

APPLICATION FOR CITY OF MARINETTE PATROL OFFICER

1905 Hall Avenue
Marinette WI 54143

NAME Last: _____ **First:** _____ **Middle:** _____

Street Address: _____

City: _____ **State:** _____ **ZIP:** _____

Home/Cell Phone: () _____ **Work Phone:** () _____

e-mail address: _____ **Social Security Number:** - -

- 1) Are you at least 21 years old? yes no *If not, your application will be rejected.*
- 2) Are you a United States citizen? yes no *If not, your application will be rejected.*
- 3) Do you have a GED or High school diploma? yes no Indicate date received:
If you do not have a GED or High School diploma, your application will be rejected.

Education

	Elementary School	High School – Graduation Date	Undergraduate College/ University & Date	Graduate/ Professional
School and Location				
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
<i>Describe Course of Study & Location of Police Academy Attended to Become Certified/Certifiable in WI as a Law Enforcement Officer.</i>				

Do you possess a minimum of an Associate degree in a law enforcement related field? Yes No
If not, your application will be rejected.

****Are you certified or certifiable in the State of Wisconsin as a Law Enforcement Officer?** Yes No
If not, your application will be rejected.

Provide proof of certification as LE Officer in Wisconsin. If you do not, your application will be rejected.

- 4) Do you have a valid driver license? Yes No If yes, from what state? _____
If you do not have a valid driver's license, you must obtain one by the time of your background investigation and it must remain valid throughout the remainder of the selection process or you will be disqualified.
- 5) Have you ever failed a Marinette Police Department background investigation? Yes No
If yes, when: _____ *If within the last two years, your application will be rejected.*

6) Have you ever been employed by the Marinette Police or Fire Department? Yes No If yes, which department?

Reason for leaving? _____ resigned with charges pending _____terminated/discharged _____resigned _____still employed

Date of resignation or termination: _____ *If you were terminated/discharged by either department or resigned from either department with charges pending, you must wait one (1) year to apply. If you were terminated/discharged by either department or resigned from either department with charges pending more than one year ago, you may apply on a provisional basis, and the Police & Fire Commission will determine whether or not to accept your application based upon the report and recommendation of the Chief of Police.*

7) Have you been dishonorably discharged from any branch of the United States Military Service? Yes No
If yes, your application will be rejected.

8) Have you ever been convicted of a felony? Yes No *If yes, your application will be rejected.*

9) Have you ever been convicted of a misdemeanor crime of domestic violence? Yes No
If yes, your application will be rejected.

10) Have you ever been convicted of a misdemeanor crime? Yes No *If yes, please list below:*

CHARGE	DATE	LOCATION	COURT	DISPOSITION OF CASE

*** If you require more space, please attach additional sheet.*

NOTE: Misdemeanor convictions are not an automatic bar to employment but are reviewed in relation to the position of Patrol Officer. Convictions not reported may be cause for rejection or discharge.

11) Have you had two or more convictions for driving while under the influence, or for reckless driving, including at least one conviction in the last five years? Yes No *If yes, your application will be rejected.*

12) Has your driver license been suspended or revoked for moving violations two or more times in the last five years? Yes No *If yes, your application will be rejected.*

13) Have you used, possessed, sold, furnished, or manufactured any illegal drug or controlled substance, including marijuana, within the last three years? Yes No *If yes, your application will be rejected.*

14) Employment

Start with your present or last job. Include any job related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer	Dates of Service thru	Work Performed
Address		
Telephone Number (s)	<u>Hourly Rate/Salary</u> Starting Final	May we contact your employer or supervisor? Yes _____ No _____
Job Title	Supervisor	Reason for Leaving

Employer	Dates of Service thru	Work Performed
Address		
Telephone Number (s)	<u>Hourly Rate/Salary</u> Starting Final	May we contact your employer or supervisor? Yes _____ No _____
Job Title	Supervisor	Reason for Leaving

Employer	Dates of Service thru	Work Performed
Address		
Telephone Number (s)	<u>Hourly Rate/Salary</u> Starting Final	May we contact your employer or supervisor? Yes _____ No _____
Job Title	Supervisor	Reason for Leaving

Employer	Dates of Service thru	Work Performed
Address		
Telephone Number (s)	<u>Hourly Rate/Salary</u> Starting Final	May we contact your employer or supervisor? Yes _____ No _____
Job Title	Supervisor	Reason for Leaving

If you need additional space, please continue on a separate sheet of paper.

PLEASE ANSWER ADDITIONAL QUESTIONS AND SIGN STATEMENT ON NEXT PAGE

MARINETTE POLICE & FIRE COMMISSION
Supplementary Applicant Information

No applicant for employment shall be discriminated against because of race, color, creed, religion, sex, genetic testing, sexual orientation, marital status, membership in the military services, national origin, ancestry, age, arrest or non-job-related conviction record, non-job-related physical or mental disability, or the use or nonuse of lawful products off the employer's premises during nonworking hours.

The following information will be treated confidentially and used to comply with Federal recordkeeping requirements.

NAME Last: _____ First: _____ Middle: _____

Position applied for: **PATROL OFFICER**

◆ **SEX** (please check one):

Male Female

◆ **RACE** (please check only one):

Black/African American

Hispanic/Chicano/Puerto Rican/Mexican/Cuban/Central or South American

Two (2) or more races Non-Hispanic

Native American Indian/Alaskan Native

Asian American/Far Eastern/Indian subcontinent or Southeastern Asian (i.e., China, Japan, Korea, Philippine Islands, Samoa)

Native Hawaiian or Other Pacific Islander

White/Caucasian/European/Middle Eastern



TESTING ACCOMMODATIONS

In accordance with State and Federal laws, the City of Marinette is committed to ensure non-discrimination in employment of qualified individuals with disabilities.

Under the Americans with Disabilities Act, an individual with a disability is defined as one who: has a physical or mental impairment that substantially limits one or more major life activities; has a record of such impairment; or is regarded as having such impairment.

“Major life activities” means functions such as caring for one’s self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.

The following information will be treated confidentially and used only to provide testing accommodations. Requests for testing accommodations must be made prior to the test administration so that arrangements can be made.

Will you require any special accommodations during the examination process? yes no

If yes, what kind of accommodations will you need?

A signer A reader Extra time Other (Please describe): _____

SIGNATURE: _____ DATE: _____

Provisions of test accommodations may be granted by the Marinette Fire and Police Commission only after review and evaluation on a case by case basis. Factors considered will include the nature of the examination and the knowledge, skills and abilities required for the job. Documentation will be required.