

City of Uniontown, Fayette County, Pa

POLICE OFFICER APPLICATION PACKAGE

Application Includes:

1. Questionnaire
2. Appendix A: Notification Procedure Release
3. Appendix B: Waiver and Release for Background Investigation
4. Appendix C: Descriptions of essential Duties of a Police Officer
5. Enclosure: Applicant must enclose Proof of Current PA. Act 120 Certification

General Instructions: This application consist of several sections; a questionnaire; a notification Procedure Release; a Waiver and Release for Background Check; and a Description of Essential Job Functions. EACH OF THESE SECTIONS MUST BE COMPLETED IN ORDER FOR THE CITY OF UNIONTOWN TO ACCEPT THE APPLICATION AS COMPLETE. Print, (do not type) an answer to each question. If a question/ field does not apply to you, so state with N/A. If space available is insufficient, use reverse side and proceed with the number of the reference block.

DO NOT MISSTATE OR OMIT MATERIAL FACT SINCE THE STATEMENTS MADE HEREIN ARE SUBJECT TO VERIFICATION TO DETERMINE YOUR QUALIFICATIONS FOR EMPLOYMENT.

QUESTIONNAIRE

1. _____
Last Name First Name Middle Name Gen. (Jr/Sr.etc)
2. _____ 3. _____ (_____) _____
Social Security Number Phone Number
4. _____
Alias(s), Nickname(s), Maiden Name, Other Changes in Name
5. _____
Present Residence Address (No./Street/City/State/Zip Code) (including PO box if applicable)
6. _____
U.S. Citizen? (Yes/No) Naturalization No. Date Place

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

7. Residence: List ALL for the last 10 years, beginning with current residence address:

Month and year From -----To	Address	With Whom did you live?
_____ > Present	_____	_____
_____ to	_____	_____
_____ to	_____	_____
_____ to	_____	_____
_____ to	_____	_____
_____ to	_____	_____
_____ to	_____	_____
_____ to	_____	_____

8. Family: List in order given showing relationship, parents, guardians, stepparents, foster parents, brothers, sisters, stepbrothers, and stepsisters. Include any others with whom you have resided.

Relationship	Name	Address if Living
Father	_____	_____
Mother	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

9. VEHICLE OPERATOR'S LICENSE: Give the following information concerning any vehicle operator's license you have held or currently hold.

Type/Class License	License Number	Issuing State	Expiration
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

9(a). Have you ever had a license suspended or revoked? _____

10. CONVICTION OF CRIME: Have you ever been convicted, pled guilty or pled no contest, to a misdemeanor, felony or greater criminal violation? (YES / NO)
If yes, state violation, court of jurisdiction and date of conviction.

11. FININCIAL STATUS: Do you have any income from any other source than your principal occupation?

(YES / NO) If yes, how much income _____ How often?(week/month/year) _____

If yes to above, What source(s) _____

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

11(a).Do you have or have you had any financial accounts? (YES /NO) This includes checking account(s), savings account(s), Loans (car/house/student/credit cards, etc.), Bonds, etc?

If yes, List **ALL ACCOUNTS DURING THE LAST 7 YEARS.** (Example: First Niagara Bank- car loan.

13. SUBVERSIVE ORGANIZATIONS: (Answer each with a YES or NO)

_____ Are you now or have you ever been a member of any organization, association, movement, group or combination of persons which advocates the overthrow of our constitutional form of government, or which has adopted the policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States or which seeks to alter the form of government of the United States by any unconstitutional means?

_____ Are you or have you been affiliated or associated with any organization of the type described above, as an agent, official or employee?

_____ Are you now associating with, or have you associated with, any individual, including relatives, who you know or have reason to believe are or have been members of any of the organizations identified above?

_____ Have you ever been engaged in any of the following activities of any organization of the type described above: Distribution(s) to, attendance at or participating in any organizational, social or other activities of said organization or any projects sponsored by them; the sale, gift, or distribution of any written, printed or other matter, prepared, reproduced, or published by them or any of their agents or instrumentalities?

If yes, to any of the answers above, describe the circumstances. Attach additional sheets for a fully detailed statement. If associated with any of the organizations, specify nature and extent of association with each, including office or position held. Also include dates, places and credentials now or formerly held. If associations have been with individuals who are members of these organizations, then list the individuals and the organization with which they were or are affiliated.

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

14. EDUCATION:

A. List all elementary, junior and high schools attended. Attach transcript/diploma from last high school attended.

Name	Address	City	Zip	Graduated (Yes /No)
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B. Higher Education. List all colleges or universities attended. Attach Transcript(s)

Name	City	Years Attended	Credit Hrs.	Graduated (Yes /No)
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Major and Minor Courses:

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

C. Other schools or training (trade, vocational, military). List for each the name and location of school, years attended, subjects studied, certificate earned, and any other pertinent data. Include address and phone number if available.

15. SPECIAL QUALIFICATIONS AND SKILLS:

A. Indicate type of special license such as pilot, radio operator, etc., showing licensing authority, where the license was first issued and date current license expires.

B. Special Skills you possess and machines and equipment you can use. (Example: Computer programmer, polygraph operator, vehicle equipment inspection, professional device operator, etc.)

C. Approximate number of words per minute: Keyboard or typing _____wpm Shorthand _____wpm

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

D. Special qualifications not covered in application. (Example: most important publications, patents, inventions, public speaking, membership in professional or scientific societies, honors and fellowships received. etc.)

16. FOREIGN LANGUAGE: Enter language and indicate fluency.

Language Reading Speaking Understanding Writing

17. FOREIGN TRAVEL. Excluding trips of less than 30 days to Canada or Mexico and travel as a direct result of U.S. military duties.

Dates Country Purpose

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

18. HOBIES AND SPORTS:

Name Length of Participation Level of Proficiency

19. EMPLOYMENT. Begin with your most recent job and list your FULL WORK HISTORY for the past 10 years, including part-timer, temporary or seasonal employment and all periods of unemployment.

Job # _____

From date: _____ to _____ Job Title _____

Job Description _____

Salary: _____

Employer Name: _____

Employer Address: _____

Employer Phone: _____

Name of Supervisor: _____

Reason for Leaving: _____

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

Job # _____

From date: _____ to _____ Job Title _____

Job Description _____

Salary: _____

Employer Name: _____

Employer Address: _____

Employer Phone: _____

Name of Supervisor: _____

Reason for Leaving: _____

Job # _____

From date: _____ to _____ Job Title _____

Job Description _____

Salary: _____

Employer Name: _____

Employer Address: _____

Employer Phone: _____

Name of Supervisor: _____

Reason for Leaving: _____

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

Job _____

From date: _____ to _____ Job Title _____

Job Description _____

Salary: _____

Employer Name: _____

Employer Address: _____

Employer Phone: _____

Name of Supervisor: _____

Reason for Leaving: _____

Job # _____

From date: _____ to _____ Job Title _____

Job Description _____

Salary: _____

Employer Name: _____

Employer Address: _____

Employer Phone: _____

Name of Supervisor: _____

Reason for Leaving: _____

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

If additional employer blocks are needed, attach requested information on separate sheets.

19A. Have you ever been discharged, asked to resign, furloughed, or put on inactive status for cause, or subject to disciplinary action while in any position (except military)? (YES / NO) If YES is circled, state reason.

19B. Have you ever resigned after being informed that your employer intended to discharge you for any reason? (YES / NO). If yes is circled, please explain and list name address and approximate dates for each case.

20. CHARACTER REFERENCES: List only character references that have definite knowledge of your qualifications for the position of application. List five character references. (Do not list relatives, former employers or persons living outside the United States.)

Name	Address	Home phone	Work or Cell Phone	Years known
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1. _____
2. _____
3. _____
4. _____
5. _____

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

21. Are there any incidents in your life not mentioned herein which may reflect upon your suitability to perform the duties which you may be called upon to take or which might require further explanation? (YES / NO). If yes is circled, provide details.

22. Have you ever applied for a position with any other governmental agencies? (YES / NO) If yes is circled, provide details including dates. (Example: Pa State Police Aug. 2002)

23. Are you a former or current member of the armed services? Yes / No If yes, please attach last DD214 and list branch and approximate dates:

Branch: _____ Date from _____ to _____.

Main Job category _____.

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

I certify that there are no misrepresentations, omissions or falsifications in the foregoing statements and answers, and that the above entries made by me are true, complete and correct to the best of my knowledge and belief, and made in good faith.

Signature of Applicant

Date

APPENDIX A

NOTIFICATION PROCEDURE RELEASE

In the processing procedure required for applicants, it may become necessary to contact the applicant in the event they are being given further consideration for the position of police officer with the City of Uniontown Pa.

If conventional methods fail in attempting to contact the applicant, a certified or registered letter will be sent to the applicant's address listed on the application. Should the registered letter be returned indicating that it was unclaimed or undeliverable, the applicant will be eliminated from further processing and consideration.

It is the applicant's responsibility to notify the City of Uniontown Pa. Police in writing, of the address change. By affixing your signature to this form, the applicant acknowledges reading and understanding the contents of this procedure.

Date

Signature

APPENDIX B

WAIVER AND RELEASE FOR BACKGROUND INVESTIGATION

I, _____ (Name of Applicant), hereby give The City of Uniontown, Pa. the right to make a thorough investigation into my background, previous employment, education and references in order to ascertain my suitability for service as a police officer. I release from all liability and claims any and all persons, companies and corporations (public and private) supplying any information whatsoever to representatives of the City of Uniontown, Pa. This includes and is not limited to parties with whom I have entered into a written or oral agreement which contains a confidentiality clause. I release, indemnify and hold harmless the City of Uniontown, Pa. it's officials, officers and employees from and against any and all liability which might result from conducting such an investigation.

Dated: _____

 X _____

Notary Public

(seal)

APPENDIX C

ESSENTIAL DUTIES OF A POLICE OFFICER

1. Running for several hundred yards.
2. Climbing over obstacles.
3. Crawling.
4. Pushing motor vehicle.
5. Pulling or carrying accident, fire or crime victim(s).
6. Using physical force to apprehend and subdue arrestees.
7. Withstanding prolonged exposure, as long as eight hours, to extreme weather conditions.
8. Withstanding prolonged periods of standing and sitting.
9. Withstanding frequent exposure to stress-producing situations such as encountering persons injured or killed by accidents, crimes or suicide.
10. Dealing with domestic disputes.
11. Dealing with verbal and physical abuse of the officer, including taunts, insults, and threats to the officer, members of his family, or fellow police officers.
12. To communicate effectively with individuals suffering from trauma.
13. Operate a motor vehicle for long periods of time.
14. Use a firearm safely and effectively.
15. Complete written reports in a clear and concise manner.

Date

Signature

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

NOTICES.

1. Any and all notices, letters or correspondence sent to applicant will be sent by First-Class regular mail to the address of applicant set forth in the application.

2. The address provided by you and set forth herein is the address to which all notices, letters or correspondence as required hereunder will be sent. The undersigned agrees that the address set forth in the within application is the only address to which mail required hereunder will be sent.

3. Applicant acknowledges that he or she will have received any and all mail sent to the address provided to the City of Uniontown Civil Service Commission as set forth on the application. The burden to prove that he or she did not receive a letter, correspondence or notice or anything required to be sent hereunder is upon the applicant.

4. If the applicant should change his or her address, he or she must provide that change of address to the City of Uniontown Civil Service Commission and it will be the applicant's burden to prove that the change of address was provided to the City of Uniontown Civil Service Commission.

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

Verification:

I have reviewed the above list of essential job functions for a City of Uniontown Pa. police officer and believe that:

(Initial ONLY one)

_____ I can ***fully preform*** all duties ***without reasonable accommodations, or***

_____ I can ***fully preform*** all ***duties but only with the following reasonable accommodations*** for the duties specified.

Specify: _____, or

_____ ***I cannot fully preform all duties*** even with reasonable accommodations.

I also agree that:

(Initial all)

x_____ Any and all notices, letters or correspondence sent to applicant will be sent by First-Class regular mail to the address of applicant set forth in the application.

x_____ The address provided by you and set forth herein is the address to which all notices, letters or correspondence as

required hereunder will be sent. The undersigned agrees that the address set forth in the within application is the only address to which mail required hereunder will be sent.

x_____ Applicant acknowledges that he or she will have received any and all mail sent to the address provided to the City of Uniontown Civil Service Commission as set forth on the application. The burden to prove that he or she did not receive a letter, correspondence or notice or anything required to be sent hereunder is upon the applicant.

x_____ If the applicant should change his or her address, he or she must provide that change of address to the City of Uniontown Civil Service Commission and it will be the applicant's burden to prove that the change of address was provided to the City of Uniontown Civil Service Commission.

Printed Name

Signature

Date

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

Enclosure.

Proof of Current PA Act 120 Certification

Attach a copy of Municipal Police Officers Education Training Commission (M.P.O.E.T.C.) card or copy of PA Act 120 Certification to this page.

UNIONTOWN POLICE APPLICATION PACKAGE (cont.)

CHECKLIST

- _____ Complete, sign and date application.(pg. 14)
- _____ Sign and date Appendix A, Notification Procedure Release.
(pg. 15)
- _____ Complete, sign date and notarize, Appendix B, Waiver and release
for background Investigation. (pg.16)
- _____ Complete, sign and date Appendix C, Description of Essential
Duties of a Police Officer. (pg. 17)
- _____ Complete, sign and date VERIFICATION PAGE (pg. 20)
- _____ Enclose proof of Current PA Act 120 certification.
- _____ Enclose required education transcripts/diploma.
- _____ If a veteran, include a copy of your DD-214.
- _____ Enclose a non-refundable check or postal money order of \$50.00
payable to City of Uniontown, Pa.
- _____ Application filed prior to closing date stated in the
announcement/advertisement.
- _____ Submit the completed application packet (all of the above) to:

Uniontown Civil Service Commission (Police)

Attn. City Clerk

20 North Gallatin Avenue

Uniontown, Pa 15401