Pekin Fire and Police Commission

Dennis Short
Chairperson

111. S. Capitol Street, Pekin, IL 61554
Phone - (309) 478-5300

CITY OF PEKIN

Board of Fire and Police Commissioners

Attention: Lateral Transfer Applicants
for Pekin Police Department

Please complete the following application. Ensure that the entire application and release forms are signed, dated, and witnessed (where indicated) before submitting. Failure to submit any portion of the required materials included in this application packet will eliminate you from employment consideration.

Completed applications for the position of Lateral Transfer Officer should be mailed or dropped off to: City of Pekin Police Department, 111 S. Capitol Street, Pekin, IL 61554, Attn: Seth Ranney, Chief of Police.

The City of Pekin will not copy packets for any applicant, so be sure to make a copy of your application prior to submitting.

By Order of the Board of Fire and Police Commissioners
Dennis Short, Chairman

Pekin Fire and Police Commission

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Lateral Transfer (Experienced Police Officer) Applicants

Applicants for Lateral Transfer Police Officers are accepted on a continuing basis.

Applicants must have a high school diploma or GED, good moral character, sound health, no felony convictions, must be able to read and write the English language, must possess or be able to obtain a valid driver's license without recent record of suspension or revocation in any state. There is no residency requirement during the application process and probationary period, however at the end of the probationary period, officers must locate within the residency requirements stated in the agreement between the City of Pekin and the PBPA.

Applicants must currently be a Certified Police Officer in good standing in the police department in which the applicant serves, or previously served, and left a police department in good standing within 6 months of application for hire with the City of Pekin. Applicants must have completed a full-time basic training program acceptable to the Illinois Law Enforcement Training and Standards Board; or at least 3 years full time police experience in the last 42 months if such experience is outside the State of Illinois. Applicants must have substantially equivalent skills and abilities as a City of Pekin post-probationary officer, and the applicant must pass such examinations as the Board of Fire and Police Commissioners deem necessary to determine the applicant's fitness for duty as a police officer.

Please include proof of Certification as a Full-time Certified Law Enforcement Officer with your completed application packet.

Mail completed applications or return in person to:
Pekin Police Department,
111 S. Capitol Street, Pekin, IL 61554,
Attn: Seth Ranney, Chief of Police.

By Order of the Board of
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Employment Application for Original Appointment to the Pekin Police Department

Your application will be considered with others without regard to race, color, religion, sex, national origin, age, ancestry, handicap, disability or other legally protected status, in accordance with all applicable legal requirements. All information contained in or connected with the application will be considered personal and confidential and used only in conjunction with your possible employment.

Application Date: _____/_____/_____

Name: Last First MI _____	
Date of Birth: _____/_____/_____ mm dd yy	Social Security Number: _____/_____/_____
Present Address: Street: _____ City: _____ State: _____ Zip _____ E-mail Address: _____	Home Phone: (____)_____ Work or Alternate Phone: (____)_____
Are you a United States citizen?	Yes: _____ No: _____
Are you currently a law enforcement officer?	Yes: _____ No: _____

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LEGAL

Have you ever been charged and/or convicted of any criminal charge whether felony or misdemeanor:
Yes: _____ No: _____

IF THE ANSWER TO THE ABOVE QUESTION IS YES, ATTACH A DETAILED EXPLANATION TO YOUR APPLICATION. INCLUDE DATE, PLACE, CHARGE, AND FINAL DISPOSITION.

How did you learn of this employment opportunity?

_____Website _____Newspaper Ad _____Career Fair

_____Facebook _____College Career Center Other (explain)_____

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Employment History

Begin with your present or most recent employer and continue in reverse order. List additional employers on a separate sheet.

Current/Most Recent Employer:_____

Address:_____ Phone (____) ____-_____

Name & Title of Supervisor:_____ Phone (____) ____-_____

Dates employed: From ____/___/_____ To ____/____/_____ Title:_____

Salary: _____per_____ Full Time Part Time Permanent Temporary

Responsibilities & Duties:_____

_____

Did you supervise others? Yes No If yes, indicate number: _____Professional Staff ____ Non-professional Staff

Reason for Leaving?_____

Second Most Recent Employer:_____

Address:_____ Phone (____)_____-
_____

Name & Title of Supervisor:_____ Phone (____)_____-_____

Dates employed: From ____/___/_____ To ____/____/_____
Title:_____

Salary: _____per_____ Full Time Part Time Permanent Temporary

Responsibilities & Duties:_____

_____
_

Did you supervise others? Yes No If yes, indicate number: _____ Professional Staff ____ Non-professional Staff

Reason for Leaving?_____

Third Most Recent Employer:_____

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Address:_____Phone (____)_____-_____

Name & Title of Supervisor:_____ Phone (____)_____-_____

Dates employed: From _____/___/_____ To ____/____/_____
Title:_____

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Salary: _____per_____ Full Time Part Time Permanent Temporary

Responsibilities & Duties:_____

_____

Did you supervise others? Yes No If yes, indicate number: _____ Professional Staff ____ Non-professional Staff

Reason for Leaving?_____

EDUCATION RECORD

Location where High School Diploma or GED Equivalency was obtained_____

LIST ALL COLLEGES OR UNIVERSITIES ATTENDED:

Institution Name & Location:	Degree/Date:	Hours Completed	Date Attended	Major

LIST ALL TRADE, BUSINESS, TECHNICAL, OR MILITARY SCHOOLS ATTENDED:

Institution Name & Location	Dates Attended	Courses Completed/Certificates Awarded

List any other relevant certifications or licenses (include date received):

_____

_____

_____

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DRIVING RECORD

Drivers License Number:_____ State:_____ Class:_____ Exp. Date:_____

PROVIDE DETAILS REGARDING ANY ACCIDENTS, TRAFFIC CONVICTIONS, OR LICENSE FORFEITURES IN THE LAST 3 YEARS:

Incident Details: Details:

_____ _____

_____ _____

_____ _____

Has driver's license ever been denied, suspended or revoked? Yes No Explain:_____

_____

_____

__

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PLEASE READ AND SIGN

READ CAREFULLY BEFORE SIGNING THIS STATEMENT

I certify that the information given on this application and on any appended materials is true and complete to the best of my knowledge. I understand that any false or misleading information and/or omissions may result in the rejection of my application or, if employed, in termination of employment.

To determine my qualifications for employment, I authorize the City of Pekin to review my previous employment, driving, and criminal records and/or other background data as it may relate to the position for which I am applying. I hereby authorize all former employers and educational institutions to furnish any and all information they may have and release all parties from liability for any damage that may result from furnishing such information.

In consideration for employment, I agree to conform to the rules and regulations of the City of Pekin. I understand that no one other than the City Manager or Human Resources Director has the authority to enter into any agreement or contract for employment.

I understand that I will be required to undergo a post-offer medical exam that includes a drug screen, and I will be required to undergo a polygraph examination and psychological examination. If I should fail an examination for any reason, my offer of employment may be withdrawn.

_____/_____/_____

_____ _____

SIGNATURE (DO NOT PRINT) **DATE**

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CITY OF PEKIN

PHYSICAL AGILITY TEST – RELEASE OF ALL LIABILITIES

THE UNDERSIGNED, RECOGNIZING THAT THE **PHYSICAL AGILITY TEST** IS AN INTEGRAL PART OF THE EXAMINATION FOR FIRE FIGHTERS OR POLICE OFFICERS IN THE CITY OF PEKIN, ILLINOIS, HEREBY RELEASES, REMISES AND DISCHARGES THE CITY OF PEKIN, A MUNICIPAL CORPORATION, THE BOARD OF FIRE AND POLICE COMMISSIONERS OF THE CITY OF PEKIN, THE TESTING AGENCY CONTRACTED TO DO THE TEST(S) SHOULD IT BE CONTRACTED OUT, THEIR OFFICERS, SERVANTS, AGENTS AND EMPLOYEES OF AND FROM ANY AND ALL INJURIES, LOSSES AND DAMAGES TO MY PERSON SHALL HAVE CAUSED, OR MAY AT ANY TIME ARISE AS THE RESULT OF CERTAIN FIRE OR POLICE EXAMINATIONS CONDUCTED BY THE BOARD OF FIRE AND POLICE COMMISSIONERS OF SAID PEKIN, ILLINOIS. THE INTENTION HEREOF BEING TO COMPLETELY, ABSOLUTELY AND FINALLY RELEASE SAID CITY OF PEKIN, ILLINOIS, THE BOARD OF FIRE AND POLICE COMMISSIONERS, THE TESTING AGENCY CONTRACTED TO DO THE TEST(S) THEIR OFFICERS, SERVANTS, AGENTS AND EMPLOYEES OF AND FROM ANY AND ALL LIABILITY ARISING WHOLLY OR PARTIALLY FROM THE CAUSE AFORESAID.

SIGNED: _____

DATE: _____

WITNESSED BY: _____

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I, THE UNDERSIGNED, UNDERSTAND THAT ALL OF THE TESTS AND THE RESULTS THEREOF BECOME THE PROPERTY OF THE BOARD OF FIRE AND POLICE COMMISSIONERS OF THE CITY OF PEKIN AND ARE NOT SUBJECT TO REVIEW.

SIGNED: _____

DATE: _____

WITNESSED BY: _____