

## Applicant's Copy: Do Not Return with Application

Important Testing Information

Dear Applicant,

Thank you for applying for a position with the City of Madison – Police Department. This letter contains important information. You should read this letter carefully to be sure you understand the procedure used during this initial phase of the process (an important part of being a Police Officer is attention to detail).

The Police Department will receive more applications than there are available positions. As a result, the Police Department has established a competitive application process. This application process is designed to ensure that the selection of recruits will be accomplished fairly and objectively.

A **Physical Agility Test** and a **Written Aptitude Test** will be administered. Each applicant must meet the minimum requirements of each test to continue the process. The physical fitness requirements are attached to this packet.

There are facilities available for changing clothes.

# Madison Police Department General Information for Police Officer Employment

<u>General Statement of Duties</u>: Police officers are responsible for the protection of life and property, the prevention of crimes, and the preservation of peace and order within an assigned geographical area. They must patrol their area while enforcing laws, ordinances, and regulations, arresting violators, investigating accidents, and complaints, securing evidence, and performing any other duties as required.

**Qualifications:** Applicants must meet the following requirements and provide the requested material for their application to be processed.

- 1. Be twenty-one (21) years of age but not have reached age forty (40), or meet the requirements defined in IC 36-8-4-7.
- 2. Must be a US Citizen.
- 3. Possess a valid driver's license and *provide a copy of such with the application.*
- 4. Include a copy of their birth certificate with their application.
- 5. Be a high school graduate or have a GED certificate. *Include a copy of such with the application along with a copy of any college credits or degree(s).*
- 6. Shall have no felony conviction or a conviction of domestic battery.
- 7. Pass a drug screening test.
- 8. Successfully pass each phase of the selection process, which includes a written aptitude and physical agility test.
- 9. Pass a physical and psychological test.
- 10. When requested, submit a complete credit history report.

**Need for Continuing Education:** New employees will be required to successfully complete a fifteen (15) week training program at the Indiana Law Enforcement Academy within one year of employment.

<u>Average Annual Salary:</u> The salary for a patrol officer after one year of service is **\$61,162** (2025) – Other benefits include a take-home car, shift pay, holiday pay, clothing allowance, paid overtime opportunities, incentive bonus opportunities, and medical/dental/vision benefits. <u>If chosen, tier one</u> <u>academy graduates in good standing will receive a **\$2500** sign-on bonus. In addition, tier one hires will receive longevity pay for their years of service with their previous law enforcement agency.</u>

## \*Certification of Application and Authorization to Release Information Forms Must Be Signed and Notarized for the Application to be considered. Please read the following information carefully.

I wish to be considered for employment as a Sworn Police Officer with the Madison Police Department.

I am a citizen of the United States, at least 21 years of age and have not reached 40 years of age, have a high school diploma or GED Certificate, possess a valid driver's license from my current state of residence, have not been convicted of a felony, class A misdemeanor, or domestic violence and have not been dishonorably discharged from the military.

I understand that I must be a resident of Jefferson County, Indiana, or the five (5) adjoining counties within one (1) month of appointment to this department.

I understand that this position requires a security clearance from the Indiana Data and Communication System, which considers a person's character, history, and criminal record.

Upon request, I understand I must participate in and pass any of the following screenings:

- 1. Written Examination
- 2. Physical Agility Test
- 3. Oral Interview
- 4. Background Investigation
- 5. Polygraph Examination
- 6. Medical Examination
- 7. Psychological Evaluation
- 8. Drug Screening

THIS APPLICATION MUST BE RETURNED IN PERSON OR BY MAIL TO THE MADISON POLICE DEPARTMENT AT 621 WEST STREET, MADISON, INDIANA 47250 (no faxes will be accepted).

## **Physical Fitness Test Requirements**

The Indiana Law Enforcement Academy has established Physical Fitness Requirements for the basic Course Training Program. Each new applicant to the I.L.E.A. will have to meet the following physical fitness standards to complete the academy requirements for certification. The Madison Police Department has adopted these standards for applicants to be eligible for employment. Each test is either pass or fail, and the applicant is required to successfully complete and pass all tests to pass this phase of the process. Anyone requiring special accommodation should contact the Chief of Police before the test.

- 1. Vertical Jump—Sixteen (16) inches minimum accepted. This measures leg power and consists of measuring how high you can jump.
- One-Minute Sit-Ups—Twenty-nine (29) is the minimum accepted. This measures abdominal, or trunk, muscular endurance. While lying on your back, knees bent, heels flat on the floor, with fingers interlaced and held behind the head, touching elbows to knees, you will be given one (1) minute to do as many knee-bent sit-ups as you can.
- 3. 300 Meter Run—Seventy-one (71) seconds minimum time allowed. This measures anaerobic power, or the ability to make an intense burst of effort for a short period or distance. This component consists of sprinting 300 meters as fast as possible.
- 4. Maximum Push-Ups—Twenty-five (25) is the minimum accepted. This measures the muscular endurance of the upper body. This component consists of doing as many push-ups as possible until muscular failure. The hands are placed shoulder-width apart, fingers pointing forward. Some parts of the hands must lie within a vertical line drawn from the outside edge of the shoulders to the floor. The administrator places one fist on the floor below the participant's chest (sternum). Starting from the up position (arms fully extended with elbows locked, both hands and both feet only touching the floor), the participant must keep the back straight at all times and lower the body to the floor until the chest (sternum) touches the administrator's fist. The participant then returns to the up position with the elbows fully locked. This is one repetition. Resting is permitted only in the up position. There is no time limit.
- 5. 1.5 Mile Run—Sixteen (16) minutes and twenty-eight (28) seconds minimum time allowed to complete the distance. This measures aerobic power and cardiovascular endurance (stamina over time). To complete this component, you must run/jog, as fast as possible, a distance of 1.5 miles.

To be eligible to continue through the hiring process, you must meet the minimum standards of each test given.

# **Application for Police Officer**

Note: Completed application must be returned to the Madison Police Department

١.	Personal History
Fu	ll Name: Phone Number:
So	cial Security Number:
Cı	irrent Address:
na ha to	It all names you have used including nicknames. If you have any surnames other than your true me, please list during what period and under what circumstances these names were used. If you ve legally changed your name, give the date, place, and court. (This information is being collected assist the department in conducting a thorough background investigation, i.e. felony convictions eck).
Bi	rth Date:
Pla	ace of Birth:
*/	ttach a copy of your certified Birth Certificate
Ar	e you a U.S. citizen? □YES □NO
II.	Family History

List all family members (living and deceased) in the following order: Parents, stepparents, foster parents, guardians, brothers, sisters, children, in-laws, spouse, and ex-spouse(s). If additional space is needed, attach a separate page (*relationship, name, address, city, state, zip code, telephone #*).

### III. <u>Previous Residence</u>

List chronically (most recent first) all of your residences in the past ten (10) years. Include addresses while attending school, if away from home, and all military addresses including those off military base (*date, from – to, city, state, zip code*).

## IV. Extracurricular Activities

List past or present membership in clubs, organizations, or volunteer work (*name, address, type, membership period/office*).

## V. <u>Subversive Organizations</u>

Are you now or have you ever been a member of or affiliated with any organization, association, movement, group, or combination of persons that advocates the overthrow of our constitution for 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 unconstitutional means? If you answered yes, describe the circumstances. Attach a separate sheet to provide a full detailed statement.

 $\Box$  YES  $\Box$  NO

## VI. Military Record

Are you registered for selective services? \_\_\_\_\_\_

Selective Service Number: \_\_\_\_\_\_

Have you ever served on active duty in the armed services of the US? \_\_\_\_\_\_

Branch of Service: \_\_\_\_\_

Dates of Active Duty (mm/dd/yyyy): \_\_\_\_\_

Type of Discharge\*: \_\_\_\_\_\_

\*No applicant will be automatically rejected because of less than honorable discharge (except dishonorable), but the discharge may be considered with other information. If the discharge is less than honorable, explain on a supplemental page.

## Attach copies of all DD214 long forms or their equivalent.

Are you currently in the US Reserve or National Guard: \_\_\_\_\_\_. If yes, what is your obligation (if any), unit, or location?

While in service, were you ever convicted of any offenses? \_\_\_\_\_\_. If yes, give details:

## VII. <u>Employment History</u>

Starting with the present or most recent employer, list employment history for the past five (5) years. If more, attach a supplemental page.

From	То	Employer		Telephone	
Job Title	1	1	Address		
Immediate Supervisor and Title			Summarize the Nature of Work Performed and Job Responsibilities		
Reason for Leaving			Hourly Rate/Salary		
From	То	Employer		Telephone	
Job Title	I	1	Address		
Immediate Supe	ervisor and Title	9	Summarize the Nature of Work Performed and Job Responsibilities		
Reason for Leaving			Hourly Rate/Salary		
From	То	Employer		Telephone	
Job Title	bb Title		Address		
Immediate Supervisor and Title		2	Summarize the Nature of Work Performed and Job Responsibilities		
Reason for Leaving			Hourly Rate/Salary		
From	То	Employer		Telephone	
Job Title			Address		
Immediate Supervisor and Title			Summarize the Nature of Work Performed and Job Responsibilities		
Reason for Leaving		Hourly Rate/Salary			

From	То	Employer		Telephone
Job Title				
Immediate Supervisor and Title		2	Summarize the Nature of Work Performed and Job Responsibilities	
Reason for Leaving		Hourly Rate	:/Salary	

## VIII. Personal References

List for personal character references (not related to you).

Name	Telephone	Years Known	Address

### IX. Special Skills and Qualifications

List any experience, skills, abilities, or special qualifications that you feel would be relevant to the job for which you are applying.

### X. Arrests and Citations

Show <u>ALL</u> arrests including felony, misdemeanor, juvenile, and traffic. Give the date, place, and full details, including the disposition of each incident. (*Employment of persons with criminal records will be per the attached Policy Statement and ex-offenders on page eight (8).* 

Are you presently involved in an active Criminal or Civil proceeding? $\Box$ YES	□ NO	
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If you answered yes, please explain:

Have you ever been fingerprinted for any reason (*job application, gun permit, etc.*)? 
YES NO If yes, give the date, place, and full details for occurrence.

#### XI. Vehicle Operator's License

Give the following information concerning any vehicle operator's license you have held or now hold. Submit a copy of your driver's license with you application (type of license, state of issuance, exp. date, license number).

#### XII. **Credit References and Obligations**

Give names and addresses of the individuals, companies, or others to whom you are indebted and the extent of your debt (including any loans on which you are a co-maker, mortgages, open credit, accounts, etc.).

#### XIII. **Educational Background**

Name and Location	Years Completed	Did you Graduate?	Course of Study
High School			
College			
Other			

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you answer yes to any of these questions, use a separate sheet of paper to explain.

- 1. Have you ever been asked or allowed to resign from any position? 

  YES NO
- Have you ever been counseled, reprimanded, suspended, or terminated from any position?
   □ YES □ NO
- 3. Have you ever taken a polygraph or voice stress analyzer? 
  YES NO
- 4. Has your driver's license ever been suspended or revoked? □ YES □ NO
- 5. Have you ever been placed on probation for any offenses, sealed, or expunged records included? □ YES □ NO
- 6. Have you ever been the subject or suspect of a police investigation? 
  YES NO, if yes, explain in detail as to what offense, jurisdiction, date, outcome, or result of the investigation on a separate sheet of paper.
- For past or present Law Enforcement Officers:
   Have you ever been the subject of an internal investigation? 

   YES 

   NO
- 8. Have you applied, or do you presently have an application on file, or are you going through a hiring process, with any other Law Enforcement Agency? 
  YES NO
- 9. Have you ever illegally possessed, used, or sold drugs, including marijuana? 
  YES NO
- 10. Have you possessed, injected, inhaled, swallowed, or ingested by any other means, any illegal drug? □ YES □ NO
- 11. Have you ever been convicted of a domestic violence-related crime? Domestic violence means any assault, aggravated battery, battery, sexual assault, sexual battery, stalking, aggravated stalking, or any criminal offense resulting in physical injury or death of one family or household member by another who is or was residing in the same single-family dwelling unit. □ YES □ NO
- 12. Have you ever been a party to a domestic violence injunction or petition?  $\Box$  YES  $\Box$  NO
- 13. Have you ever been involved in any domestic violence incident where the police responded, and a written police report of the incident was completed? □ YES □ NO
- 14. Have you ever been involved in any domestic violence incident where the police responded, and a written report was not completed? 
  YES NO

Foreign Languages: **E** = Excellent **G** = Good **F** = Fair

Language: \_\_\_\_\_

•	Reading:	Е	G	F
•	Speaking:	Е	G	F
•	Understanding:	Е	G	F
•	Writing:	Е	G	F

## **Madison Police Department**

Applicant's Request/Waiver to Release Information:

I hereby authorize and request all persons to whom this request (original or reproduction) is presented, having information, relating to or concerning me, to furnish such information to a duly appointed officer of the Madison City Police Department.

I am aware that this information may be personal and may otherwise be protected from disclosure by my constitutional, statutory, or common-law privileges. I hereby expressly waive all privileges which may attach to such communication or disclosure and release all persons, firms, and corporations from all claims, of any nature as a result of said communication or disclosure.

Information to disclose:

- Financial Records
- Criminal History
- Check Educational Records
- Organizational Memberships
- Past/Present Employment Records

\*Any background material/information relevant to reputation and/or moral character.

\*These records will be retained on file in the Madison Police Department, in the Office of the Chief of Police.

Signature of Applicant:	Date:
State of:	
County of:	
Subscribed and sworn to before, a No of, 20	otary Public, in and for said county and state, this day
My Commission Expires:	Notary Public:
	Printed:

County of Residence: \_\_\_\_\_

\*NOTE: This page must be Notarized, signed, and returned with the application.

Because of the sensitive and important position of a police officer, the Madison Police Department must select individuals who possess the best physical, mental, moral, and emotional character for the performance of police duties. To best ascertain who those individuals are, it is necessary to gather as much information as possible about each applicant which may have a bearing on their ability to perform. Several questions in this application are designed to give the Department a complete background on each applicant. Those particular responses to questions marked with an (\*) The asterisk shall not act as an automatic bar to selection but will be considered along with the attendant facts. No question on this application is intended to secure information to be used for unlawful discrimination.

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APPLICANT: PLEASE READ CAREFULLY BEFORE SIGNING. IF YOU HAVE ANY QUESTIONS REGARDING THE FOLLOWING STATEMENT OR ANY QUESTIONS CONTAINED IN THIS APPLICATION, PLEASE ASK EITHER THE CHIEF OF POLICE OR THE MAJOR OF THE MADISON POLICE DEPARTMENT.

\* I certify that the information contained in this application is correct and complete to the best of my knowledge. I agree to inform the Department of any additional information relating to questions raised on the application, which occur subsequent to my completion of the application. I realize that misrepresentation of the fact of the failure to update any information relating to questions on the application may be cause for rejection of this application or dismissal after employment. Final employment is contingent upon satisfactory completion of all pre-employment procedures including interview, examinations, verification of all relevant information, and all post-employment examinations which may include but are not limited to physical and psychological examinations and any applicable statutory provisions. I acknowledge that I have read the above statement and fully understand the same.

Signature of Applicant:	Date:	
State of:		
County of:		
Subscribed and sworn to before, a Notary Po of, 20	ublic, in and for said county and state, this	day
My Commission Expires:	Notary Public:	

Printed: \_\_\_\_\_\_

County of Residence: \_\_\_\_\_

\*NOTE: This page must be Notarized, signed, and returned with the application.