



ONTELAUNEE TOWNSHIP POLICE DEPARTMENT POLICE OFFICER APPLICATION

GENERAL INSTRUCTIONS -- This application consists of several sections. Every section must be completed in order for ONTELAUNEE TOWNSHIP to accept the application as complete for the Police Officer position. Print an answer to every question. If a particular question does not apply to you, enter "N/A" in the appropriate block. If the space available is insufficient, attach an additional page of plain white paper, enter the number of the block being continued, and provide the additional information (Example: BLOCK 3, ADDITIONAL PHONE NUMBER 555-123-4567). Do not use the reverse side of the application form to provide any information.

Do not misstate, or omit material fact, since the statements made herein are subject to verification to determine your qualifications for employment. The completed application must be signed at the time of filing and is subject to provisions of 18 Pa.C.S. §4904, Unsworn falsification to authorities.

1. NAME			
FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX (JR., SR. III, ETC.)
HAVE YOU EVER USED A DIFFERENT NAME?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
ENTER OTHER NAME(S) USED			
2. AGE			
ARE YOU 21 YEARS OF AGE OR OLDER?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
3. CONTACT INFORMATION			
TELEPHONE NUMBERS – HOME AND MOBILE		EMAIL	
4. ADDRESS			
ADDRESS		CITY – STATE - ZIP	
5. CITIZENSHIP			
ARE YOU A UNITED STATES CITIZEN? NATIVE <input type="checkbox"/> YES <input type="checkbox"/> NO NATURALIZED <input type="checkbox"/> YES <input type="checkbox"/> NO			
IF YOU ARE A NATURALIZED CITIZEN:			
NATURALIZATION NUMBER	NATURALIZATION DATE	NATURALIZATION PLACE	COURT

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9. DRIVER'S LICENSE

STATE	OPERATOR NUMBER	LICENSE CLASS OR TYPE	EXPIRATION DATE

HAVE YOU EVER HAD A DRIVER'S LICENSE SUSPENDED OF REVOKED? YES NO

IF YES, REASON FOR AND EXPLANATION OF SUSPENSION OR REVOCATION (INCLUDE DATE RESTORED):

10. CRIMINAL CONVICTIONS

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? OMIT PARKING OFFENSES HANDLED ON PARKING TICKETS OR TRAFFIC CITATIONS BEFORE A MAGISTERIAL DISTRICT JUDGE.

YES NO

List convictions of criminal offenses, including traffic violations even if the violation was handled using a citation. Minor violations are not necessarily a bar to employment as a police officer, but falsification or failure to report violations may call the integrity of the applicant into question and result in disqualification during the background investigation process. If in doubt, report the incident.

NATURE OF OFFENSE	DATE	COURT	OUTCOME

11. FINANCIAL STATUS

Your credit history will be checked by the ONTELAUNEE TOWNSHIP POLICE. Please list the sources of your income, your obligations, and the approximate amounts.

INCOME SOURCES	MORTGAGE, CREDIT CARD, OR OTHER DEBT

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12. PAST AND PRESENT MEMBERSHIPS AND ORGANIZATIONS

ORGANIZATION NAME AND ADDRESS	TYPE OF ORGANIZATION (SOCIAL, FRATERNAL, PROFESSIONAL, ETC.)	MEMBERSHIP DATES	OFFICE(S) HELD

13. EDUCATION

List all elementary, junior high, and high schools attended.

FROM (MONTH-YEAR)	TO (MONTH-YEAR)	NAME AND ADDRESS OF SCHOOL	GRADUATED? YES OR NO

List colleges, universities, and other higher education.

FROM (MONTH-YEAR)	TO (MONTH-YEAR)	NAME AND ADDRESS OF SCHOOL	GRADUATED? YES OR NO IF YES, DEGREE AND MAJOR

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15. FOREIGN LANGUAGE

Enter the language and indicate your fluency level.

LANGUAGE	UNDERSTANDING	SPEAKING	READING	WRITING

16. HOBBIES AND SPORTS

Include length of participation and level of proficiency.

17. EMPLOYMENT

Begin with your present job and list your employment history for the past ten years. Include part time, temporary and/or seasonal employment and all periods of unemployment.

FROM (MONTH-YEAR)	TO (MONTH-YEAR)	NAME, COMPLETE ADDRESS, AND TELEPHONE NUMBER OF EMPLOYER	POSITION HELD
NAME OF SUPERVISOR		SUPERVISOR'S TELEPHONE NUMBER	SALARY OR WAGE RATE
			REASON FOR LEAVING
DESCRIPTION OF DUTIES			
FROM (MONTH-YEAR)	TO (MONTH-YEAR)	NAME, COMPLETE ADDRESS, AND TELEPHONE NUMBER OF EMPLOYER	POSITION HELD
NAME OF SUPERVISOR		SUPERVISOR'S TELEPHONE NUMBER	SALARY OR WAGE RATE
			REASON FOR LEAVING

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DESCRIPTION OF DUTIES			
FROM (MONTH-YEAR)	TO (MONTH-YEAR)	NAME, COMPLETE ADDRESS, AND TELEPHONE NUMBER OF EMPLOYER	POSITION HELD
NAME OF SUPERVISOR		SUPERVISOR'S TELEPHONE NUMBER	REASON FOR LEAVING
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FROM (MONTH-YEAR)	TO (MONTH-YEAR)	NAME, COMPLETE ADDRESS, AND TELEPHONE NUMBER OF EMPLOYER	POSITION HELD
NAME OF SUPERVISOR		SUPERVISOR'S TELEPHONE NUMBER	SALARY OR WAGE RATE
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DESCRIPTION OF DUTIES			

FROM (MONTH-YEAR)	TO (MONTH-YEAR)	NAME, COMPLETE ADDRESS, AND TELEPHONE NUMBER OF EMPLOYER	POSITION HELD
NAME OF SUPERVISOR		SUPERVISOR'S TELEPHONE NUMBER	SALARY OR WAGE RATE
			REASON FOR LEAVING

DESCRIPTION OF DUTIES			

Have you ever been discharged, asked to resign, furloughed, or put on inactive status for cause, or subject to disciplinary action while in any position (including military service)? If yes, provide the reason.

YES NO

*Answering yes to this question will not result automatically in you being denied employment.

Have you ever resigned after being informed that your employer intended to discharge you for any reason? If yes, provide the employer, date, and reason.

YES NO

*Answering yes to this question will not result automatically in you being denied employment.

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May we contact your present employer? YES NO

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18. CHARACTER REFERENCES

List five character references that have definite knowledge of your qualifications for the position of police officer. Do not list relatives, former employers, or persons living outside of the United States.

NAME	ADDRESS	HOME TELEPHONE	OTHER TELEPHONE	YEARS KNOWN

Have you ever applied for a position with any other governmental agency or police department?

YES NO

If yes, provide name of governmental agency or department.

Have you ever held a federally issued security clearance in any position?

YES NO

If yes, provide level of clearance and position in which you held the clearance.

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19. ESSENTIAL JOB FUNCTIONS

The Essential Job Functions of a Police Officer with ONTELAUNEE TOWNSHIP POLICE are as follows:

1. Running for one-quarter mile;
2. Climbing over obstacles;
3. Crawling;
4. Pushing motor vehicles;
5. Pulling or carrying accident, fire, or crime victims;
6. Using physical force to apprehend and subdue arrested persons;
7. Withstanding prolonged exposure, as long as ten hours, to extreme weather conditions
8. Withstanding prolonged periods of standing and sitting;
9. Withstanding frequent exposure to stress-producing situations, such as encountering persons injured or killed by accidents, crimes, or suicide;
10. Dealing with domestic disputes;
11. Dealing with verbal and physical abuse, including taunts, insults, and threats to the police officer, family members, or fellow police officers;
12. Communicating effectively with persons suffering from trauma;
13. Operating a motor vehicle for long periods of time;
14. Using a firearm effectively;
15. Preparing and completing written reports in a clear and concise manner;
16. Ability to take and carry out orders and directives;
17. Additional Essential Job Functions as required by regulations of the Municipal Police Officers' Education and Training Commission.
18. Maintaining valid credentials for JNET, CLEAN, NCIC and PennDOT.

I have reviewed the Essential Job Functions for a Police Officer with ONTELAUNEE TOWNSHIP POLICE.

I CAN FULLY PERFORM ALL DUTIES WITHOUT REASONABLE ACCOMMODATIONS

I CAN FULLY PERFORM ALL DUTIES, BUT ONLY WITH REASONABLE ACCOMMODATION FOR THE DUTIES

SPECIFIED:

I CANNOT FULLY PERFORM ALL DUTIES, EVEN WITH ACCOMMODATIONS.

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20. CERTIFICATION

I certify that the information and facts contained in this application are true, correct, and complete and that there are no misrepresentations, omissions, or falsifications in this application to the best of my knowledge and belief. I understand that false statements made in this application are subject to criminal penalties as provided in the Crimes Code at 18 Pa.C.S.§4904. I also understand that any incorrect, incomplete or false statements or information furnished by me may void my application. The making of any false statement in the application process is grounds for disqualification from further consideration, and that, if I have been employed by ONTELAUNEE TOWNSHIP POLICE, falsifications in the application process shall be grounds for my termination regardless of the amount of time that has elapsed since my employment.

I understand that passing a drug test is a condition of employment, and that, if an employment offer is extended, I shall be required to take, pass, and complete job-related physical agility examinations and a psychological examination, and may be required to submit to polygraph examination or voice stress analysis examination, before commencing my duties.

I understand that I may have rights under the Fair Credit Reporting Act and regulations issued under the Act by the Federal Trade Commission or I may have rights under successor laws or regulations to obtain copies, under certain circumstances, of confidential reports prepared by and or issued by an outside agency, including a law firm, a credit reporting agency, a psychologist, a polygraph examiner or an employment consultant. I waive any right I have to the information contained in any such report both now and during the course of my employment with ONTELAUNEE TOWNSHIP POLICE I am not waiving any of my constitutional rights given to me under the Pennsylvania or United States Constitutions.

I have read this application in its entirety and prepared this application myself.

SIGNATURE OF APPLICANT

DATE

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NOTIFICATION PROCEDURE RELEASE

In the processing required for the applicants, it may become necessary to contact the applicant in the event they are being given further consideration for the position of police officer with ONTELAUNEE TOWNSHIP POLICE.

If other methods fail in attempting to contact the applicant, a certified letter will be sent to the applicant's address listed on the application. Should the certified letter be returned to the ONTELAUNEE TOWNSHIP POLICE indicating that it was unclaimed or un-deliverable; the applicant will be eliminated from further processing and consideration.

It is the applicant's responsibility to notify the ONTELAUNEE TOWNSHIP POLICE, in writing, of any address change.

The applicant acknowledges that he or she has read and understands procedure.

Applicant's
Name _____

Applicant's Date of Birth _____

Signature of Applicant

Date

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AUTHORIZATION TO OBTAIN INFORMATION

I authorize the ONTELAUNEE TOWNSHIP POLICE to conduct background investigations, to acquire information pertaining to my qualifications, education, employment history, physical and medical condition, psychological condition, and character in conjunction with my application for the position of police officer with ONTELAUNEE TOWNSHIP POLICE.

I request and authorize persons, schools, my current employer, previous employers, and organizations to provide the ONTELAUNEE TOWNSHIP POLICE with any relevant information that may be required to process my application for the position of police officer with the ONTELAUNEE TOWNSHIP POLICE and conduct a thorough and complete background investigation in conjunction with the candidate selection process.

I authorize the ONTELAUNEE TOWNSHIP POLICE Department to provide a copy of this form for retention by any party who provides information pursuant to this request.

I further release all parties providing information from any and all liability or claims for damages whatsoever that may result from the release, disclosure, maintenance, or use of information.

Applicant's Name _____

Applicant's Address _____

Applicant's Date of Birth _____

Signature of Applicant

Date

Notary signature

Date

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INSTRUCTIONS FOR SUBMISSION OF APPLICATION

The information you include in this application will be used to determine your qualifications for employment as a police officer with the ONTELAUNEE TOWNSHIP POLICE. It is important that you supply all requested information and requested material and that you answer all questions fully and accurately. Failure to do so may constitute cause for rejection of your application.

In completing the application, please PRINT CLEARLY in your own handwriting. DO NOT TYPE the application.

All completed applications must be submitted on or before 3:00 p.m. on February 17, 2021, at the Administrative offices of the Ontelaunee Township, 35 Ontelaunee Drive, Reading, PA 19605 Monday through Friday from 9:00 AM until 3:00 PM.

All completed applications MUST BE ACCOMPANIED by the following documents at the time of submission. Copies of the above documents should be provided rather than the originals. Any originals will be returned to the submitter after the selection process has been completed. ALL COPIES MUST BE LEGIBLE.

1. Birth or baptismal certificate
2. High school diploma or equivalency certificate
3. Post-high school education diploma, certificate, or similar verification of education if applicable
4. If a naturalized citizen, submit proof of naturalization
5. Completed and signed Notification Procedure Release
6. Completed and signed Authorization to Obtain Information form
7. Act 120 Certification if applicable
8. LEGIBLE photocopy of valid driver's license with photograph