

Sabula Police Department

Employment Application

Applicant Name: _____

Deadline to return application: March 31, 2021 at 4:00 P.M.

Send to City Hall, City of Sabula 411 Broad St., Sabula, IA. 52070.

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 SABULA, IOWA, whether the said records are of public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of records of educational institutions, financial or credit institutions, including records of loans, records of commercial or retail credit agencies (including credit reports and/or ratings); and other financial statements of records whenever filed; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the U.S. Veteran's Administrations; law enforcement agency records; driving records; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me and the 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 an interest.

I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the CITY OF SABULA. I also certify that any person(s) who may furnish 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. I further release the CITY OF SABULA from any and all liability, which may be incurred as a result of collecting such information.

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

I have read and fully understand the contents of this "authorization for release of personal information."

SIGNED: _____ DATE: _____

NOTARY: _____ DATE: _____

Read these instructions carefully before proceeding

Failure to follow instructions will result in disqualification!

IT IS ESSENTIAL THAT ALL INFORMATION BE CORRECT AND COMPLETE!

Your application will be used as a basis for a background investigation that will determine your qualifications for a position with the Sabula Police Department.

GENERAL REQUIREMENTS

To be a police officer in the State of Iowa, a person must be certified by the Iowa Law Enforcement Academy (ILEA). The Iowa legislators have given ILEA authority "to set standards for the law enforcement service" in the State of Iowa. If a person cannot or will not meet these standards, they cannot be certified. Local jurisdictions may use stricter criteria than ILEA to select police officer candidates. A detailed explanation for the minimum standards for Iowa Law Enforcement officers can be found in the "Code of Iowa," Chapters 80B & 400, plus the "Iowa Law Enforcement Academy's Administrative Rules." Some of the criteria is as follows.

All applicants must:

- Be able to perform the essential functions of the job with or without reasonable accommodations.
- Have reached the age of 18 years by the established date of the written examination (Retirement) All Sabula full time officers become members of Iowa Public Employees Retirement System (IPERS). Mandatory retirement age is 65.
- Be a graduate of an accredited high school, or possess an equivalency certificate (GED).
- Be a citizen of the United States and a resident of the State of Iowa or State of Illinois or intends to become a resident upon being employed.
- Is not by reason of conscience or belief opposed to the use of force when appropriate or necessary to fulfill his/her duties.
- Be able to speak, read, and write the English language.
- Not be addicted to alcohol or drugs. The City of Sabula has a vital interest in maintaining safe, healthful, and efficient working conditions for its employees. Being under the influence of a drug or alcohol poses serious safety and health risks, not only to the user, but to all those who work with or come into contact with the user. The possession, use, or sale of illegal drug or alcohol in the workplace poses unacceptable risks to the safe, healthful, and efficient operations.
- Be of good moral character. (This implies that the conduct or character of any applicant must be such that his/her job performance, as a police officer would not be impeded in any manner.)
- Not have been convicted of a felony or a crime involving moral turpitude. Moral turpitude is defined as "an act of baseness, vileness, or depravity in the private and social duties that a person owes to another person or to society in general, contrary to the accepted and customary rule of right and duty between person and person." It might include "income tax evasion, perjury, assault, theft, indecent exposure, sex crimes, and conspiracy to commit a crime, domestic abuse, stalking, illegal drug sales, or any offense in which a weapon was used in the commission of the crime.
- Must have a valid Iowa or Illinois driver's or chauffeurs license at the time of employment.

Application Instructions:

The ability to follow directions and complete paperwork properly is an important responsibility of a police officer.

1. Your application should be hand printed legibly in ink.
2. Answer ALL questions completely. If a question does not apply to you, enter "N/A" in the space provided.
3. Avoid errors by reading the directions carefully before making entries on the form. Be sure your information is correct and in sequence before you begin.
4. YOU are responsible for obtaining COMPLETE and VALID addresses (including zip codes). You are also responsible for providing valid phone numbers where requested.
5. If there is insufficient space on the form, attach extra sheets. Be sure to reference the relevant section and question on any supplement pages or attachments.
6. If you have any questions concerning this form, please contact city hall at (563) 687-2420.
7. The attached "Authorization for Release of Information" form must be completed; signed and notarized.
8. Copies of the following documents should be included with your application if available or forwarded to the Sabula City Hall as soon as practical if not available before the application due date:
 - Birth certificate
 - Photocopy of your driver's license
 - High school transcript and diploma
 - College transcripts/diplomas
 - DD214 (military discharge form if applicable)
 - Naturalization papers (if applicable)
 - Proof of insurance on your vehicle.
9. Your failure to properly complete your application may result in the rejection of the application.

Be sure to return your application by the date indicated on the cover page.

Benefits/Work Conditions

- Wages will be based on experience and certifications
- Paid vacation after 1 year
- Uniform allowance up to \$900
- Paid training
- Health insurance after 90 days
- Retirement plan (IPERS)
- 1 Personal day per year
- 12 sick days per year
- Bereavement leave
- Holiday pay after 90 days

Sabula Police Department

Application for Employment

Date: _____ Position Applying For: _____

Last Name: _____ First Name: _____ Middle: _____

Race: _____ Sex: _____ Date of Birth: _____ Place of Birth: _____

Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____

Alias/maiden or other names used: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email address: _____

Scars or tattoos: _____ U.S. Citizen? _____ Yes _____ No

Current Address: _____ City _____ State _____ Zip _____

FAMILY INFORMATION

Is **Father** living? _____ yes _____ no If no, list date and cause of death: _____

Father's Full Name: _____ Date of Birth: _____

Father's Complete Address: _____ Phone Number: _____

Father's Employer: _____ Position held: _____

Is **Mother** living? _____ yes _____ no If no, list date and cause of death: _____

Mother's Full Name: _____ Date of Birth: _____

Mother's Complete Address: _____ Phone Number: _____

Mother's Employer: _____ Position held: _____

If you have **step parents**, list their name, date of birth, address and phone number(s) below:

Are you? Married () Single () Separated () Divorced () Widowed ()

Spouse's Full (Maiden) Name: _____ Date of Birth: _____

Spouse's Address if different from yours: _____

Spouse's Cell Phone Number: _____ email address: _____

Spouse's Employer: _____ Position Held: _____

Spouse's Employer Address: _____ Phone Number: _____

Date of Marriage: _____ Location: _____

If not married, with whom do you live? _____ Date of Birth: _____

Roommate's Employer: _____ Address: _____ Phone Number: _____

List all former spouses with full name, date of birth, marriage dates, current address and phone numbers:

List all children and step children:

Full Name	Date of Birth	Address	Phone Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are you required to pay child support? ____yes ____no If so, how much? _____ per _____

Who are payments made to? _____ Are you delinquent? ____yes ____no

Please list your siblings (brothers, sisters, half brothers, half sisters, step brothers, step sisters):

Relation	Name	Date of birth	Address	Phone #
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

CONTACTS WITH LAW ENFORCEMENT

List all Traffic Citations regardless whether or not you were convicted:

Charge	Agency	City	State	Disposition	Date
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

List ALL arrests including juvenile arrests regardless of whether or not you were convicted:

Charge	Agency	City	State	Disposition	Date

Explain any other times you have been detained or questioned by police other than traffic violations:

List ALL law enforcement agencies with whom you have applied (City, County, State, Federal):

Agency Name	City/State	Date of Application	Position	Status

MILITARY SERVICE

Have you ever been in the military or National Guard? yes no Type of Discharge: _____

Branch _____ Enlisted Date: _____ Discharge Date: _____ Rank: _____

FINANCIAL INFORMATION

List all current financial obligations:

Creditor	Balance	Monthly payment	Delinquent (yes/no)

Have you ever filed bankruptcy? yes no If yes, date _____

Do you own or rent your home? _____ Landlord's name and phone # if renting: _____

Please List your vehicles:

Year	Make	Model	Color	License Plate #	State

EDUCATION

High School Name: _____ Location (City/State) _____

Dates Attended: _____ Did you graduate? yes no _____ Year

Colleges and Trade Schools

Name of School	Location	Dates Attended	Total Hours	Degree Earned

EMPLOYMENT

Start with your current employer and list all employers since you began working. It is your responsibility to provide valid phone numbers and complete addresses for each employer.

Employer Name: _____ Phone number: _____

Start Date: _____ End Date: _____ Supervisor's Name: _____

Position held and duties: _____

Employer's address: _____ City _____ State _____ Zip _____

Salary: _____ Reason for leaving: _____

Employer Name: _____ Phone number: _____

Start Date: _____ End Date: _____ Supervisor's Name: _____

Position held and duties: _____

Employer's address: _____ City _____ State _____ Zip _____

Salary: _____ Reason for leaving: _____

REFERENCES

List character references that personally know you. Do not list employers or supervisors. Do not list people that do not regularly interact with you.

Name	Years Known	Address	City, State, Zip	Phone Numbers

Are there any incidents in your life not mentioned herein which may reflect upon your suitability to perform the duties of the position you are applying for? yes no

Explain: _____

Have you been totally honest and forthcoming in this application? yes no

Did you read and follow the instruction pages at the beginning of this application? yes no

I _____ attest that all statements and information provided in this application are true and correct. I understand that any deliberate omissions or false statements will result in the rejection of my application.

Signed: _____ Date: _____

