

**Mitchell**  
**Police**  
**Department**



**APPLICATION FOR EMPLOYMENT**  
**(Police Officer)**

**APPLICANT NAME:** \_\_\_\_\_

**DATE OF APPLICATION:** \_\_\_\_\_

**Mitchell Police Department**  
**EQUAL OPPORTUNITY EMPLOYER**

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The Mitchell Police Department shall not discriminate against, or show favor with respect to a person's hire, tenure, terms, conditions, or privileges of employment or any matter directly or indirectly related to employment because of his or her race, color, sex, religion, national origin, ancestry, age or for any reason. Each applicant and employee will be limited only by his or her abilities and qualifications, and the Mitchell Police Department shall endeavor to select, hire, and retain in its employ only the most qualified persons for the position.

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**INSTRUCTIONS FOR APPLICATION**

1. Please read each section carefully before beginning. Each section of the application must be filled out in full in order for the application to be processed. All pertinent papers must accompany the application before it can be processed. A list of items required appears on the following page.
2. Your application must be typed or hand printed in black ink so that no confusion should exist when the application is processed.
3. Applications will be held by the Mitchell Police Department for a period of one year only! It shall be the duty of the applicant to update his or her application yearly should they still desire employment.
4. Incomplete applications or those missing required items shall immediately be disposed of with no further consideration or notification. This does not mean you cannot later submit a completed application with all documentation as required.

### ITEMS NEEDED WITH APPLICATION

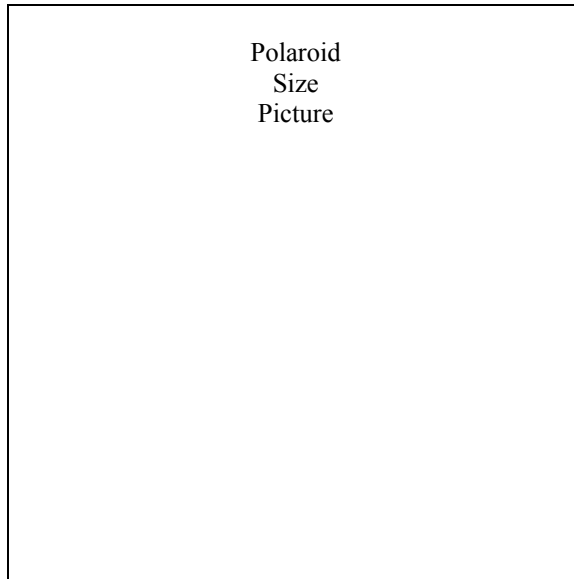
The following is a list of items that need to be with your application when it is presented as completed in order to be considered by the Mitchell Police Department.

Copies of:

1. Birth Certificate
2. Transcripts of High School grades.
3. Transcripts of College grades, if applicable.
4. Certificates pertaining to other schools or classes you may have taken.
5. DD214, if you served in the Armed Forces.
6. Current Drivers License

**NO APPLICATION WILL BE PROCESSED UNLESS ALL ITEMS ARE TURNED IN WITH THE APPLICATION!!!!**

In the space provided, include a photograph of yourself taken within the last six months. A polaroid photo is best, but the picture must be from the shoulder up and must be large enough to fill the provided space.





**FAMILY DATA**

**Marital Status:** Married \_\_\_\_\_ Single \_\_\_\_\_ Divorced \_\_\_\_\_ Seperated \_\_\_\_\_

**Spouse's Name (if applicable)** \_\_\_\_\_

**Dependents (if applicable)**

<b>NAME:</b>	<b>AGE</b>	<b>RELATIONSHIP</b>

**If divorced, are you legally required to make child support payments?** \_\_\_\_\_

**Are you current on child support payments?:** \_\_\_\_\_ **If no, explain:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**RECORD OF EDUCATION**

SCHOOL	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	DEGREE
Elementary:	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
High:	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
College:	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
Other:	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

You must include copies of all transcripts from schools attended in order to prove status with the institution. These transcripts will become the property of the Mitchell Police Department and will not be returned to the applicant at the end of the process.

If you did not finish high school, did you receive a G.E.D.?: \_\_\_\_\_

If you received a G.E.D., please list the date and location the test was taken.

\_\_\_\_\_

Have you ever been certified as a law enforcement officer? : \_\_\_\_\_

If so, please list the academy attended, location, and dates attended.:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOREIGN LANGUAGE:** Enter foreign language and indicate your knowledge of each by placing "X" in proper column.

LANGUAGE	Reading/Writing			Speaking			Comprehension		
	EXC	GOOD	FAIR	EXC	GOOD	FAIR	EXC	GOOD	FAIR

**MILITARY HISTORY AND STATUS**

Have you ever served in the Armed Forces?: \_\_\_\_\_ If yes, attach a copy of your DD214.

MILITARY BRANCH	DATES OF SERVICE FROM TO	HIGHEST RANK ATTAINED AND RANK AT SEPARATION	TYPE OF DISCHARGE REENLISTMENT CODE

Are you eligible to reenlist?: \_\_\_\_\_ If no, explain fully on separate sheet.

List any citations and awards received. \_\_\_\_\_  
\_\_\_\_\_

Were you ever disciplined (court martial, article 15, captain's mast, etc.) while on duty? \_\_\_\_\_  
If yes, explain on separate sheet.

List duties in service including specialized training. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SPECIALIZED TRAINING FOR POLICE WORK**

Have you had any specialized training pertinent to police work that you have not previously listed? \_\_\_\_\_  
If yes, please describe here.: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## EMPLOYMENT RECORD

List below all present and past employment, beginning with your most recent job.

- 1) Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Type of Business \_\_\_\_\_  
Dates employed \_\_\_\_\_  
Title held and work description \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Weekly salary \_\_\_\_\_  
Reason for leaving \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_
  
- 2) Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Type of Business \_\_\_\_\_  
Dates employed \_\_\_\_\_  
Title held and work description \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Weekly salary \_\_\_\_\_  
Reason for leaving \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_
  
- 3) Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Type of Business \_\_\_\_\_  
Dates employed \_\_\_\_\_  
Title held and work description \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Weekly salary \_\_\_\_\_  
Reason for leaving \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_
  
- 4) Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Type of Business \_\_\_\_\_  
Dates employed \_\_\_\_\_  
Title held and work description \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Weekly salary \_\_\_\_\_  
Reason for leaving \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_



5) Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Type of Business \_\_\_\_\_  
Dates employed \_\_\_\_\_  
Title held and work description \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Weekly salary \_\_\_\_\_  
Reason for leaving \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_

6) Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Type of Business \_\_\_\_\_  
Dates employed \_\_\_\_\_  
Title held and work description \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Weekly salary \_\_\_\_\_  
Reason for leaving \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_

May we contact the employers listed above? \_\_\_\_\_ If not, indicate which one(s) you do not wish us to contact and why.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been discharged or resigned to prevent being discharged from a previous position of employment?  
\_\_\_\_\_ If yes, please explain on fully on a separate sheet.

**PERSONAL REFERENCES**

Please list the names of three references that are not past employers or relatives. These people may be called on to answer questions about your personal background.

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Years Known: \_\_\_\_\_  
Upon which of the following conditions is your acquaintance with this person based:  
 Social  Business  Education  neighbor  other \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Years Known: \_\_\_\_\_  
Upon which of the following conditions is your acquaintance with this person based:  
 Social  Business  Education  neighbor  other \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Years Known: \_\_\_\_\_  
Upon which of the following conditions is your acquaintance with this person based:  
 Social  Business  Education  neighbor  other \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Years Known: \_\_\_\_\_  
Upon which of the following conditions is your acquaintance with this person based:  
 Social  Business  Education  neighbor  other \_\_\_\_\_

**LIST THE LAST SIX ADDRESSES WHERE YOU HAVE RESIDED**

1) Address: \_\_\_\_\_  
\_\_\_\_\_

2) Address: \_\_\_\_\_  
\_\_\_\_\_

3) Address: \_\_\_\_\_  
\_\_\_\_\_

4) Address: \_\_\_\_\_  
\_\_\_\_\_

5) Address: \_\_\_\_\_  
\_\_\_\_\_

6) Address: \_\_\_\_\_  
\_\_\_\_\_

**CRIMINAL HISTORY**

Have you ever been arrested for any crime, misdemeanor, or felony, since your 18th birthday?

Date of Arrest	Agency	Charge	Disposition

Have you ever been arrested for an act that would have been a crime had it been committed by an adult? \_\_\_\_\_  
If yes, describe: \_\_\_\_\_

Have you ever been or are you currently involved as a plaintiff, defendant, petitioner, or respondent in any civil court action? \_\_\_\_\_ If yes, explain fully on a separate sheet.

**TRAFFIC OFFENSES**

Do you have a valid Indiana drivers license? \_\_\_\_\_

Type	License#	Expiration Date	Restrictions

Have you received any traffic citations since your 18th birthday? ( ) yes ( ) no  
If yes, list below (exclude parking meter tickets):

Date	Agency	Charge	Disposition

Has your drivers license ever been suspended, revoked, or restricted? ( ) yes ( ) no  
If yes, give details.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List all traffic accidents you have been involved in as a driver since your 18th birthday.

Date	Agency	Location	At-Fault	Comments

List all states that you have ever held license with. Include military licenses.

\_\_\_\_\_  
\_\_\_\_\_

**MISCELLANEOUS**

- 1) Do you own your home? \_\_\_\_\_ If yes, amount of current mortgage indebtedness\$ \_\_\_\_\_
- 2) What is the amount of your indebtedness, other than than home? \$ \_\_\_\_\_
- 3) Annual Income: Applicant: \$ \_\_\_\_\_ Spouse \$ \_\_\_\_\_
- 4) Are you a proprietor or part-owner of any business or firm? \_\_\_\_\_ If yes, describe nature of business: \_\_\_\_\_

Are there any licenses for this/these business(es) in your name; i.e., liquor license? \_\_\_\_\_

5) Have you ever applied for a permit to carry a handgun? \_\_\_\_\_ Reason: \_\_\_\_\_  
Status: \_\_\_\_\_

6) What special skills have you developed through hobbies, education, occupation, or other special interests?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### EQUIRMENTS FOR EMPLOYMENT

All prospective employees must be able to meet the minimum physical standards as set by the Indiana Law Enforcement Academy. The minimum standards are as follows:

TEST	STANDARD
VERTICAL JUMP	16 INCHES
ONE MINUTE SIT-UP	29
300 METER RUN	71 SECONDS
MAXIMUM PUSH-UP	25
1.5 MILE RUN	16 MINUTES 28 SECONDS

More information on the standards is available by request.

Also if you are offered a position you will be required to pass an extensive physical as mandated by the Pension Plan prior to being hired. If you are aware of any possible medical problems you should make us aware of them so that we can check into whether the condition would be one that might possibly disqualify you from being accepted. If you have any questions on this feel free to discuss it with us.

We also reserve the right to establish or amend any standards for employment unless prohibited by law as we may deem necessary to ensure that all required standards are met.



