the pre-employment background investigation. If hired, this authorization shall remain on file and shall serve as an ongoing authorization for the City of Nokomis to procure consumer reports any time during my employment period.

Applicant Full Name (typed or printed)

Applicant Signature

Date

Witness Signature

Date



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PRE-EMPLOYMENT DRUG SCREEN CONSENT

- A. I, _____, as an applicant of the City of Nokomis, Illinois
Applicant Full Name (typed or printed)
consent to allow my blood, breath and/or urine to be tested for drugs. I further consent to allow the results of such testing to be released to the City of Nokomis, Illinois or its authorized agents or representatives.
2. I hereby release the City of Nokomis and its employees from any action that may arise out of results of such tests or information being released to the City of Nokomis, Illinois.
3. I understand that if I fail to sign and return this consent to the City of Nokomis, Illinois, my application will no longer be considered. I understand that if I test positive for any illegal substance, any offer of employment I have received will be withdrawn.

Applicant Signature

Date

Witness Signature

Date



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POLICE OFFICER POSITION DESCRIPTION

Each applicant is required to review the Position Description for Police Officer. By signing this form you certify that you are aware of and capable of performing all of the requirements of the position of Police Officer with the Nokomis Police Department.

ESSENTIAL FUNCTIONS

1. Community Patrolling Activities

- A. Serves as a liaison officer within the community responding to non-criminal public concerns assuring for safety and best public relations for the city.
- B. Represents the department in continual interaction with various other social service agencies to combine all resources assuring for the best service to the community.
- C. Establishes and maintains communication by the frequent use of personal contact with the community assuring for the best public relations for the city.

2. Patrol Related Activities

- A. Attends daily briefing and obtains assignment assuring for professionalism.
- B. Assists with patrolling the city, as needed and conducts checks and monitors progress within the city.
- C. Responds appropriately to notification of incident/accident reports assuring for timeliness, professionalism and for safety.
- D. Completes reports and submits to supervisor as required, assuring for timeliness and accuracy.
- E. Looks for law violations that require action. Informs appropriate individual or takes action as appropriate. Does necessary follow-up as required.
- F. Determines when traffic stops for motor vehicle code violations are necessary and takes appropriate action.
- G. Responds to requests from immediate supervisor in an accurate, complete and timely manner.

3. Requests for Service Activities

- A. Receives assignments and responds as requested, assuring for professionalism and the best public relations for the city.
- B. Completes the required documentation of assignments as necessary assuring for accuracy and timeliness.
- C. Responds to radio announced incidents, makes a determination regarding the emergency or non-emergency nature of the incident. Coordinates with other units as needed. Prioritizes calls based on importance.
- D. Responds appropriately and notifies dispatcher of arrival on scene. Takes appropriate enforcement or control action as required assuring that department procedures are followed and assures for officer and public safety.
- E. Notifies dispatcher of status and begins investigation of offense.
- F. Locates, gathers and preserves possible evidence and maintains chain of custody in accordance with department policies.
- G. Completes investigation, makes determination regarding enforcement action required and completes reports and documentation as required for timeliness and accuracy.



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H. If needed, makes arrest and handles prisoners assuring for officer and public safety and assuring that department procedures are followed.

I. Conducts and completes any required follow-up activities.

4. Other Patrol Activities

A. Conducts nuisance violations and parking enforcement activities assuring for safety, professionalism and the best public relations for the city.

B. Maintains an awareness of persons, who have outstanding warrants, maintains vigilance for such persons and serves warrants as required assuring for safety and professionalism, and for following prescribed polices and procedures.

C. Assists with emergency animal control and animal related complaints.

D. Responds to requests for assistance from other agencies assuring for professionalism and for adherence to department policies and procedures.

E. Maintains and safeguards vehicles and other department issues supplies and equipment.

F. Learns and maintains an awareness of all applicable department practices, policies, procedures laws and rules.

G. Learns the geography and locations within the city.

H. Spots trouble areas for the city utilities (water leaks, traffic light problems, etc.)

I. If necessary, acts as supervisor when the sergeant is absent.

5. Jail Related Duties

A. Present during booking of prisoners assuring that the laws, policies and regulations are followed and the safety of self, the prisoner and others is maintained. Enters all information into the appropriate data bases.

B. Completes all required documentation in accordance with department procedures (fingerprinting, property inventory, photographing, etc.)

C. Files prisoner information in the appropriate location assuring for accuracy.

6. Training and Court Duties

A. Attends training and continuing education to maintain certifications.

B. Develops training sessions for the police department personnel based on specialization areas.

C. Prepares documents and evidence for court proceedings when necessary.

D. Testifies and presents evidence before the court when subpoena received.

E. Follows orders of the judge pertaining to the behavior in court and disposition of prisoners.

This job description in no way states or implies that these are the only duties to be performed by the employee occupying the position. Employees will be required to follow any other job-related instructions and to perform any other job-related duties as assigned by their supervisor; subject to reasonable accommodations.

WORK ENVIRONMENT

- Above average accessibility to all work sites required for the position.
- Extreme exposure to weather and temperature extremes.
- Average exposure to chemical and fumes.
- Average exposure to heights.
- Above average exposure to work safety hazards.
- Average amount of overtime/extended work hours required.
- Above average exposure to dust.
- Above average exposure to loud noises.

- Above average exposure to darkness.
- Above average exposure to cramped spaces.

PHYSICAL EFFORT

- Above normal physical mobility: movement from place to place on the job, considering distance and speed.
- Above normal physical agility: ability to maneuver body while in place.
- Normal physical strength to handle office materials.
- Above normal physical strength to handle 150 lb. objects, considering frequency.
- Normal dexterity of hands and fingers.
- Normal physical balance: Ability to maintain balance and physical control.
- Normal coordination, including eye/hand, hand/foot, etc.
- Above normal endurance.

KNOWLEDGE REQUIREMENTS

- Completed high school diploma or equivalent.
- Valid driver's license.
- Completed basic law enforcement academy training.
- Must be at least 21 years of age, US citizen or authorized to work in the US.
- Non-convicted felon.
- POST certification.

MENTAL EFFORT

- Normal concentration/intensity: prolonged mental effort with limited opportunity for breaks.
- Average memory, considering the amount and type of information.
- Above normal complexity of decision making.
- Normal time pressure of decision making.
- Normal analytical thinking.
- Normal conceptual thinking.

COMMUNICATION

- Above-average verbal communication.
- Above-average written communication.
- Above-average non-verbal communication.

SENSORY ABILITIES

- Normal ability to see.
- Normal ability to distinguish colors.
- Normal ability to hear.
- Normal ability to smell.
- Normal ability to touch.

By signing this form you certify that you are capable of performing all of the requirements of the position of Police Officer with the Nokomis Police Department.

Applicant Signature

Date

Witness Signature

Date



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WAIVER AND RELEASE OF LIABILITY

In consideration of the granting of my request to be permitted to take the City of Nokomis examinations and particularly that portion thereof known as the P.O.W.E.R. Test/physical agility test/auxiliary agility test. I hereby waive any claim for injuries to my person that may arise out of my taking and participating in P.O.W.E.R. Tests/physical agility test/auxiliary agility test and administered by the City of Nokomis. As such applicant I undertake to assume the risk of all dangerous conditions, which may exist on the premises where the tests are administered or on the equipment or facilities used, and waive notice of the existence of such conditions and rely on my inspection of the same.

In further consideration of my being permitted to take the P.O.W.E.R. Tests/physical agility test/auxiliary agility test, I hereby release the City of Nokomis, all its employees and agents, and the institution where the tests are given, its officers and employees from any claim which I may have of any nature whatsoever and for any injuries to my person or damage to my property while taking said tests.

I have read the foregoing and understand every word of this Release and Waiver.

AGREED TO AND ACCEPTED this _____ day of _____, 20_____.

Name

Address

City, State, Zip

