



CITY OF PERRY

POLICE DEPARTMENT

211 S. Washington St. Perry, FL. 32347
Phone: 850-584-5121 – Fax: 850-584-7322

APPLICATION FOR: FULL TIME OFFICER POLICE RESERVE

Minimum Annual Salary Range: Minimum Starting salary \$42,800.00

At this time only applications for certified or certifiable CJSTC law enforcement officers are being accepted.

Applications from academy recruits that are within 1 month of completing a State Law Enforcement Academy and will be eligible to take the State Law Enforcement Exam may be accepted on a limited basis.

Applications for employment may be obtained in person from the Perry Police Department, 211 S. Washington St. Perry, Fl. 32347 or via e-mail from office@perrypolice.net

Duties and Responsibilities: A Police Officer performs a wide variety of tasks to promote public safety and security, including crime prevention and general enforcement of law and performing related work. The duties of Police Officer encompass, but are not limited to, patrolling, crime detection, investigation, traffic enforcement and traffic control.

Minimum requirements: Pass the CJBAT exam. The CJBAT is a *Basic Abilities* test. Must be a U.S. Citizen, over the age of nineteen years old, must possess a valid driver’s license, minimum of a high school diploma or GED. Visual ability must be corrected to 20/20 in each eye with normal color and depth perceptions. Applicant must submit to a psychological evaluation both written and oral. Applicant must pass a polygraph examination. Applicant must pass a medical examination and an oral board examination. Applicant must also pass a drug screen test. **All examinations must be passed successfully.**

Background Examination: A thorough background examination will be conducted on all applicants. Applicants must not have been convicted of a felony or a misdemeanor involving perjury or false statement. Applicants are also required to be finger printed.

Residency Requirement: Upon appointment, an individual not residing within Taylor County, Florida must reside within 35 miles of the City of Perry, Florida, or be willing to move within 35 miles of the City of Perry or within Taylor County, Florida. This requirement must be met at the completion of an employment probationary period. A higher level of consideration will be afforded to those applicants that reside within the boundaries of the City Of Perry or our local community at the time of application for employment. Exceptions can and will be made depending on the current pool of qualified applicants while considering the number of employment vacancies.

Police Training Course: We are currently only accepting applications from Florida Certified or Certification Eligible Applicants. In addition to the basic academy requirements each successful candidate will be required to complete up to 16 weeks of field training. At the completion of field training a probationary period of up to one year will be observed. Each recruit must successfully complete all phases of training, instruction and probation to obtain permanent employee status.

Vacation, Sick Leave and Holidays: Vacation is based on the number of years of employment, but is accrued per pay period.

After One (1) Year ----- 40 Hours
After Two (2) Years -----80 Hours
After Six (6) Years -----120 Hours
After Sixteen (16) Years -----160 Hours

The City of Perry no longer has a traditional sick leave program, upon employment the employee will be enrolled in a disability / illness program.

Employee Benefits – Uniforms: All uniforms and equipment are furnished. A quarterly clothing cleaning allowance is given to employees.

Retirement: Officers are eligible for retirement after 25 twenty five years of credited service or at age 52 with a minimum of 10 years of credited service. Under some situations newly hired employees may “buy” into the retirement system with credited military service. The City of Perry also offers a supplemental retirement option in addition to the traditional police pension.

Group Hospitalization and Life Insurance: Group Hospitalization is available with a percentage of the cost of coverage paid for by the City Of Perry. Life Insurance coverage, in the amount of \$10,000.00 is provided by the City Of Perry after the probationary employment period is completed.

Pay Incentive Program: The City Of Perry offers an incentive program to certified law enforcement officers working in the capacity of a full-time law enforcement officer with the police department. The program involves compensating employees for advanced educational degrees. An employee with an Associate of Arts or Associate of Science degree in any field, or currently enrolled in a four year Bachelor’s degree program in any field and having already completed at least sixty (60) semester hours of study which is acceptable towards that degree, is entitled to a monetary bonus of \$35.00 per bi-weekly pay period. Any employee with a Bachelor’s degree in a job related major is entitled to a monetary bonus of \$50.00 per bi-weekly pay period. The monetary bonus for a Bachelor’s degree includes that of the Associate of Arts degree or the sixty (60)-semester hour requirement. Monetary bonuses will not be awarded for multiple degrees.

Instructions

Application must be type written or printed **legibly** in black or blue ink. All questions must be answered. Applications that are not complete will not be considered. If space provided is not sufficient for complete answers or you wish to furnish additional information, attach sheets of the same size as this application, and notate as to which section the information applies.

Return Completed application to City of Perry Police Department,
211 S Washington St. Perry, FL 32347

Application for Employment City Of Perry Police Department

Date of Application: _____

Personal History

Full Name: _____
(Last) (Middle) (First)

Present Address: _____
Street Number City State Zip Code

Home Phone () - _____ Business () - _____ Other _____

Age _____ Date of Birth _____ Social Security Number _____

Driver's License #: _____ State _____ Expires _____

Weight _____ Height _____ Hair Color _____ Eye Color _____

Race _____ Sex _____

Have you ever had your name changed? YES _____ NO _____

If you answered YES to the previous question answer the following:

a) Previous Name _____

b) Date and Location of name Change _____

c) Reason for Change _____

Citizenship Data

Are you a Citizen of the United States? YES NO

Are you a naturalized citizen? YES NO

If you answered yes to the above question answer the following:

Naturalization Date: _____

Location _____

Number _____

Certification Reference Information

Are you or have you ever been certified as a law enforcement officer? YES NO

If Yes, Date Certified _____ State _____

Certificate Number _____

If not presently working as a Law Enforcement Officer, Date last worked as a certified Officer

Date: _____ State: _____

Number of years and months experience as a Law Enforcement Officer:

Years _____ Months _____

Medical History

Eyesight: Corrected: Right _____ Left _____

Uncorrected: Right _____ Left _____

Are you color blind? Yes No

Do you have a depth perception problem? Yes No

Are you aware of any eye problems? Yes No

If yes, explain _____

Hearing: Excellent _____ Good _____ Fair _____ Poor _____

If Fair or Poor, Explain _____

Health: Excellent _____ Good _____ Fair _____ Poor _____

If Fair or Poor, Explain _____

Heart Problems: Yes No

If yes, Explain _____

Have you lost 5 days or more from work or school during the last 3 years because of injury or illness? Yes No

If yes, Explain _____

Habits

Do you use alcoholic beverages? Yes No

If yes, Explain how obtained and in what quantities? _____

Have you used Marijuana, Cocaine, Heroin, LSD, Molly, or other drugs to include any other synthetic drugs? Yes No

If yes, Explain _____

Do you now or have you ever-used Tobacco products for smoking? Yes No

If yes, have you quit? Yes No When? _____

Physical Status

Are you capable of performing sustained vigorous physical activity? Yes No

If No,

Explain _____

Do you have any physical defects that would hinder your participation in Firearms training and Physical Training? Yes No If answered yes, Explain Fully: _____

Have you had any serious accidents, injuries, illnesses, operations or procedures in the past five (5) years that would prohibit you from performing the duties of a law enforcement officer? Yes No if yes, give detail below: _____

Were you hospitalized? Yes No Date _____

Hospital _____ Location _____

Name of present Physician _____

Are you receiving disability compensation? Yes No

Education

Elementary School Name/Address	Dates attended Mo./Yr.		Years Completed	Did you Graduate	Type Diploma

High School Name/Address	Dates attended Mo./Yr.		Years Completed	Did you Graduate	Type Diploma

College or University Name/Address	Dates attended Mo./Yr.		Years Completed	Did you Graduate	Type Diploma

Other Schools (Include Military) Name/Address	Dates attended Mo./Yr.		Years Completed	Did you Graduate	Type Diploma

Was High School Diploma Actually Received? Yes No

Was College or University Degree actually received? Yes No

Circle Degree: A.A - A.S. B.A - B.S M.S. -M.A. PH.D

Number of College Semester Hours _____ Quarter Hours _____

References

List 3 personal references (not relatives, fellow employees or school teachers) who are responsible adults of reputable standing in their communities, such as head of households, property owners, business or professional men or women, who have known you well during the last 5 years.

Complete Name			
First, Middle, Last		Home Address – include city state & zip code	
Years Known	Occupation	Phone Numbers (Home – Mobile- Work)	
		Other Contact Info: Email, Etc..	

Complete Name			
First, Middle, Last		Home Address – include city state & zip code	
Years Known	Occupation	Phone Numbers (Home – Mobile- Work)	
		Other Contact Info: Email, Etc..	

Complete Name			
First, Middle, Last		Home Address – include city state & zip code	
Years Known	Occupation	Phone Numbers (Home – Mobile- Work)	
		Other Contact Info: Email, Etc..	

Social Acquaintances

Give three (3) social acquaintances in your own age group (including both sexes) that have known you well for the past five (5) years.

Complete Name		Home Address – include city state & zip code	
First, Middle, Last		Phone Numbers (Home – Mobile- Work)	
Years Known	Occupation	Other Contact Info: Email, Etc..	

Complete Name		Home Address – include city state & zip code	
First, Middle, Last		Phone Numbers (Home – Mobile- Work)	
Years Known	Occupation	Other Contact Info: Email, Etc..	

Complete Name		Home Address – include city state & zip code	
First, Middle, Last		Phone Numbers (Home – Mobile- Work)	
Years Known	Occupation	Other Contact Info: Email, Etc..	

Family References

FATHER		
Name	Address	Phone

MOTHER		
Name	Address	Phone

SPOUSE		
Name	Address	Phone

FATHER-IN-LAW		
Name	Address	Phone
MOTHER-IN-LAW		
Name	Address	Phone
SIBLING		
Name	Address	Phone
SIBLING		
Name	Address	Phone
SIBLING		
Name	Address	Phone

Law Enforcement Experience

1	AGENCY NAME			
	DATES OF EMPLOYMENT	Highest Rank Attained	Supervisor Name	Agency Phone #

Reason for leaving agency? :

2	AGENCY NAME			
	DATES OF EMPLOYMENT	Highest Rank Attained	Supervisor Name	Agency Phone #

Reason for leaving agency? :

3	AGENCY NAME			
	DATES OF EMPLOYMENT	Highest Rank Attained	Supervisor Name	Agency Phone #

Reason for leaving agency? :

If you have applied with any other law enforcement agencies, list the following information:

1	AGENCY NAME					
	DATE OF APPLICATION	Interviewed?	Taken Polygraph?	Taken Psychological?	Application Still Active?	Agency Phone #

2	AGENCY NAME					
	DATE OF APPLICATION	Interviewed?	Taken Polygraph?	Taken Psychological?	Application Still Active?	Agency Phone #

3	AGENCY NAME					
	DATE OF APPLICATION	Interviewed?	Taken Polygraph?	Taken Psychological?	Application Still Active?	Agency Phone #

4	AGENCY NAME					
	DATE OF APPLICATION	Interviewed?	Taken Polygraph?	Taken Psychological?	Application Still Active?	Agency Phone #

Employment References

List Chronologically ALL Employments - Include Part Time Employments:

1	EMPLOYER NAME				
	DATES OF EMPLOYMENT	SALARY	POSITION HELD	NAME OF SUPERVISOR	REASON FOR LEAVING
	Full Address			Phone Number:	

2	EMPLOYER NAME				
	DATES OF EMPLOYMENT	SALARY	POSITION HELD	NAME OF SUPERVISOR	REASON FOR LEAVING
	Full Address			Phone Number:	

3	EMPLOYER NAME				
	DATES OF EMPLOYMENT	SALARY	POSITION HELD	NAME OF SUPERVISOR	REASON FOR LEAVING
	Full Address			Phone Number:	

4	EMPLOYER NAME				
	DATES OF EMPLOYMENT	SALARY	POSITION HELD	NAME OF SUPERVISOR	REASON FOR LEAVING
	Full Address			Phone Number:	

5	EMPLOYER NAME				
	DATES OF EMPLOYMENT	SALARY	POSITION HELD	NAME OF SUPERVISOR	REASON FOR LEAVING
	Full Address			Phone Number:	

6	EMPLOYER NAME				
	DATES OF EMPLOYMENT	SALARY	POSITION HELD	NAME OF SUPERVISOR	REASON FOR LEAVING
	Full Address			Phone Number:	

7	EMPLOYER NAME				
	DATES OF EMPLOYMENT	SALARY	POSITION HELD	NAME OF SUPERVISOR	REASON FOR LEAVING
	Full Address			Phone Number:	

Military History

Have you served in the U.S. Armed Forces? Yes No

If Yes, What Branch _____ Present Status _____

If No, Are you registered with Selective Service? Yes No

If No, Explain _____

Court Record

Have you ever been given a ticket or paid a fine for any traffic violation? ----- Yes No

Have you ever been charged with any criminal violations? ----- Yes No

Have you ever been issued a Driver's license in any other State? ----- Yes No

If Yes, Give Name issued to, Driver's License Number and expiration

Date: _____

List and Citations , Notices to Appear below			
Date	Place	Charge	Disposition

If convicted, has your record been expunged? ----- Yes No

Has your license ever been suspended or revoked? ----- Yes No

Have you ever been considered a subject/suspect of any criminal investigation? - Yes No

Are you now or have you ever been involved in a civil lawsuit of any kind? ----- Yes No

Residency

List all addresses that you have lived at for the last five (5) years. Do not list Post Office boxes as a residence address:

Address	City	State	Zip
Length of Residency?			

Address	City	State	Zip
Length of Residency?			

Address	City	State	Zip
Length of Residency?			

Address	City	State	Zip
Length of Residency?			

If you have ever rented a residence, apartment, etc. please list the following information:

Landlord Name	City	State	Phone #
Landlord Name	City	State	Phone #
Landlord Name	City	State	Phone #

Financial Statement

Please fill in the financial statement below, be complete and accurate. The amount of indebtedness in itself will not be used to evaluating your qualifications, but rather the behavior exhibited in meeting your financial obligations.

CURRENT MONTHLY INCOME		CURRENT MONTHLY EXPENDITURES	
MONTHLY SALARY	\$	MORTGAGE	\$
SPOUSE'S SALARY	\$	MONTHLY PAYMENTS	\$
OTHER INCOME	\$	RENT	\$
		OTHER PAYMENTS	\$
		ESTIMATED MONTHLY COST OF LIVING: (Utilities, food, home & vehicle maintenance, gas, entertainment, cell phone, etc.) Include other obligation not listed above	\$
TOTAL INCOME	\$	Total Expenditures	\$

CURRENT ASSETS		CURRENT LIABILITIES	
SAVINGS	\$	REAL ESTATE	\$
CHECKING	\$	CREDIT CARDS	\$
REAL ESTATE	\$	LONG TERM LOANS	\$
STOCK - BONDS	\$	CHARGE ACCOUNTS	\$
LIFE INSURANCE - CASH VALUE OF WHOLE LIFE POLICY	\$	OTHER INDEBTDNES	\$
OTHER ASSEST - DESCRIBE	\$	OTHER LIABILITIES - DESCRIBE	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES	\$

Financial Statement

Have you ever filed for or declared Bankruptcy or filed for the Earner's Plan? Yes No

If Yes, Give details (Include When, Where and Why). _____

Have any of your bills ever been turned over to a collection agency? Yes No

If Yes, Give details (Include When, Where and Why and firms involved).

Have you ever had purchased goods repossessed? Yes No

If Yes, Give details (Include When, Where and Why and firms involved).

Have your wages ever been garnished? Yes No

If Yes, Give details (Include When, Where and Why). _____

Have you ever been delinquent on income or other tax payments? Yes No

If Yes, Give details (Include When, Where and Why). _____

Perry Police Department

Authorization for Release of Personal Information

I, _____, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the City of Perry Police Department, whether the said records are of a public, private or confidential nature.

The Perry Police Department's acquisition, retention, and sharing of information related to your employment application is generally authorized under 28 C.F.R. section 20.33 and F.S.S. 943.053(3) (a) and Chapter 119. The purpose of this information is to conduct a complete background investigation pertaining to your fitness to serve as a police officer.

The background investigation may include inquiries pertaining to your employment, education, medical history, credit history and any other information relevant to your character and reputation. By signing this form, you are acknowledging that you have received notice and have provided consent for the Perry Police Department to use this information to conduct such a background investigation, which may include the searching of N-Dex, criminal justice databases, private databases and public databases.

I authorize any employee or representative of the Perry Police Department to obtain information regarding my qualification and fitness to serve as a Police Officer. I understand that N-Dex is an electronic repository of information from federal, state, local, tribal, and regional criminal justice entities. This national information sharing system permits users to search and analyze data from the entire criminal justice cycle, including crime incident and investigation reports; arrests, booking, and incarceration reports; and probation and parole information. This release is executed with full knowledge, understanding, and consent that any information discovered in N-Dex may be used for the official purpose of conducting a complete employment background investigation. I also understand that any information found in N-Dex will not be disclosed to any other person or agency unless authorized and consistent with applicable law. I release the Perry Police Department and its employees from any liability or damage that may result from the use of information obtained from N-Dex. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

The intent of this authorization is to give my consent for full and complete disclosure of the records of the educational institutions; financial or credit institutions, including records of loans, the records of commercial or retail credit agencies (including credit reports and ratings); and other financial statements and records wherever filed; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private, practitioners, and the U.S. Veteran's Administration, employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me and the records and recollections of attorneys at law, or of other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had any interest.

I understand that the City of Perry Police Department will consider any information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization in determining my suitability for employment.

A copy of this release for will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

Witness

Signature (include maiden name)

Witness

Address

Date (mm/dd/yyyy)

Sworn to me this _____ Day of _____,
20 _____.

Phone (Area Code)

Notary _____

My Commission Expires _____

Personally Known or Type of Identification Produced _____



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IMPORTANT INFORMATION FOR PERRY POLICE DEPARTMENT APPLICANTS REGARDING THE PSYCHOLOGICAL EVALUATION:

1. You have the right to refuse to participate in the psychological evaluation process.
2. You should answer questions truthfully- *If you do not, it could count against you.*
3. You have the right to refuse to answer any particular question.

RELEASE OF PSYCHOLOGICAL INFORMATION

I hereby authorize Carolyn Stimel, Ph.D and / or associates, to release to the Perry Police Department any information about me obtained from psychological tests, clinical interviews and other means. I understand that a written report of the findings will be provided to the Perry Police Department and that this report will be part of the information considered in the selection process.

I understand that I have the right to refuse to participate in the psychological evaluation process. I understand that I must be truthful as possible in responding to test questions and providing other information, but I have the right to refuse to answer any particular question or questions.

I understand that reports of the results of the psychological evaluation are advisory. I will not hold Dr. Stimel, or her associates liable for any decisions regarding employment or other matters made by the Perry Police Department. I understand and agree that I am not a client of Dr. Stimel or her associates. This evaluation will be paid for by the City of Perry, and the Perry Police Department is the client.

Signature

Date

Witness



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It is understood and agreed that if hired, I will be required to complete a field training officer program (typically 12 – 16 weeks) and a minimum of six (6) months probationary or trial period. It is further understood that within the six months, of the first year of employment, I will be informed of the Department’s intention to grant permanent status, extend the probationary period or terminate my employment. It is also understood that any probationary period may be extended beyond the prescribed 6 month period based on job performance.

All statements and information given in this application are true to the best of my knowledge. I hereby authorize the City of Perry Police Department to conduct such investigations that are necessary to determine my fitness for any position for which I have applied. In the event that I am employed, I understand that any information found to be not materially correct might constitute grounds for dismissal.

Date _____ Signature _____

Sworn before me this _____ day of _____, 20____

Notary _____

My commission expires _____

Personally Known or Type of Identification Produced _____

This page is for your information and is not intended to be returned with your completed application.

Note: Important for processing:

The recruitment/hiring process for Police Officers is very time consuming and requires many hours of background investigation. Many applicants fail to complete the required forms, and to bring proper documents such as Birth Certificates, Diplomas, Certificates, ETC. Therefore in order to give every applicant the best opportunity for employment, background investigations Will Not begin on an applicant until all forms and documents are returned to the Police Department's Personnel section. Files not containing all documents will be treated as incomplete and will not be processed. Upon returning all documents, you will be interviewed. This process will be the first step of your background investigation process.

Copies of Diplomas, Certificates, and forms must be turned in with the personal history forms. These include:

- 1) Birth Certificate;
- 2) H.S. Diploma;
- 3) Driver's License;
- 4) Social Security Number;
- 5) Service Separation Paper (DD214) if applicable;
- 6) Marriage Certificate and/or Divorce papers if needed to verify legal change of name;
- 7) Law Enforcement Certificate*

* If you have been or are now certified as a law enforcement officer, you must provide documentation or certification to be considered as Pre-certified.

As Part of the application process for the City Of Perry Police Department Copies of the following should be attached to the completed application:

Required Documents

All applicants must submit a copy of the following documents:

1. Birth certificate
2. Social Security Card
3. High School Transcript
4. Proof of Name Change (If Applicable)
5. Driver's License
6. Naturalization Papers (If Applicable)
7. Military Record- Discharge Certificates and DD214

Note: Federal law prohibits copying of naturalization papers. The actual papers must be presented at the time of application.

Any other documentation that may reflect special job qualifications should be submitted with the required documents listed above.

Note: APPLICATIONS WILL NOT BE PROCESSED UNTIL ALL ITEMS ARE COMPLETED AND ALL REQUIRED DOCUMENTS HAVE BEEN RECEIVED.