



**CITY OF TECUMSEH
POLICE DEPARTMENT**

**JIMMY STOKES
CITY MANAGER**

**J.R. Kidney
POLICE CHIEF**

REVISED December 10, 2019

CITY OF TECUMSEH APPLICATION FORM INSTRUCTIONS:

YOU MAY SUBMIT YOUR APPLICATION BY MAIL TO:

Chief JR Kidney
109 West Washington
Tecumseh, Ok 74873

YOU MAY SUBMIT YOUR APPLICATION IN PERSON TO:

Chief JR Kidney
109 West Washington
Tecumseh, Ok 74873

FOR MORE INFORMATION, YOU MAY CALL:

Chief JR Kidney
109 West Washington
Tecumseh, Ok 74873
405-598-3755

READ THE FOLLOWING INSTRUCTIONS VERY CAREFULLY AND FOLLOW THEM EXPLICITLY. FAILURE TO DO SO MAY RESULT IN YOUR ELIMINATION FROM THE PROCESS.

1. Do not type any information on this application.
2. You must complete the application in your own handwriting.
3. Use a pen with blue ink only.
4. Print
5. Check for spelling, grammar, punctuation and context.
6. If the information being requested is not applicable to you, write N/A.
7. If you do not know, write Unknown.
8. If you cannot remember, write Cannot Remember.
9. Do not erase or use white out to correct a mistake.
If you make a mistake—draw one line through the mistake and write your initials directly above the mistake.
10. Obtain copies (all copies must be made on 8 ½ X 11 plain white typing/copy paper) and attach to the back of the application in EXACTLY the following order:
 - Birth Certificate
 - Drivers License
 - High School Transcript and Diploma or G.E.D. Certificate
 - College Transcript and Diploma (if applicable)
 - Other copies of documentation as may be prescribed in the Application form itself but not listed in these instructions.
 - CLEET Certificate (Certification as Law Enforcement Officer) or equivalent from local, state and federal organizations, if applicable. Also, include active duty military police.
 - All letters of recommendation you may have received from anyone, including officers from the TECUMSEH Police Department.
11. COMPLETE ALL RELEASE OF INFORMATION FORMS, SIGN AND LEAVE ATTACHED TO THE APPLICATION.

REASONS FOR REJECTION:

1. Felony Conviction
2. Numerous misdemeanor charges (including traffic violations)
3. Failure to meet minimum requirements
4. Nepotism Policy per Section 25 Article III Definitions B.

THE CITY OF TECUMSEH
114 North Broadway
Tecumseh Ok 74873

AN EQUAL OPPORTUNITY EMPLOYER

PLEASE PRINT. USE BLUE INK ONLY. Answer each question clearly and completely in your own handwriting. Use a blank page if you need additional space for your answers. If you need assistance in completing this application, please ask.

Last Name First Middle DATE

Street Address City, State, Zip

Social Security No. Birth Date Home Phone Business Phone Cell Phone E-mail address

List any other name(s) you have been known by: _____

Provide any other Social Security number you have used: _____

Date available for work: _____ Are you available to work any shift? _____ weekends? _____ nights? _____

Are you over the age of 21? _____ Are you CLEET Certified? _____ Date of certification? _____

Are you a U.S. citizen? _____ Are you legally eligible to work in the United States? _____ (Verification will be required upon employment and failure to furnish documentation will be cause for separation).

Have you ever worked for the City of Tecumseh? _____ If yes, give prior name, dates and reason for leaving:

Are you related to any City employee or any member of the City Council by blood or marriage? _____

If yes, who? _____ and how related?

Have you applied with this Police Department before? _____ When? _____ Have you applied with any other Police Department in the last 5 years? _____ If yes, which department(s) and when? _____

Do you know any Tecumseh Police Officers? _____ If yes, who? _____

How did you learn about this opening? _____

All information in this application will remain confidential and only released to those with a need to know; however, it will be subject to extensive background examination and polygraph. Any false, misleading, or incomplete statements will be considered grounds for rejection.

The City is concerned with your ability to perform the job and will not at this time consider your need for reasonable accommodation except as necessary to complete the application form. If after reviewing your application form, verifying your responses, conducting an extensive background investigation, conducting necessary interviews or tests, you are considered for the job and would need reasonable accommodation to perform the essential job functions or demonstrate performance in the examination process, the parties will explore these alternatives. NOTE: The City conducts a post-offer, pre-employment exam which will determine whether you are able to do the essential functions of the job with or without accommodation and without substantial risk of harm to yourself, other officers and employees and the public.

REVISED December 10, 2019

As you complete this application, provide us with prior education, work experience, and any relevant training or certificates and licenses that would indicate your knowledge, skills, and abilities to perform the job. Be as specific as possible since you will be screened on what you included regardless of what you might otherwise be able to perform.

It is extremely important you provide correct responses and you indicate your qualifications that enable you to do the essential functions of the police officer position. Failure to answer these questions may indicate that you have not provided the information to qualify you for the present position.

Before continuing, please review and sign the attached job description for a Police Officer.

EDUCATION

1. List below the high school(s), college(s), correspondence, business or technical schools attended. (Exclude military schools.)

Name of School	Location, City and State	Type of School	Dates Attended	Hours Completed	Graduate Degree

2. List all special educational honors, scholarships, etc., received.

3. List all memberships in school societies, fraternities, or clubs. (Exclude membership in organizations indicating race, national origin, age, religion, political affiliation or other protected status if you wish).

4. Have you ever been expelled or suspended from any school or dropped out of school because of poor scholastic standing? _____ If yes, please explain circumstances: _____

MILITARY SERVICE

5. Have you registered for the selective service? _____ If yes, date _____ and selective service number _____

6. Have you served in any branch of the military? _____ If yes, indicate branch _____ and current status _____. List below military training or experience that would assist you in being a police officer.

Name of School	Location, City and State	Type of School	Dates Attended	Hours Completed	Certificate Received

7. List any medals, decorations, campaign and theater ribbons awarded to you while in the armed forces:

8. Were you honorably discharged? _____ Please provide a copy of any discharge papers (Forms DD214 and DD214 Member 4)

EMPLOYMENT HISTORY

9. Beginning with current or last employer, list all jobs you have held during the last 10 years, including part time and temporary.

A. Name and address of Employer _____

Business telephone number _____
Name of immediate supervisor _____
Ending salary _____
Dates employed from _____ to _____
Number of hours worked per week _____
Position _____
Reason for leaving _____
Description of work, specific duties: _____

Names of 2 coworkers from this job: _____

B. Name and address of Employer _____

Business telephone number _____
Name of immediate supervisor _____
Ending salary _____
Dates employed from _____ to _____
Number of hours worked per week _____
Position _____
Reason for leaving _____
Description of work, specific duties: _____

Names of 2 coworkers from this job: _____

C. Name and address of Employer _____

Business telephone number _____
Name of immediate supervisor _____
Ending salary _____
Dates employed from _____ to _____
Number of hours worked per week _____
Position _____
Reason for leaving _____
Description of work, specific duties: _____

Names of 2 coworkers from this job: _____

D. Name and address of Employer _____

Business telephone number _____
Name of immediate supervisor _____
Ending salary _____
Dates employed from _____ to _____
Number of hours worked per week _____
Position _____
Reason for leaving _____
Description of work, specific duties: _____

Names of 2 coworkers from this job: _____

E. Name and address of Employer _____

Business telephone number _____
Name of immediate supervisor _____
Ending salary _____
Dates employed from _____ to _____
Number of hours worked per week _____
Position _____
Reason for leaving _____
Description of work, specific duties: _____

Names of 2 coworkers from this job: _____

EMPLOYMENT HISTORY, Continued

F. Name and address of Employer _____

 Position _____
 Reason for leaving _____
 Description of work, specific duties: _____

Business telephone number _____
 Name of immediate supervisor _____
 Ending salary _____
 Dates employed from _____ to _____
 Number of hours worked per week _____

Names of 2 coworkers from this job: _____

10. Account for all periods of time since age 18 that you were not in school, working, in the military, or recuperating from an illness or injury if over 90 days in duration: _____

11. If you have had no prior employment experience, please explain what you have done since high school to prepare you for this job? _____

12. Have you ever been fired, suspended, or put on an inactive status (other than for prior workers compensation cases) by any of your previous employers? _____ If yes, state circumstances: _____

13. In chronological order, list all special training received and occupational schools attended in your employment history. (Exclude military schools and training, high schools, colleges, etc.)

Name of School	Location, City and State	Type of School	Dates Attended	Hours Completed	Certificate Received

14. Which of your previous jobs did you like the best? Explain why: _____

15. Which of your previous jobs did you like the least? Explain why: _____

16. Has any corporation, partnership or business of which you are/were an officer, partner, etc. ever been issued or denied a license or permit by any City, State or Federal Government? _____. If yes, give full details. Exclude drivers license(s): _____

EMPLOYMENT HISTORY, Continued

17. Are you now engaged in any business as an owner, partner (active or silent) or other connection (such as an employee)? _____ If yes, give full details: (e.g. name, address, etc) (Exclude Organizations indicating race, National origin, age, religious, political affiliation or other protected status if you wish) _____

18. Indicate if you have additional information or comments concerning any volunteer experience, special licenses or training which would help us determine your suitability for this position: _____

RESIDENCE

19. Beginning with current residence, list each and every place you have resided in the past 10 years.

Month/Year From	Month/Year To	Number and Street	City, State	Name of Landlord and phone no. (if known)

CRIMINAL RECORD

20. Law enforcement personnel must have a clean conviction record and not be addicted to controlled substances. (arrest information will not necessarily disqualify you). Have you ever been arrested? _____ placed in jail? _____, detained? _____, received a conviction? _____, suspended sentence? _____, deferred sentence which was not expunged or sealed? _____, probation, _____ by any court of law or enforcement body anywhere? If so, please explain below.

Date	Charge	Age at Time	Court of Jurisdiction	Disposition	Location of Police Agency Involved

Other Explanation: _____

DRIVING RECORD

21. Can you operate an automobile or a motorcycle? _____ List below operators licenses you have or have had.

License Number(s)	State	Date Expires	Type

22. Does your driver's license have any restrictions? _____ If yes, explain? _____

23. Do you currently have any points on your driving record? _____ If yes, how many? _____

24. Have you ever had a driver's license suspended or revoked? _____ If yes, please explain: _____

25. Do you have liability insurance on the vehicles you operate? _____ Have you ever had your insurance policy canceled? _____ If yes, explain: _____

26. In the last seven years:

- a. How many traffic tickets have you received? _____
- b. Number of times arrested for driving while drinking or under the influence? _____
- c. Number of times arrested for reckless driving of any type? _____
- d. Number of accidents you were involved in as a driver for which you were charged or cited? _____
- e. Have you been involved in serious accident(s) where you were the driver? _____

If yes, or anything other than no or none to any of the above, explain: _____

BACKGROUND REFERENCES

27. The following information will be used to question family members and associates to determine your fitness to do the essential functions of the job. The City is not limited to this list, however.

Name, phone number and address of current spouse, if applicable:

Name, phone number and address of former spouse, if applicable:

Name, phone number and address of college roommate, if applicable:

Name, phone number and address of military associate, if applicable:

Name, phone number and address of Mother, Father, and sibling(s):

BACKGROUND REFERENCES, Continued

Name, phone number and address of any other personal references:

Name, phone number and addresses of co-workers from current or previous jobs:

28. List any social, labor, civic and fraternal organizations that you have or now belong to, which demonstrates your fitness for this position. Exclude membership in organizations indicating race, National Origin, age, religion, or political affiliation. _____

SUBVERSIVE AFFILIATIONS

29. Subversive organization shall mean any group or organization that does not support local, State, and Federal Laws, and advocates violence and force. Please answer the following:

- a. Have you advocated, advised or taught a doctrine that the government of the United States of America or of any state or any political subdivision thereof should be overthrown by force, violence or by any unlawful means? _____
- b. Are you now or have you ever been a member of any subversive organization? _____
- c. Have you ever been connected, or affiliated in any manner with, or have you ever attended meetings of, any subversive organization? _____
- d. Have you ever paid, collected, or solicited any money, dues, or contributions to, for, or on behalf of any subversive organization? _____

If you answer yes to any part of question 29, please indicate the circumstances: _____

MISCELLANEOUS

30. Are you the co-maker or signer of an outstanding loan? _____ If yes, explain details:

31. Have you ever been bonded? With respect to each time bonded, state details below.

Date	Reason	By Whom	Address, City, State

32. Have you ever been finger printed? _____ If yes, complete the following.

When	Where	For Whom	Purpose

33. What prior experience, if any have you had with firearms? Explain: _____

34. Other than in a law enforcement capacity, have you ever been served with a summons or subpoena? _____
If yes, how many times? _____ and list reasons below. (Exclude Jury Service)

Date	Charge	Location	Court Disposition	Police Agency Concerned

MISCELLANEOUS Continued

35. Do you know of any other information that we have not asked, which may come out in the background investigation concerning your present fitness to handle the essential functions of the job? _____ If yes, you have an opportunity to disclose at the present time. **(We are not, in this question, interested in your physical or mental ability to do the job).**

**CITY OF TECUMSEH
POLICE DEPARTMENT**

**AUTHORIZATION TO RELEASE MEDICAL
AND WORKERS' COMPENSATION INFORMATION**

TO WHOM IT MAY CONCERN:

I hereby authorize any physician or other authorized medical representative, under contract with the City of TECUMSEH, bearing this release, or a photo static copy thereof, within one year of its date, to obtain information from your files pertaining to my medical records, charts, or any medical history information to determine whether I can do the essential functions of the position of Police Officer with the City of TECUMSEH. I hereby direct you to release such information upon request of the bearer.

This release is executed with full knowledge and understanding that the information is for the official use of any medical group, medical or psychological practitioner or professional for the City of TECUMSEH. Consent is granted for the purpose of performing such post offer medical or psychological exam as required by the TECUMSEH Police Department. Such information is confidential and will not be released to the City except as covered by the Americans with Disabilities Act and as required by State Law.

I hereby release you as the custodian of such records and any hospital or other repository of medical records, including its officers, employees or related personnel both individually and collectively, from any and all liability for damages of whatever kind which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it.

A copy of this authority to release will be as valid as the original. Should there be any question as to the validity of this release, you may contact me as indicated below.

Date _____ Signature: _____
Month, Day, Year

Name Typed or Printed: _____

Current Address: _____

Phone Number: _____

Witness: _____ Date: _____

CITY OF TECUMSEH
POLICE DEPARTMENT

PERSONAL QUESTIONNAIRE

As an applicant for the position of Police Officer with the City of TECUMSEH, you will be subjected to an intense background investigation, including a polygraph on any of these questions. The following questionnaire is a preview of items that will be necessary for us to check into. It will be to your benefit to answer all questions honestly and to the best of your ability.

1. Have you ever used any controlled substance such as a narcotic, speed, PCP, barbiturate, amphetamine, LSD, cocaine, crack, heroin, marijuana, etc. that was not prescribed for you by a medical doctor? Yes No. If yes, please indicate the type of drug, the date of use, and extent of usage:

2. Have you ever used anything to get high to include prescription medications? Yes No.
3. During the past five (7) years, except as covered by medical procedure, have you sniffed or inhaled glue, paint, lacquer, gasoline, or any substance with the intent of getting high or intoxicated? Yes No. If yes, please indicate the particulars:

4. Have you ever stolen anything of value? Yes No. If the answer is yes, please indicate what it was, when it happened, and how often it happened.

5. Have you ever been arrested and/or convicted of any crimes? Yes No. If yes, be sure you have explained this in detail indicating the outcome of the conviction on Section 20 of the application form.
6. Do you support the local, State and Federal laws, and are you willing to do so without reservations. Yes No.
7. Are you able to do the essential functions of the job of Police Officer with or without reasonable accommodation? Yes No.
8. Have you ever had any traffic tickets? Yes No.
9. Have you ever failed a polygraph test? Yes No.
10. Have you ever used prescription marijuana? Yes No.
11. Have you ever used recreational marijuana? Yes No.

DATE: _____ SIGNATURE: _____
(Month, Day, Year)

Payroll Department

EQUAL EMPLOYMENT OPPORTUNITY CITY OF TECUMSEH POLICE DEPARTMENT APPLICATION DATA FORM

The completion of this form is voluntary and will be kept in a confidential file separate from the Application for Employment; however, its completion will help the City of TECUMSEH comply with state and federal reporting requirements. This information will be used for statistical purposes only and will not be used in the selection process. Thank you for providing us with this information.

Position Applied For: _____

Applicant Name: _____ Social Security No.: _____

Address: _____ City/State/Zip: _____

ETHNIC BACKGROUND

- Alaskan Native
- Asian
- American Indian
- Black
- Caucasian (White)
- Hispanic (Spanish Origin or Descent)
- Pacific Islander
- Other

SEX

- Male Female

DATE OF BIRTH: _____ AGE: _____

ACTIVE MILITARY SERVICE IN THE ARMED FORCES: Branch _____

From: _____ To: _____ Type of Separation: _____

Highest Rank Achieved: _____ Duties: _____

CHECK IF ANY OF THE FOLLOWING ARE APPLICABLE:

- Vietnam Era Veteran Disabled Veteran Handicapped Individual

CITY OF TECUMSEH APPLICATION FOR EMPLOYMENT POLICE OFFICER APPLICATION

READ CAREFULLY BEFORE SIGNING

I certify that I am the person named above and that facts given in this application are true and complete to the best of my knowledge. In signing this statement I do so with the understanding that the truthfulness of all statements herein will be investigated and if found incorrect, incomplete, or misleading, it may render me ineligible for employment as a Police Officer.

I hereby grant permission to the City of TECUMSEH to investigate any information included in the application and I agree to submit to a pre-employment drug screen and a post offer medical examination. I understand that this application is not a contract of employment. I hereby release the City and its agents from all liability in making any investigation and inquiry relative to information contained in the application form. I understand that if employed, false or misleading statements given in this application or interview may result in discharge. I understand that I am required to abide by all rules and regulations of the City.

I hereby authorize any City, County, State, or Federal Agency or former employer or any individual listed in this application form to furnish, to any member of the TECUMSEH Police Department, any information concerning me necessary to process this questionnaire. A photo static and/or verifax copy of this authorization shall be considered as valid as the original.

Date _____ Printed Name: _____
Month, Day, Year First, Middle, Last

Signature: _____

CITY OF TECUMSEH POLICE DEPARTMENT AUTHORITY TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

I hereby authorize any sworn Police Officer or other authorized representative of the TECUMSEH Police Department bearing this release, or a photo static copy thereof, within one year of its date, to obtain any information from your files pertaining to my employment, credit, or educational records including, but not limited to, academics, achievements, attendance, athletics, personal (non medical) history and disciplinary records. I hereby direct you to release such information upon request of the bearer.

This release is executed with full knowledge and understanding that the information is for the official use of the TECUMSEH Police Department. Consent is granted for the TECUMSEH Police Department to furnish such information as is described above, as third parties in the course of fulfilling its official responsibilities.

I hereby release you as the custodian of such records and, any school, college university or other educational institution, credit bureau, lending institutions, consumer reporting agency or retail business establishment including its officers, employees or related personnel both individually and collectively, from any and all liability for damages of whatever kind which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it.

A copy of this authority to release will be as valid as the original. Should there be any question as to the validity of this release, you may contact me as indicated below.

Date _____ Signature: _____
Month, Day, Year

Name Typed or Printed: _____

Current Address: _____

Phone Number: _____

Witness: _____ Date: _____

CITY OF TECUMSEH POLICE DEPARTMENT

CONFIDENTIAL INFORMATION AGREEMENT FORM

A thorough investigation will be conducted to determine your qualifications for the position of Police Officer. To a great extent, your ability to be qualified for employment will depend on information obtained in confidential interviews with persons with whom you have been associated, including the personal references you have listed.

If the reasons for your non-acceptance are of a temporary nature, whereby you could be accepted at a later date, you will be so notified. Failure to be certified and hired at the present time does not indicate that you cannot apply at a later date but that other candidates provided experience, education, and background data that was more suitable for employment. All information regarding the application process is confidential.

I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENT.

Date _____ Signature: _____
Month, Day, Year

Witness: _____ Date: _____

CITY OF TECUMSEH
JOB DESCRIPTION

POSITION: Police Officer
DEPARTMENT: Police Department
DIVISION: Police Department

JOB SUMMARY: This is a non-exempt position performing law enforcement services and crime prevention. Works under the immediate direction of the shift Supervisor. “Job descriptions may be modified based on City needs and employees may be required to perform function beyond those described below and employees are “at will employees” in that either party may terminate the employment relationship.”

ESSENTIAL DUTIES:

- Enforces state and federal laws and City ordinances and traffic laws; and issues citations to violators of traffic laws.
- Patrols the City checking buildings, bars/clubs, residences, etc. for suspicious activity and handles situations according to procedures.
- Directs traffic in congested and emergency areas; reports safety hazards; responds to emergency calls; administers first aid; investigates cause and files accident reports; assists fire and EMS services as necessary.
- Investigates crime scenes; talks to or interviews witnesses, victims, and potential suspects; searches for and preserves evidence; participates in line-ups; makes oral or written reports such as criminal complaint forms or narrative reports; testifies in court.
- Makes arrests on criminal and traffic related offenses at the scene; executes search warrant and arrest after obtaining sufficient evidence to arrest; determines if a person is a danger to self or others and evaluates the mental stability of the individual.
- Speaks before citizens and citizen's groups; participates in various training sessions; communicates with other law enforcement personnel in various agencies including City Court personnel and District Attorney's office
- Performs other duties as assigned.

MINIMUM QUALIFICATIONS:

- Must be not less than 21 nor more than 45 years of age at employment and a citizen of the United States.
- **Must possess high school diploma or G.E.D. and a valid Oklahoma driver's license with an excellent driving record.**
- Must not have been convicted of a felony or have pending criminal actions. Must not be a present or recent user of controlled substances or have DUI, DWI, or reckless driving violations within last 5 years.
- Must demonstrate through background investigation, interviews, and other tests (including comprehension/aptitude tests, practical exams, MMPI-2/CPI or related psychological performance tests, polygraph, drug tests, etc.) that he/she is suited for the position of police officer. Must pass the state required police pension physical examination.
- Although this is an entry level position, the incumbent must satisfactorily complete 12 months as a probationary officer, obtain CLEET certification, complete written and knowledge requirements, obtain field experience under direct supervision of a field training officer, pass shooting qualifications, etc.

KNOWLEDGE, SKILLS AND ABILITY:

- Ability to operate two-way radio and walkie-talkie in field situations; effectively operate radar equipment, etc; ability to perform routine preventive maintenance on vehicle.
- Ability to drive vehicle both safely and efficiently; locate places on a map; receive radio instructions and provide directions to others.
- Ability to read, understand and interpret ordinances, laws, and other operating procedures; ability to investigate crimes and prepare reports; ability to communicate orally and in writing.
- Ability to work with others and follow orders or allow a superior officer(s) or other trained experts to take charge as required. Must be flexible in dealing with all situations.
- Ability to deal effectively with public using tact and diplomacy; ability to remain calm in emergency situations; ability to perform first aid or CPR or assist other emergency personnel administering aid; provide constitutional Miranda warnings.
- Ability to make split second decisions that could affect the well being of the public, department, fellow employees, as well as the officer's safety. Ability to interface with other law enforcement personnel and safety personnel.
- Ability and willingness to maintain strict confidentiality.
- Ability and skill using firearms, hand to hand combat, and other means of defense.
- Ability to effect arrest of a resisting person.
- Must be able to respond to varying situations with sensitivity and diplomacy and know how to deal with stressful, hostile or irrational persons, whether due to physical or mental disability, socio-economic differences, drugs, or other factors.

WORKING CONDITIONS/PHYSICAL REQUIREMENTS:

- Subject to working rotating shifts, holidays, weekends, extended hours, emergency call out and court appearances on regular days off.
- Exposure to inclement weather conditions and requires continuous attention to safe working and operating procedures to ensure safety of self and fellow citizens.
- Operates both as a member of a team and independently at incidents of uncertain danger and duration.
- Subject to body attacks while making arrests
- Faces exposure to infectious agents such as hepatitis B, HIV or other communicable diseases and all kinds of persons who have vomited or have been severely injured.
- Must be able to wear a bullet-proof vest and follow all safety procedures of the department.
- Requires physical strength and stamina to chase and subdue fleeing persons; to arrest them if necessary; and to bring them into custody.
- Requires physical strength and stamina to rescue victims.
- Requires visual acuity to identify suspects, detect danger, read licenses and tags, etc.
- Requires aural acuity to understand conversations in quiet and noisy environments, understand radio transmissions, distinguish between car backfires and gun shots, determine location of persons in distress, etc.
- Requires speech that is clear and distinct so that one is clearly understood while transmitting information over two-way radio, or talking to victims, suspects, etc.

SUPERVISION REQUIRED: Works under general supervision of shift Supervisor.

SPECIAL LICENSES OR CERTIFICATIONS REQUIRED: CLEET Certification with in 6 months.

If you are offered employment, you will then be given a pre-employment state required medical examination, which will determine whether you can do the essential functions of the job without substantial risk to yourself and the public. After reviewing the essential functions of this position, are you able to perform them with or without accommodations?

Yes _____ No _____

Police Applicant Processing

All applicants for police officer positions shall complete the process as outlined below:

Police Officer application—including background information.

Police Officer Aptitude Test

Background Check—To be conducted by the Criminal Investigation Division to include, at a minimum, an O.S.B.I. Records Check, Triple 1 Records Check, Driving Records Check, employment background check, personal reference check, and possible home interview.

Impulse Testing

Oral Board—Panel selected by the Chief of Police

Selection—Selection by the Chief of Police for conditional offer of employment

Conditional offer of employment

Polygraph exam

M.M.P.I. and or C.P.I. and interview and or other exams as maybe required as determined by the Chief of Police

Medical Examination

Offer of employment contingent upon satisfactory completion of the polygraph, MMPI, CPI, and medical examination.

The City is required to complete and submit Form 100 from the Oklahoma Police Pension and Retirement System for all officer candidates that are offered full-time employment.

Applicant fitness standards

The standards are universal. There is no deviation in regard to sex, age or weight. The listed times or repetitions are the minimums which must be achieved by each applicant.

Although not required, we strongly suggest participants consult with their own medical doctor, as to their current physical condition, to determine their individual ability to perform these assessments.

Headphones will not be allowed.

Time

Physical Agility Test Has a 2 minute 30 second time limit.
Obstacle Course consists of.

Shuffle Step +10 seconds if improperly executed.

Sprint approximately 20 yards.

5 Foot Wall + 30 seconds if improperly executed or unable make it over wall.

Elbow Crawl + 10 seconds if improperly executed.

Window +30 seconds if improperly executed or unable to make it through the window.

Serpentine + 10 seconds if improperly executed.

Tire Drag + 30 seconds if improperly executed or unable to drag the tire.

What Candidates should wear during the Test

- Tennis shoes (sport shoes or sneakers) are recommended.
- Clothing that you are not afraid of getting dirty or damaged.
- Candidates are encouraged to wear sweat pants and a t-shirt. To prevent pants from moving down the legs and coming off during the obstacle course, candidates should have pants that have a drawstring to ensure a tight fit. NO SHORTS.
- Shorts are not recommended for safety reasons.
- Candidates should NOT wear watches, rings or other items which could harm them while taking the test.

What Candidates should do prior to taking the Test

Just prior to taking the test, candidates should consider jogging lightly, performing some jumping jacks to get the blood circulating, and stretching to prepare themselves for the sort bust of physical exertion in which they are about to engage.

Criteria for passing the Obstacle Course

1. Candidates must successfully complete all components in 2 minutes and 30 seconds or less.
- All areas of the Physical Agility / Obstacle Course must be completed within the allotted time.
 - Upon completion of the test, candidates will be told their times and informed of pass / fail status.

Waiver of Liability

All participants, must, prior to participating in the in the Physical Agility / Obstacle Course sign A waiver of Liability and Release of All Claims Form, if they wish to continue in the hiring process.

Liability Release and Hold Harmless Agreement Form

I, _____, being 21 years of age or older, do for myself hereby release, forever discharge and agree to hold harmless the City of Tecumseh, The Tecumseh Police Department, its directors, officers, staff, leaders, managers, and associated personnel including those of its affiliated organizations, all of which are hereinafter referred to as 'Releases', from any and all liability to each of the undersigned, his/her heirs or next of kin for any and all against any claim by or on behalf of the applicant as a result of the applicant's participation in the applicant testing.

I, the undersigned participant, acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including disability or death, and economic losses which might result not only from their own actions, inactions or negligence, but action, inaction or negligence of others. Furthermore, I hereby personally assume all risks in connections with this testing process, of injury, sickness, death, damage and expense as a result of participation while participating in the testing process, and/or being transported to or from the same, including expenses incurred, including without limitation, all risks connected therein, whether foreseen or unforeseen.

I accept these risks as my own, and it is my intention by this instrument to exempt and release the Releases from all liabilities. Further, authorization and permission is given to the Releases to furnish and hereby release liability of transportation. I understand that I am not required to participate in said program, but I want to do so to be considered for the position of a police officer, despite the possible dangers and risks and despite this Release. I, therefore, agree to assume and take on myself all of the risks and responsibilities in any way associated with this activity.

I hereby give my consent to have First responders, paramedics and/or doctor of medicine or dentistry or associated personnel to provide me, the participant, _____, with medical assistance and/or treatment and agree to be financially responsible for the cost of such assistance and/or treatment, and I will indemnify and hold the Releases harmless for any such medical costs.

I also understand that this Release binds my heirs, executors, administrators, and assigns, as well as myself.

The information that I have provided is accurate to the best of my knowledge. I verify that I am not under the influence of alcohol or drugs at this time and sufficiently qualified to participate in this event. I further state that I am of lawful age and legally competent to sign this affirmation and release, that I have read the above and fully understand that the terms herein are contractual and not a mere recital, and have signed this document of my own free will.

Subscribed and sworn to me before this ____ day of _____, _____.

, AFFIANT

Notary Public

My commission expires: _____

(SEAL)

GENERAL INFORMATION

1. Duty assignment and work schedules are determined by the Police Chief.
2. All non-exempt employees will be entitled to overtime after the employee has worked in excess of one hundred, seventy-one (171) hours during a twenty-eight (28) day pay cycle. Under Fair Labor Standards Act.
3. Officers are required to have a telephone.
4. Employment probationary period is 12 months after Field Training Program.
5. You will be contacted if additional information is needed during the hiring process. If accepted for employment, the Tecumseh Police Department will notify you.
6. At no time while on-duty or representing the Department in any official capacity shall any offensive tattoo or body art be visible. Examples of offensive tattoos include, but are not limited to, those that exhibit or advocate discrimination against sex, race, religion, ethnicity, national origin, sexual orientation, age, physical or mental disability, medical condition or marital status; those that exhibit gang, supremacist or extremist group affiliation; and those that depict or promote drug use, sexually explicit acts or other obscene material. Members will not be allowed to have tattoos from the collar bone up or on the hands that are visible to the public with the exception of a single wedding band tattoo on only the ring finger not to exceed 1 inch in width. A photograph of any and all visible tattoos must be submitted to the Chiefs Office for approval. Any unapproved or offensive tattoos shall be covered by a long sleeve uniform shirt or with a black in color arm sleeve or sports tape at the member's expense.

Note: Any visible new tattoos must be pre-approved by the Chief prior to obtaining.

7. You will be required to use department technology.
8. Vest wear is mandatory for patrol operations.
9. No tobacco use in City Vehicles or Buildings or in the view of the public.
10. No E-cigarettes use in City Vehicles or Buildings or in the view of the public.

Signature

Date

AUTHORIZATION FOR RELEASE OF INFORMATION

Applicant hereby authorizes the **City of Tecumseh** and its agents to examine and review all documents pertinent to an analysis of my application for employment. I understand that any false statements or misrepresentations by me will result in the **City of Tecumseh** rejecting my application and/or will result in the separation of my relationship with **City of Tecumseh** if I have been employed at the time that the false information or misrepresentation is discovered.

I authorize all of my prior employers and educational institutions to furnish any information, documents or transcripts requested by the **City of Tecumseh** in connection with my application for employment. I hereby release any person or entity providing any such information pursuant to this Release from any and all claims and liabilities of whatsoever kind or nature which may arise out of or be associated in any way with the release of the requested information. I also hereby release the **City of Tecumseh** from any and all claims or liabilities of whatsoever kind or nature which in any way may arise out of or be associated with obtaining, considering, using or retaining the information received pursuant to this release.

Copies of this Release will be considered the same as an original. This Release will remain valid for a period of forty-five (45) days from the date set forth below.

Signature of Applicant

Date: _____