



EMPLOYEE APPLICATION PACKET

Vinton Police Department

310 A Avenue

Vinton, IA 52349

Phone: (319) 472-2321

<http://cityofvinton.org/police-department>

The Employee Application Packet is required of all paid and volunteer Department applicants and includes the following parts:

Part A: Employment Application

Part B: Authorization for Release of Information

Part C: Pre-Employment Questionnaire

Part D: Physical Self-Assessment Questionnaire (Only required for regular and reserve officer applicants)

To be considered for employment, **you must complete all sections** of each part of the application packet. Applicants submitting incomplete application packets will not be included in the selection process. The information you provide will be used in the background investigation to determine your suitability for a position with the Vinton Police Department.

- You must respond to all items and questions. If a question does not apply to you, write "N/A" (not applicable) in the space provided for your response.
- All responses must be typewritten or printed neatly in blue or black ink.
- If you need more space for any response, attach additional pages and include the section number that it refers to.
- Send the completed form to the Vinton Police Department.

In addition to completing the application packet, the following documents must be provided by the applicant before a final offer of employment may be made:

- Copy of high school diploma or GED or transcripts.
- Copy of college degree, certificate program, or grade transcripts, if applicable.
- Copy of DD-214 (military discharge document), if applicable.
- Copy of ILEA certificate(s), if applicable.
- Any additional documents or certificates of training that may assist the Department in evaluating the applicant's suitability for employment.
- Any additional documentation as determined by the Department.

Disqualification: There are very few automatic reasons for rejection. However, **deliberate misstatements or omissions will automatically result in your application being rejected**, regardless of the nature or reason for the misstatements/omissions.

I have read and understand the above instructions.

Applicant signature: _____ **Date:** _____

Position(s) applying for:

- Police Officer Clerical Reserve Police Officer Volunteer

SECTION 4a: EDUCATION (HIGH SCHOOL)

List all high schools (or equivalent programs) that you have attended or participated in. Do NOT include law enforcement academies or other law enforcement specific training programs.

DATES (MM/YYYY)		FULL NAME OF SCHOOL	CITY	STATE	HS DIPLOMA RECEIVED
FROM	TO				
/	/				<input type="checkbox"/> Yes <input type="checkbox"/> No
/	/				<input type="checkbox"/> Yes <input type="checkbox"/> No
/	/				<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 4b: EDUCATION (COLLEGE AND TRADE SCHOOLS)

List any and all post-secondary schools (or equivalent programs) that you have attended or participated in. Do NOT include law enforcement academies, unless the academy was part of a degree-seeking program.

DATES (MM/YYYY)		FULL NAME OF SCHOOL	CITY	STATE	FIELD OF STUDY	DEGREE REC'D
FROM	TO					
/	/					<input type="checkbox"/> Yes <input type="checkbox"/> No
/	/					<input type="checkbox"/> Yes <input type="checkbox"/> No
/	/					<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 4c: LAW ENFORCEMENT TRAINING

List any law enforcement specific training schools that you have attended. Do NOT list degree seeking programs.

DATES (MM/YYYY)		NAME OF SCHOOL/TRAINING	LOCATION
FROM	TO		
/	/		
/	/		
/	/		

SECTION 4d: MILITARY TRAINING

List any training schools that you attended as part of any armed forces service. Do NOT include civilian law enforcement training.

DATES (MM/YYYY)		NAME OF SCHOOL/TRAINING	LOCATION	BRANCH OF SERVICE
FROM	TO			
/	/			
/	/			
/	/			

SECTION 4e: MISCELANEOUS EDUCATION / SKILLS

List any additional education or skills that you have that would be applicable towards a law enforcement position. Please include any computer skills, specialty training, and foreign languages. Do NOT include law enforcement academies or military training schools.

SECTION 7: SELECTIVE SERVICE / MILITARY RECORD

- a. Have you ever registered with the Selective Service? Yes No N/A (female)
- b. Have you ever applied for a position with any branch of the armed forces? Yes No
- c. Have you ever been rejected by any branch of the armed forces? Yes No
If you answered "yes" above, please explain:
- d. Have you ever been inducted in to any branch of the armed forces? Yes No
If you answered "yes" above, please explain complete the remainder of this section, otherwise, you may move on to the next section.
- e. Have you ever served on active duty in any branch of the armed forces? Yes No
If you answered "yes" above, please complete the remainder of this section.
- f. Were you ever denied a security clearance, or had a clearance revoked, suspended, or downgraded? Yes No
- g. Was any type of disciplinary action taken against you while in the service? Yes No
If you answered "yes" above, please explain:

BRANCH OF MILITARY SERVICE	HIGHEST RANK ATTAINED	SERIAL NUMBER
DATE OF INDUCTION / /	DATE OF DISCHARGE / /	TYPE OF DISCHARGE
MEMBER OF NATIONAL GUARD / RESERVE? <input type="checkbox"/> Yes <input type="checkbox"/> No	Please provide a copy of your DD-214 with your application.	

SECTION 8: CLUB, GROUP, OR SOCIAL ORGANIZATION INVOLVEMENT

List any clubs, societies, or other organizations or social groups that you either are a member of now, or have been a member of in the past. (Examples: School groups, lodges, gun clubs, etc.)

DATES		NAME OF CLUB, ORGANIZATION, OR GROUP	CITY	STATE	POSITION HELD / EXTENT OF INVOLVEMENT
START	END				
/	/				
/	/				
/	/				
/	/				
/	/				
/	/				
/	/				

SECTION 9: VOLUNTEER ACTIVITIES / EMPLOYMENT

List any volunteer activities or employment that you have been involved in.

DATES		SPONSORING ORGANIZATION	CITY	STATE	POSITION HELD / EXTENT OF INVOLVEMENT
START	END				
/	/				
/	/				
/	/				

/	/				
/	/				
/	/				
/	/				

SECTION 10a: PROFESSIONAL REFERENCES

Give three references who are NOT relatives, present employers, or current/former teachers who are responsible adults of reputable standing in their communities, preferably those who have known you well during the past five years. If person(s) are retired, list their former occupation.

COMPLETE NAME	OCCUPATION	EMPLOYER		YEARS ACQUAINTED
HOME ADDRESS	CITY	STATE	ZIP	PRIMARY PHONE () -
BUSINESS ADDRESS	CITY	STATE	ZIP	BUSINESS PHONE () -
COMPLETE NAME	OCCUPATION	EMPLOYER		YEARS ACQUAINTED
HOME ADDRESS	CITY	STATE	ZIP	PRIMARY PHONE () -
BUSINESS ADDRESS	CITY	STATE	ZIP	BUSINESS PHONE () -
COMPLETE NAME	OCCUPATION	EMPLOYER		YEARS ACQUAINTED
HOME ADDRESS	CITY	STATE	ZIP	PRIMARY PHONE () -
BUSINESS ADDRESS	CITY	STATE	ZIP	BUSINESS PHONE () -

SECTION 10b: RELATIVES

Give complete information on all children, spouse or significant other, members of your immediate family, other family members that you have lived with and current roommates. List ONLY the city and state in which the person resides, not the full address. If you do not have complete information for any person, please attach a separate sheet explaining why.

RELATION	COMPLETE NAME	DATE OF BIRTH	RESIDENCE CITY/STATE	PHONE NUMBER
Father		/ /		() -
Mother		/ /		() -
		/ /		() -
		/ /		() -
		/ /		() -
		/ /		() -
		/ /		() -
		/ /		() -
		/ /		() -
		/ /		() -
		/ /		() -

SECTION 11: EMPLOYMENT HISTORY

List your work experience, starting with the most recent and working backwards chronologically. Include seasonal and part-time employment in addition to jobs held as a teenager. You must account for all time. If you were unemployed for a period of time, indicate as such and list dates of unemployment. If you do not recall the name of a supervisor, address of a business, etc., please indicate such on the application. Attach additional sheets if necessary.

NAME OF EMPLOYER	DATES OF EMPLOYMENT	SALARY
ADDRESS	POSITION	
CITY AND STATE	NAME OF SUPERVISOR	
TELEPHONE () -	REASON FOR LEAVING	
TYPE OF WORK PERFORMED / DUTIES		
NAME OF EMPLOYER	DATES OF EMPLOYMENT	SALARY
ADDRESS	POSITION	
CITY AND STATE	NAME OF SUPERVISOR	
TELEPHONE () -	REASON FOR LEAVING	
TYPE OF WORK PERFORMED / DUTIES		
NAME OF EMPLOYER	DATES OF EMPLOYMENT	SALARY
ADDRESS	POSITION	
CITY AND STATE	NAME OF SUPERVISOR	
TELEPHONE () -	REASON FOR LEAVING	
TYPE OF WORK PERFORMED / DUTIES		
NAME OF EMPLOYER	DATES OF EMPLOYMENT	SALARY
ADDRESS	POSITION	
CITY AND STATE	NAME OF SUPERVISOR	
TELEPHONE () -	REASON FOR LEAVING	
TYPE OF WORK PERFORMED / DUTIES		
NAME OF EMPLOYER	DATES OF EMPLOYMENT	SALARY
ADDRESS	POSITION	
CITY AND STATE	NAME OF SUPERVISOR	
TELEPHONE () -	REASON FOR LEAVING	
TYPE OF WORK PERFORMED / DUTIES		

NAME OF EMPLOYER	DATES OF EMPLOYMENT	SALARY
ADDRESS	POSITION	
CITY AND STATE	NAME OF SUPERVISOR	
TELEPHONE () -	REASON FOR LEAVING	
TYPE OF WORK PERFORMED / DUTIES		
NAME OF EMPLOYER	DATES OF EMPLOYMENT	SALARY
ADDRESS	POSITION	
CITY AND STATE	NAME OF SUPERVISOR	
TELEPHONE () -	REASON FOR LEAVING	
TYPE OF WORK PERFORMED / DUTIES		
NAME OF EMPLOYER	DATES OF EMPLOYMENT	SALARY
ADDRESS	POSITION	
CITY AND STATE	NAME OF SUPERVISOR	
TELEPHONE () -	REASON FOR LEAVING	
TYPE OF WORK PERFORMED / DUTIES		

Have you ever applied for any position at another law enforcement agency (city, county, state, or federal)?

Yes No

If you answered yes to this question, list every agency you have applied to, starting with the most recent.

All agencies must be listed regardless of the outcome or current status. **Check all boxes that apply for each agency.**

If more space is needed, continue your response on a separate page.

NAME OF LAW ENFORCEMENT AGENCY	DATE OF APPLICATION (MM/YYYY)
ADDRESS	POSITION APPLIED FOR
CITY AND STATE	TELEPHONE () -
NAME OF BACKGROUND INVESTIGATOR (if known)	
STEP: <input type="checkbox"/> APPLICATION <input type="checkbox"/> WRITTEN EXAM <input type="checkbox"/> PHYSICAL AGILITY TEST <input type="checkbox"/> ORAL INTERVIEW <input type="checkbox"/> POLYGRAPH <input type="checkbox"/> BACKGROUND CHECK <input type="checkbox"/> 2 ND INTERVIEW <input type="checkbox"/> CONDITIONAL OFFER	
STATUS: <input type="checkbox"/> HIRED <input type="checkbox"/> ON ELIGIBILITY LIST <input type="checkbox"/> VOLUNTARY WITHDRAW <input type="checkbox"/> DISQUALIFIED <input type="checkbox"/> LIST EXPIRED	

NAME OF LAW ENFORCEMENT AGENCY	DATE OF APPLICATION (MM/YYYY)
ADDRESS	POSITION APPLIED FOR
CITY AND STATE	TELEPHONE () -
NAME OF BACKGROUND INVESTIGATOR (if known)	
STEP: <input type="checkbox"/> APPLICATION <input type="checkbox"/> WRITTEN EXAM <input type="checkbox"/> PHYSICAL AGILITY TEST <input type="checkbox"/> ORAL INTERVIEW <input type="checkbox"/> POLYGRAPH <input type="checkbox"/> BACKGROUND CHECK <input type="checkbox"/> 2 ND INTERVIEW <input type="checkbox"/> CONDITIONAL OFFER STATUS: <input type="checkbox"/> HIRED <input type="checkbox"/> ON ELIGIBILITY LIST <input type="checkbox"/> VOLUNTARY WITHDRAW <input type="checkbox"/> DISQUALIFIED <input type="checkbox"/> LIST EXPIRED	
NAME OF LAW ENFORCEMENT AGENCY	DATE OF APPLICATION (MM/YYYY)
ADDRESS	POSITION APPLIED FOR
CITY AND STATE	TELEPHONE () -
NAME OF BACKGROUND INVESTIGATOR (if known)	
STEP: <input type="checkbox"/> APPLICATION <input type="checkbox"/> WRITTEN EXAM <input type="checkbox"/> PHYSICAL AGILITY TEST <input type="checkbox"/> ORAL INTERVIEW <input type="checkbox"/> POLYGRAPH <input type="checkbox"/> BACKGROUND CHECK <input type="checkbox"/> 2 ND INTERVIEW <input type="checkbox"/> CONDITIONAL OFFER STATUS: <input type="checkbox"/> HIRED <input type="checkbox"/> ON ELIGIBILITY LIST <input type="checkbox"/> VOLUNTARY WITHDRAW <input type="checkbox"/> DISQUALIFIED <input type="checkbox"/> LIST EXPIRED	
NAME OF LAW ENFORCEMENT AGENCY	DATE OF APPLICATION (MM/YYYY)
ADDRESS	POSITION APPLIED FOR
CITY AND STATE	TELEPHONE () -
NAME OF BACKGROUND INVESTIGATOR (if known)	
STEP: <input type="checkbox"/> APPLICATION <input type="checkbox"/> WRITTEN EXAM <input type="checkbox"/> PHYSICAL AGILITY TEST <input type="checkbox"/> ORAL INTERVIEW <input type="checkbox"/> POLYGRAPH <input type="checkbox"/> BACKGROUND CHECK <input type="checkbox"/> 2 ND INTERVIEW <input type="checkbox"/> CONDITIONAL OFFER STATUS: <input type="checkbox"/> HIRED <input type="checkbox"/> ON ELIGIBILITY LIST <input type="checkbox"/> VOLUNTARY WITHDRAW <input type="checkbox"/> DISQUALIFIED <input type="checkbox"/> LIST EXPIRED	

**THIS IS THE END OF THIS PORTION OF THE APPLICATION PACKET.
PLEASE REVIEW THIS PORTION OF THE PACKET FOR ACCURACY**

AUTHORIZATION FOR RELEASE OF INFORMATION

PART

VINTON POLICE DEPARTMENT

B

I, _____, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the City of Vinton and Vinton Police Department, whether the said records are of a public, private or confidential nature, including criminal histories.

The intent of this authorization is to give my consent for full and 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, and the U.S. Veteran's Administration; 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 which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the City of Vinton and Vinton Police Department. I also certify that any person(s) who may furnish such information in good faith 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 further release the City of Vinton and Vinton Police Department from any and all liability which may be incurred as a result of collecting such information.

I HEREBY SWEAR AND AFFIRM THAT EACH STATEMENT AND ALL INFORMATION IN OR SUPPLEMENTING THIS APPLICATION (PERSONAL AND PHYSICAL EVALUATION) ARE COMPLETE, TRUE AND ACCURATELY RECORDED TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT PROVIDING FALSE, MISLEADING AND/OR INCOMPLETE INFORMATION ON THIS APPLICATION IS GROUNDS FOR EXCLUSION FROM THE SELECTION PROCESS OR DISCHARGE IF DISCOVERED SUBSEQUENT TO EMPLOYMENT.

A photocopy and/or fax of this release form will be valid as an original thereof, even though the said photocopy/fax does not contain an original writing of my signature.

**I HAVE READ AND FULLY UNDERSTAND THE CONTENTS OF THE
"AUTHORIZATION FOR RELEASE OF INFORMATION"**

Signature of Applicant

Date

PRE-EMPLOYMENT QUESTIONNAIRE

VINTON POLICE DEPARTMENT

PART

C

The personal characteristics of honesty and integrity are crucial for law enforcement officers. All applicants must answer the following questions. Answers provided on this Pre-Employment Questionnaire will be reviewed carefully by members of the Department involved in the screening process.

If you answer “yes” to questions 1-73, please attach a separate sheet explaining the circumstances. List all items on additional sheets by question number.

1. Have you ever made or kept unauthorized copies of confidential information or documents? Yes No
2. Have you ever sold, given, or otherwise furnished confidential information to unauthorized individuals? Yes No
3. Are you now or have you ever been a member of any organization, association, movement, group, or combination of persons which is totalitarian, fascist, communist, or subversive or which has adopted, or shows a policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the Constitution or which seeks to alter the form of Government of the United States by unconstitutional means? Yes No
4. Have you ever applied for a weapons permit and been denied or had a weapons permit revoked? Yes No
5. Have you ever filed for or declared bankruptcy (Chapter 7, 11 or 13)? Yes No
6. Have any of your bills ever been turned over to a collection agency? Yes No
7. Have you ever had purchased goods repossessed? Yes No
8. Have your wages ever been garnished? Yes No
9. Have you ever been delinquent on income or other tax payments? Yes No
10. Have you ever failed to file income tax or cheated/lie on an income tax form? Yes No
11. Have you ever avoided paying any lawful debt by moving away? Yes No
12. Have you ever defaulted on (failed to pay) a loan? Yes No
13. Have you ever spent money for illegal purposes (e.g., illegal drugs, prostitution, purchase of fraudulent documents, etc.)? Yes No
14. Have you ever failed to make or been late on a court-ordered payment (e.g., child support, alimony, restitution, etc.)? Yes No
15. Have you ever been sued? Yes No
16. Have you been in any physical fights since age sixteen (16)? Yes No
17. Have you ever been in a fight where weapons were involved? Yes No
18. Have you ever held a driver's license or other state issued identification under any other name? Yes No

19. Have you ever had your driving privileges suspended or revoked in any state? Yes No
20. Have the police ever been called to your house for any reason? Yes No
21. Were you ever required to appear before a juvenile court for an act which would have been a crime if committed as an adult? Yes No
22. Have you or your spouse/partner ever been referred to the Iowa Department of Human Services or Child Protective Services in another state? Yes No
23. Have you ever been the subject of protective order, restraining order, or stay-away order? Yes No
24. Have you ever been detained by law enforcement for investigation, arrested, indicted, charged, or convicted of any misdemeanor or felony offense in this state or any other legal jurisdiction (including offenses in the Uniform code of Military Justice)? (If YES, explain on an attached page). Yes No
25. Have you ever fraudulently received welfare, unemployment compensation, workers' compensation, or other state or federal assistance? Yes No
26. Have you ever been required to repay any welfare payments, unemployment compensation, or other state or federal assistance? Yes No
27. Have you ever filed a false insurance or workers' compensation claim? Yes No

Have you ever committed or participated in any of the following illegal acts regardless if you were caught, charged or convicted? (Questions 28-73)

28. Murder, homicide, or attempted murder? Yes No
29. Domestic abuse? Yes No
30. Child abuse? Yes No
31. Viewing or possessing child pornography? Yes No
32. Animal abuse or neglect? Yes No
33. Annoying, obscene, or harassing contacts by telephone or other electronic communications? Yes No
34. Contributed to the delinquency of a minor (aided or abetted a minor to violate a law or ordinance)? Yes No
35. Driven a motor vehicle while under the influence of alcohol and/or drugs? Yes No
36. Drunk in a public place? Yes No
37. Filed a false police report? Yes No
38. Left the scene of a vehicle collision involving injuries? Yes No

39. Illegal hunting and/or fishing (e.g. without a license, out of season, etc.)? Yes No
40. Impersonating a police officer? Yes No
41. Indecent exposure and/or lewd or obscene conduct? Yes No
42. Intentionally written a bad check? Yes No
43. Peeping (including, but not limited to, looking through a window or opening with the intent to invade someone's privacy)? Yes No
44. Possession of alcohol under the age of 21? Yes No
45. Possession of falsified or altered identification, including use of another person's ID (for any reason)? Yes No
46. Prostitution or solicitation of prostitution? Yes No
47. Resisting arrest and/or delaying or obstructing an officer (including, but not limited to running from the police)? Yes No
48. Trespassing? Yes No
49. Criminal mischief (vandalism)? Yes No
50. Arson? Yes No
51. Assault (use of unlawful force against another)? Yes No
52. Assault while displaying a dangerous weapon (unlawfully used or threatened to use an instrument likely to cause serious bodily injury or death)? Yes No
53. Blackmail or extortion? Yes No
54. Burglary (entering a structure or vehicle to commit theft or other crime)? Yes No
55. Child molestation (performing unlawful acts with a child, inappropriate touching of a child)? Yes No
56. Elder abuse and/or neglect (physical and/or financial)? Yes No
57. Non-consensual sexual acts on another person (sexual assault, rape)? Yes No
58. Forgery (falsifying any type of document, check, certificate, license, currency, etc.)? Yes No
59. Fraudulent use of a credit, ATM, debit, and/or check card? Yes No
60. Hate crime? Yes No
61. Perjury (lying under oath)? Yes No
62. Possession, manufacture, or use of an explosive, incendiary, or other destructive device? Yes No
63. Robbery (theft from another person using a weapon, force, or threat of force)? Yes No

64. Stalking? Yes No
65. Theft of a vehicle and/or vehicle parts? Yes No
66. Bribery? Yes No
67. Used marijuana within the last five (5) years? Yes No
68. Used marijuana at any time in your life? Yes No
69. Unlawfully used any other illegal drugs at any time in your life? For the purpose of responding to this question, "illegal drugs" include the unauthorized or illegal use of prescription medications or over-the-counter drugs or the illegal use of any other substance for the purpose of "getting high". These substances may include but are not limited to any of the following; amphetamines/methamphetamines (uppers, speed, crank, etc.), barbiturates (downers), cocaine/crack cocaine, designer drugs (ecstasy, synthetic heroin, etc.), GHB (date rape drug), hallucinogens (peyote, LSD, mushrooms), hashish/hashish oil, heroin/opium, mescaline, morphine, PCP/angel dust, Quaaludes, steroids, tetrahydrocannabinol (THC), glue, paint, or any substance containing toluene. Yes No
70. Unlawfully manufactured or cultivated any illegal drugs? Yes No
71. Unlawfully sold or furnished any illegal drugs? Yes No
72. Carried illegal drugs for another person? Yes No
73. Any other felony crime or crime of moral turpitude? Yes No

Reminder: If you answered "yes" to any of the above questions, please attach a separate sheet explaining the circumstances. List all items on additional sheets by question number.

Miscellaneous Questions.

74. Do you feel that it is necessary for all law enforcement agency applicants to be completely honest? Yes No
75. Did you answer all the questions truthfully and accurately on your employment application? Yes No
76. Are you aware of anything about yourself that you feel may disqualify you from employment? Yes No

I do hereby swear and affirm that each statement is true and accurate to the best of my knowledge. I understand that providing false, misleading and/or incomplete information is grounds for exclusion from the selection process or discharge if discovered subsequent to employment.

Signature of Applicant

Date

PHYSICAL SELF-ASSESSMENT QUESTIONNAIRE

VINTON POLICE DEPARTMENT

PART D

You may be called to perform the following physical tasks during the performance of law enforcement duties. Please indicate by marking "yes" or "no" as to whether or not you feel you are able to perform these physical tasks with or without reasonable accommodation.

- | | | |
|--|------------------------------|-----------------------------|
| Carry a person who has been arrested and is unable or refuses to walk to a police car. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Carry (with the aid of another officer) a stretcher with an injured person on it. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Carry (with the aid of another officer) a body bag containing a dead person. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Carry equipment belt which contains gun, radio, ammunition, handcuffs, etc. for the duration of a shift by wearing it around your waist. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Carry a sick or injured person down several flights of stairs. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Carry a person who has been overcome by smoke from a burning building. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Carry an unconscious person out of a ditch or across rough terrain. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Carry various types of equipment (TVs, stereos, small safes, etc.) that have been confiscated. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Climb up a fire escape or a steep embankment. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Climb over a fence or fallen tree while chasing a suspect. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Climb up to and through the window of a building. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Pull an unconscious or injured person from an automobile that was involved in an accident. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Pull your own weight off the ground. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Pull a person who is resisting arrest out of a car. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Pull one person away from another. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Pull open the door of a car that was involved in an accident. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Run after a suspect on the street. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Run after a suspect through the yards of a residential area. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Run after a suspect through a parking lot while running around the cars. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Run up and down stairs or steep inclines. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

- Run to the scene of an accident if you are unable to get to the scene with your vehicle. Yes No
- Run after a suspect through a wooded area. Yes No
- Push a stalled car. Yes No
- Push a person who is attempting to fight with you. Yes No
- Push open a locked door to a house or other building. Yes No
- Push a person to keep him/her away from an emergency area (at a car accident or fire) when he/she tries to force his/her way into the emergency area. Yes No
- Jump out of the way of an object that has been thrown at you. Yes No
- Jump over a ditch while chasing a suspect that you want to arrest. Yes No
- Jump across (or over) holes and small objects in a yard or field while chasing a fleeing suspect. Yes No
- Jump up in order to grasp the top of a wall or fence. Yes No
- Jump down from a fence top, after climbing up the fence while chasing a person. Yes No
- Lift (with the aid of another officer) an unconscious or injured person onto a stretcher. Yes No
- Lift an object off a person. Yes No
- Lift a person who is resisting arrest into the back of a patrol car. Yes No
- With the aid of another person, lift a stretcher over your head while carrying it down several flights of stairs. Yes No
- Drag a person who is unable to walk from a dangerous area such as a house fire, accident, etc. Yes No
- Drag an obstacle such as a tree limb or dead animal from the roadway. Yes No
- Drag a person out of a lake, river, or ditch. Yes No
- Crawl into a car that has been involved in an accident. Yes No
- Crawl through a culvert under a road. Yes No
- Balance while walking across a log that has fallen across a creek or ditch. Yes No
- Balance while walking on beams in an attic. Yes No
- Change tire of a police car or car of a person who has asked for help. Yes No
- Kick in a locked door. Yes No

Stand in an intersection or at an emergency site.

Yes No

Swim in a lake or river.

Yes No

Dodge clothes lines, lawn furniture, etc., while chasing a fleeing suspect through a residential area.

Yes No

Wrestle a person to the ground who is attempting to escape or resisting arrest.

Yes No

Run on different textured surfaces.

Yes No

I do hereby swear and affirm that each statement is true and accurate to the best of my knowledge. I understand that providing false, misleading and/or incomplete information is grounds for exclusion from the selection process or discharge if discovered subsequent to employment.

Signature of Applicant

Date