Date Received:
Time Received:

Punxsutawney Boro Police Department

301 E. Mahoning St. Suite 2
Punxsutawney, PA 15767
(814)938-6220

APPLICANT INFORMATION			
FULL NAME-LAST	FIRST	MIDDLE	
STREET ADDRESS	CITY	STATE	ZIP CODE

HOME PHONE	CELL PHONE	EMAIL
SOCIAL SECURITY NO.	DRIVERS LICENSE NO.	STATE ISSUED_____ Driver's License Valid_____

Are you a U.S. Citizen? _____Yes _____No _____Naturalized

If naturalized, list INS #_____

Are you Act 120 certified? _____Yes _____No

Name of Act 120 Academy_____

Date of Graduation_____

MPT#_____

Are you currently attending an Act 120 Academy _____Yes _____No

Name of Act 120 Academy _____

Anticipated Date of Graduation_____

Have you ever been employed by Punxsutawney Borough? _____Yes _____No

If yes, when and what position?_____

RESIDENCE HISTORY

List all residences during the past ten (10) years, beginning with your current residence:

From	To	Full Address (include city and state)

Family: List in order given showing relationship, Spouse, parents, guardians, step-parents, foster parents, parents-in-law, brothers, sisters, step-brothers and step-sisters. Include any others with who you have resided or with whom a close relationship existed or exists.

Relationship	Name	Address, if Living
Spouse		
Father		
Mother		

Financial Status:

Do you have any income from any source other than your principal occupation?

Yes/No (Circle One) How much? $_____ How often?_____

Do you have, or have you had, any financial account (savings, checking, loans, stocks, bonds, etc.)?
List all accounts during the past seven (7) years.

Name and Address of Financial Institution	Type of Account

Past and Present Membership in Organizations:

Name	Organization Type	Office Held, if Any	Membership Dates From	To

Vehicle Operator's License: Give the following information concerning any vehicle operator's license(s) you have held or now hold:

Type of License	Number	Issuing State	Expiration Date

Have you ever had a license suspended or revoked? Yes/No (Circle One) If yes please explain reason & date:

_____

Have you ever received a traffic citation? Yes or No (Circle One) If yes explain, reason, date & issuing Police Dept.

_____

EDUCATION

Starting with the most recent, list all High Schools, Colleges/Universities and Trade Schools you have attended:

Name & Address of School	
Type of Degree or Major	Did you Graduate? Yes or No (Circle One)
Name & Address of School	
Type of Degree or Major	Did you Graduate? Yes or No (Circle One)
Name & Address of School	
Type of Degree or Major	Did you Graduate? Yes or No (Circle One)
Name & Address of School	
Type of Degree or Major	Did you Graduate? Yes or No (Circle One)

Have you ever been suspended, expelled, or asked to leave any school for disciplinary reasons? Yes or No (Circle One)
Have you ever been placed on academic probation? Yes or No (Circle One)

MILITARY SERVICE

Did you ever serve in the United States Armed Forces? Yes or No (Circle One)	
Branch of Service:	From: _____ To: _____
Rank at Discharge:	Type of Discharge:
If other than honorable, explain:	

SELECTIVE SERVICE

Selective Service No:	Last Classification	Date:
Local Board:	Address:	

Have you ever applied for a position with any other governmental agencies? Yes or No (circle one)

If "Yes", give details:_____

_____

Character References: List only character references who have definite knowledge of your qualifications for the position of application. List three (3) character references. (Do Not list relatives, former or current employers, or persons living outside the United States.)

NAME	ADDRESS	HOME PHONE	CELL PHONE	YEARS KNOWN

Employment: Begin with your most recent job and list your work history for the past 10 years; including part-time, temporary or seasonal employment, and all periods of unemployment.

Dates of Employment		Name & Address of Employer	Job Title	Reason for leaving
To	From			
Description of Duties:				
Salary		**Name of Supervisor**		**Name of Co-Worker**
$_____per _____				

Dates of Employment		Name & Address of Employer	Job Title	Reason for leaving
To	From			
Description of Duties:				
Salary		**Name of Supervisor**		**Name of Co-Worker**
$_____per _____				

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Description of Duties:				
Salary		**Name of Supervisor**		**Name of Co-Worker**
$_____per _____				

Dates of Employment		Name & Address of Employer	Job Title	Reason for leaving
To	From			
Description of Duties:				
Salary		**Name of Supervisor**		**Name of Co-Worker**
$_____per _____				

Have you ever been discharged, terminated, asked to resign, furloughed, or put on inactive status for cause, or subject to disciplinary action while in any position (expect military)? If "Yes", state reason:

_____

_____

Have you ever resigned after being informed your employer intended to discharge you for any reason? If "Yes" explain, giving name and address of employer, approximate date, and reason.

_____

_____

ARREST HISTORY

Other than traffic citations, have you as an adult or juvenile, been arrested, convicted, charged, questioned, accused, or detained for any reason by police, security officer or military police, either in the United States or foreign country? Yes or NO (Circle One) If yes please explain **in detail** below. If you need more space, use another sheet of paper & attach.

DATE	CHARGE	DEPARTMENT	LOCATION	DISPOSITION

Were you ever served with criminal or civil subpoena or summons other than traffic? Yes or No (circle one)
Have the police ever been called to any of your former or current residences for any reason?
Yes or No (circle one)
Are you now under charges for any violation of the law? Yes or No (Circle One)
If "Yes" to any of the above, please explain:

I, _____ understand that **EVERY** section of this application must be completed in order for the Punxsutawney Boro Police Department to accept the application as complete. Print (**DO NOT** type) an answer to **every** question. If a particular question does not apply to you, so state with "N/A". If space available is insufficient, use additional paper and mark which section you are answering for. Do NOT misstate or omit material fact since the statements made herein are subject to verification to determine your qualification for employment.

_____ _____ _____

Signature of Applicant (Print Name Clearly) Date

Notification of Procedure Release

In the processing procedure required for applicants, it may become necessary to contact the applicant in the event he/she is being given further consideration for the position of police officer with the Borough of Punxsutawney.

If conventional methods fail in attempting to contact the applicant, a Certified, Registered Letter will be sent to the applicant address listed on the application. Should the Registered Letter be returned indicating that it was unclaimed or undeliverable, the applicant will be eliminated from further processing and consideration.

It is the applicant's responsibility to notify the Borough of Punxsutawney, in writing, of any address change. By affixing your signature to this form, the applicant acknowledges that he/she read and understood the contents of this procedure.

_____ _____ _____

Signature of Applicant (Print Name Clearly) Date

Verification of Statements

I, _____, verify that the statements made in the foregoing Patrol Officer Application for the Borough of Punxsutawney, Jefferson County, Pennsylvania are true and correct to the best of my knowledge, information and belief. I understand that any false statements made herein are subject to the penalties of 18 PA. C.S.§ 4904, relating to unsworn falsification to authorities, and subject to the penalties set forth in the Borough of Punxsutawney Civil Service Rules and Regulations relating to false statements. (Article III, Section 3.1)

_____ _____ _____

Signature of Applicant (Print Name Clearly) Date

Waiver and Release for Background Investigation

I, _____, hereby give the Borough of Punxsutawney the right to make a through investigation into my background, previous employment, education, credit status, and references in order to ascertain my suitability for service as a Borough of Punxsutawney Police Officer. I release from all liability and claims any and all persons, companies and corporations (public and private) supplying any information whatso ever to representatives of the Borough of Punxsutawney. This includes and is not limited to parties with whom I have entered into a written or oral agreement which contains a confidentiality clause. I release, indemnify and hold harmless the Borough of Punxsutawney, its officials, officers and employees from and against any and all liability which might result from conducting such an investigation.

_____ _____ _____

Signature of Applicant (Print Name Clearly) Date

Essential Duties of a Police Officer

1. **Running for several hundred yards**
2. **Climbing over obstacles**
3. **Crawling**
4. **Pushing moto vehicles**
5. **Pulling or carrying accident, fire or crime victims**
6. **Using physical force to apprehend and subdue arrestees**
7. **Withstanding prolonged exposure, as long as twelve (12) 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 of the officer, including taunts, insults, and threats to the officer, family members, or fellow police officers**
12. **Communicate effectively with individuals suffering from trauma**
13. **Operate a motor vehicle for long periods of time**
14. **Use a firearm effectively**
15. **Fill out written reports in a clear and concise manner.**

I have reviewed the above list of essential job functions for a Borough of Punxsutawney Police Officer and believe that:

_____ I can Fully perform all duties with or without reasonable accommodations.

_____ I cannot fully perform all duties even with accommodations.

_____ _____ _____

Signature **(Print Name Clearly)** **Date**

TESTING PROCEDURE

Applicants for Police Officer in Punxsutawney Borough are required to pass a Written Examination, Physical Agility Test, Background investigation and Psychological evaluation. The first portion of the selection process will involve a written examination. Applicants must pass the exam with a score of 70% or higher. A physical Agility Test will occur directly after the Written Examination and consist of the following:

SIT-UPS

With legs bent at a 90-degree angle, heels on the mat or ground, fingers interlocked behind the head, lift the body, touch elbows to knees, and return to the starting position, shoulders touching the matt or ground, x times within one (1) minute based on the Cooper Standard for Law Enforcement Physical Assessment. Feet may be together or apart and may be held but not knelt upon by another. Fingers must stay interlocked behind the head throughout the event. The back cannot be arched, and the buttocks cannot be lifted from the mat.

300 Meter Run

Cover the required distance of 300 meters within the criteria in the Cooper Standard for Law Enforcement Physical Assessment.

Push-Ups

From a front supported position, hands, and feet (toes), lower body as a unit with shoulders, hips and legs in the same plane, lowering the body by bending the elbows until the upper arms are parallel to the ground, and return to a front supported position by straightening the arms, x times based on the Cooper Standard for Law Enforcement Physical Assessment. Once commenced, the push up sequence must be continuous until the number of repetitions is reached or 1-mintue lapse, whichever occurs first.

1.5-mile Run

Cover the required distance of 1.5 mile within the criteria in the Cooper Standard for Law Enforcement Physical Assessment.

Cooper Standard for Law Enforcement Physical Assessment

	Male Standards by Age					Female Standards by Age				
30% Standards	Age 18-29	Age 30-39	Age 40-49	Age 50-59	Age 60+	Age 18-29	Age 30-39	Age 40-49	Age 50-59	Age 60+
Sit Ups (1 min reps)	35	32	27	21	17	30	22	17	12	4
300-meter run (time-sec)	62.1	63	77	87	87	75	82	106.7	106.7	106.7
Push Ups (1 min reps)	26	20	15	10	8	13	9	7	7	7
1.5-mile run (time)	13:16	13:46	14:34	15:58	17:38	15:52	16:38	17:22	18:59	21:20

The Physical Agility Test is a cumulative test. Each event is pass/fail, thus if one event is failed, the entire test is failed. All events must be completed within two (2) hours.

Testing Order:

1. **1 Minute Sit-up**
2. **300-meter run**
3. **1 Minute Push-Ups**
4. **1.5-mile run**