



Application for Employment
POLICE OFFICER APPLICATION

City of Chatfield
21 2nd Street Southeast
Chatfield, MN 55923
(507) 867-3810 (507) 867-9093 (FAX)

DATE & TIME RECEIVED:

The City of Chatfield is an equal opportunity/affirmative action employer and welcomes your application for the position of police officer with its Police Department. It is the policy of the City of Chatfield to avoid discrimination in the employment process on the basis of sex, age, race, color, creed, religion, national origin, sexual orientation, or any other non-relevant personal characteristic. The information you are being asked to provide is defined to be Personnel Data under the Minnesota Government Data Practices Act. Pursuant to the Data Practices Act, some of this information is classified as "public data" and the remaining information is classified as "private data". Data classified as "public" can be released to any requestor. Data classified as "private" may only be released with your consent. The purpose for gathering this information is to determine if you meet the minimum qualifications set by state law to be a peace officer in Minnesota, and to provide the Chatfield Police Department with data necessary to administer the police officer selection process. You are not required by law to provide the information being requested. Failure to provide any information requested in this application form will cause your name to be removed from the police officer selection process.

Please use a typewriter or print in black ink. Complete all blanks on this application, sign, and return to the City of Chatfield, 21 2nd Street Southeast, Chatfield, MN 55923.

PERSONAL INFORMATION

Full Name			Home Phone
Street Address			Work Phone
City, State, Zip Code			Cell Phone
Driver's License Number	State of Issue	Social Security Number	Email Address
Name, Address, and Phone Number of Someone Who Can Usually Locate You			

You would be interested in the following positions: Full-time ☐ Part-time ☐ Both ☐

Have you applied to the City of Chatfield before? Yes ☐ No ☐
If yes, when? _____

MINIMUM REQUIREMENTS

Instructions: Circle "yes" in the boxes to the right if each statement below is true about you. Circle "no" if the statement is not true about you.	Circle Answer Below	
I am a US Citizen	Yes	No
I am at least 21 years of age. If not, fill in the date you will turn 21 here:	Yes	No
I have been trained in first aid and achieved an Advanced First Aid, First Responder, or higher-level certification, as recorded by the Minnesota EMS Regulatory Board, or an equivalent first aid/first responder certification from another state, at some time during my life. (Attach a copy of your first aid certification to this application.)	Yes	No
I possess a Minnesota driver's license <u>or</u> a valid driver's license from another state.	Yes	No
My driving privileges in Minnesota (whether or not I have a Minnesota driver's license) are fully valid (NOT suspended, revoked, limited, or canceled).	Yes	No

MINNESOTA PEACE OFFICER LICENSE

Check the Correct Box	Peace Officer License Status	Follow the Corresponding Instructions
	I am currently licensed by the Minnesota Peace Officer Standards and Training (POST Board) as a full time peace officer.	Peace Officer License #: _____ Attach a copy of your peace officer license to this application.
	I am certified by the Minnesota POST Board as eligible to be licensed as a full time peace officer.	Attach a copy of your POST Board letter certifying your eligibility.
	I am a law enforcement student currently enrolled in the last year of a POST-approved Professional Peace Officer's Education (PPOE) program, or I have just graduated from such a program.	Expect to Graduate: _____Month _____Year Expect to Take POST Test: _____Month _____Year
	I have obtained my Minnesota peace officer's license reciprocity from the Minnesota POST Board.	Attach a copy of your POST Board letter certifying your reciprocity.
	None of the Above	You are not qualified at this time to apply for a police officer position. Please contact the Minnesota Peace Officer's Standards and Training Board (651-643-3060) for information on becoming a police officer in Minnesota.

MILITARY SERVICE

We follow the Veteran's Preference law. This law provides a five-point preference to those applicants who have received an Honorable Discharge or separation after serving more than 180 consecutive days in the military services for purposes other than training. Disabled veterans receive ten points if they have a disability rated at 50% or more. If you meet the requirements, and you wish to exercise your Veteran's Preference at this time, please indicate so below. Veteran's Preference may not be claimed by any veteran who is receiving, or is eligible to receive, a monthly veteran's pension benefit based exclusively on length of service.

DATE OF ENTRY FOR ACTIVE MILITARY DUTY (Do NOT include short training periods of active duty with a reserve unit. You must have served with a unit that was on active duty, not one on reserve status.) _MO _DAY _YEAR	PLACE OF (City/State)	DATE OF SEPARATION OR DISCHARGE FROM ACTIVE DUTY _MO _DAY _YEAR	TYPE OF SEPARATION OR DISCHARGE (Honorable, General, etc.)
	BRANCH OF SERVICE	TOTAL TIME OF ACTIVE DUTY YEARS _____ MONTHS _____	SERVICE CONNECTED DISABILITY, IF ANY (State type and percent.)
PRESENT RESERVE STATUS		MILITARY OCCUPATION	

► I hereby elect to claim Veteran's Preference in accordance with Minnesota State law for the current Chatfield Police Department hiring process for which I am applying: **(If Requesting Veteran's Preference, attach the copy of your form DD-214 that shows your honorable discharge.)**

Signature _____ Date _____

SCHOOLING

Instructions: List your high school or GED and all post-secondary schools you have attended, along with credits obtained, and any degrees, certificates, or diplomas received, and the dates attended.

School Location (City & State) and Phone Number	Credits Obtained	Degree, Certificate, or Diploma Received	Dates Attended
High School or GED			
College or Other Post-Secondary School			
College or Other Post-Secondary School			
College or Other Post-Secondary School			

LAW ENFORCEMENT TRAINING

Instructions: List any training you feel is relevant you have attended. DO NOT include training that was part of a post-secondary academic program or skills program. Include the information requested below.

Course / Training Name	Credits Obtained	Certification Received	Dates Attended

CONVICTIONS & TRAFFIC OFFENSES

Convictions: In the spaces below, list every crime or traffic offense for which you have been convicted. Include traffic offenses, but not parking violations. If you are unsure of the exact offense(s) for which you may have been convicted, check with the court that convicted you for details. What is a conviction? "Conviction" means that a person has been charged with a crime and the person was found guilty of that crime, regardless of length of or imposition or execution of any sentence received, any deferred finding of guilt or imposition of sentence by the court, any continuance for dismissal granted by the court, or any expungement of the offense records or conviction. Pleading guilty, being found guilty, being diverted, being continued for dismissal, or paying a fine constitutes "conviction" for traffic offenses. Juvenile matters in which you were adjudicated delinquent are not considered convictions. However, if you were a juvenile but tried as an adult, the conviction should be listed. Attach additional sheets if more space is needed.

CRIME OR OFFENSE	STATUTE NUMBER of the Exact Offense(s) for Which You Were Convicted	NAME & LOCATION OF THE COURT THAT CONVICTED YOU	DATE YOU WERE CONVICTED

Additional area for explanation if needed:

EMPLOYMENT HISTORY

Important Instructions: List all jobs you have held since age 16. List chronologically, beginning with your current or most recent position first. If you had any periods of no employment lasting longer than 30 days, add a separate listing for that time period and explain.

List your employment by position. For example, if you spent three years as a security guard and one year as a security supervisor, all working for the same security company, you would have at least two position listings for that employer.

We evaluate your entire work history when scoring your application. Each position may be worth points, so please be complete. Please do not leave this section blank or refer to a resume. **Only work experience listed on this form and in this exact format will be counted.** You may add extra sheets, if necessary, but please make sure to include all the requested information.

Employer _____	Length of Position From (month/year) _____
Address _____	To (month/year) _____
Phone Number _____ Your Title _____	Total (years/months) _____
Supervisor _____ Supervisor's Title _____	_____ Full Time _____ Part Time
Principle Duties or Responsibilities:	Were You a Licensed or Certified Law Enforcement Officer in This Position? _____ Yes _____ No
	May We Contact This Employer? _____ Yes _____ No
Reason for seeking new employment:	

Employer _____	Length of Position From (month/year) _____
Address _____	To (month/year) _____
Phone Number _____ Your Title _____	Total (years/months) _____
Supervisor _____ Supervisor's Title _____	_____ Full Time _____ Part Time
Principle Duties or Responsibilities:	Were You a Licensed or Certified Law Enforcement Officer in This Position? _____ Yes _____ No
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	May We Contact This Employer? _____ Yes _____ No
Reason for seeking new employment:	

Employer _____	Length of Position From (month/year) _____
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	May We Contact This Employer? _____ Yes _____ No
Reason for seeking new employment:	

Employer _____	Length of Position From (month/year) _____
Address _____	To (month/year) _____
Phone Number _____ Your Title _____	Total (years/months) _____
Supervisor _____ Supervisor's Title _____	_____ Full Time _____ Part Time
Principle Duties or Responsibilities:	Were You a Licensed or Certified Law Enforcement Officer in This Position? _____ Yes _____ No
	May We Contact This Employer? _____ Yes _____ No
Reason for seeking new employment:	

Chatfield Police Department Police Officer Take Home Written Test

Instructions:

- Please indicate below what background and experiences best demonstrate your capacity in each of the topics.
- Feel free to use work or any other life experience in your answers.
- Please indicate the time frames (month/year) for your information.
- Also, please include, for each category, the name and telephone number of someone who can verify your written response.
- You may respond on separate pages or add additional sheets. If you use separate or additional sheets, please put the topic(s) and your name on each sheet.

Test Tips:

- We are looking for specific information about ***your*** background and experiences that best demonstrate your abilities in the topic areas. We are ***not*** looking for an essay about the importance of the topics or your general thoughts about the topics.
- To do well on this test, write about your background and experience to demonstrate your level of ability in the topic area. Using a specific incident to illustrate your skill is most helpful.

Sample Test Question

For the sample topic “legal knowledge,” you would describe a true incident in which your legal knowledge played a significant role in the incident’s successful resolution. You might also tell us about your background in legal matters, such as an internship you served in the prosecutor’s office or a seminar you attended on search and seizure. If an applicant merely wrote about how important he or she thought legal knowledge was for police officers, or if the applicant asserted he or she was a legal expert (without giving us any idea how the applicant obtained such expertise), we would have no way of assessing the applicant’s ability in this topic area.

1. Formal Education After High School.

2. Volunteering in the Community.

3. Working on a Team.

4. Dealing with a conflict with a co-worker.

SIGNATURE

I certify that all of the statements by me in this application and in any attachments are true, complete and correct to the best of my knowledge and belief, and are made in good faith. I understand that any false information or omission of information from this application may be cause for rejection, disqualification, or dismissal if employed.

(Signature of Applicant)

(Date)

AUXILIARY AIDS AND ASSISTANCE

If, due to a disability, you need assistance in completing an application or if you anticipate that you will need auxiliary aids or service in the selection process, please notify the City Clerk at (507) 867-3810.

Reminder! Don't forget to attach copies of:

- First Aid, First responder or EMT certificate***
- POST eligibility letter or POST license***
- If claiming veteran's preference, your DD214 form showing your honorable discharge***

Please submit this application and all requested attachments to:

**City of Chatfield
21 2nd Street Southeast
Chatfield, MN 55923
Phone: (507) 867-3810
Fax: (507) 867- 9093**

Thank you for applying with the Chatfield Police Department! If you have questions about the police officer job or the selection process, or would like more information about us, please feel free to contact:

**Chief Shane Fox
Chatfield Police Department
21 2nd Street Southeast
Chatfield, MN 55923
(507) 867- 3331**

Equal Opportunity/Affirmative Action Data

As an employer with an Affirmative Action program, we comply with governmental regulations, including Affirmative Action responsibilities where they apply.

The purpose of collecting the data requested below is to comply with state and federal Equal Opportunity Employment reporting and other legal requirements. It is for periodic government reporting purposes only. This form will be filed separately from your application and will not be used in our recruitment evaluation process. Inclusion or exclusion of data will not affect any recruitment selection decisions.

Your cooperation in providing the data is **voluntary**.

Name: (Last, First, Middle)		
Address:		
City:	State:	Zip:

Position Applying For:	Today's Date:
Birth Date: (Month/Day/Year)	
Check One: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Check One of the Following: (Ethnic Origin) <input type="checkbox"/> White <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> African/American <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Other	
Check if any of the following are applicable: <input type="checkbox"/> Disabled Individual <input type="checkbox"/> Veteran <input type="checkbox"/> Disabled Veteran	
How were you made aware of this employment opportunity? Check all that apply. Newspaper (provide name): _____ POST Board POOL Line: _____ City of Chatfield Web Site: _____ City Employee (provide name): _____ Other (provide source): _____	