

## CHARTER TOWNSHIP OF EMMETT DEPARTMENT OF PUBLIC SAFETY

**Application for Employment** 

The Charter Township of Emmett is an equal opportunity employer and shall consider all qualified candidates for all positions without regard to race, color, sex, religion, national origin, age, height, weight, marital status, disability which is unrelated to an individual's ability to perform the duties of a particular job, or any other protected category.

**IMPORTANT NOTICE TO A PUBLIC SAFETY APPLICANTS:** If you are interested in employment as a Full-Time Public Safety Officer for Emmett Charter Township, you must be qualified per the Michigan Commission on Law Enforcement Standards (MCOLES) BEFORE employment. Your application must be accompanied by:

- 1. MCOLES certificate if you are already a certified police Officer
- 2. Fire fighter I and II certificates from the Michigan Fire Fighters Training Council (MFFTC) (required within one year)
- 3. A valid Michigan Emergency Medical Responder License or higher (required, but may be obtained within one year).
- 4. A completed Supplemental questionnaire for Sworn Officers.

For part-time Public Safety Officers, Emmett Charter Township will consider applicants without some or all of the aforementioned certifications.

**ALL APPLICANTS:** Careful and thoughtful completion of this application is an important step in your consideration of individuals for employment. Please complete the entire application. Print in ink or type. Ask for an extra piece of paper if you need to clarify any responses. Your application must also specify the position for which you are applying. Stating that you will do "ANYTHING" is indefinite and may result in your application not being accepted by the employer. Your application will be considered for sixty (60) days.

## YOU MUST ANSWER ALL QUESTIONS COMPLETELY. FAILURE TO DO SO WILL RESULT IN REJECTION OF YOUR APPLICATION AND YOU WILL NOT BE CONSIDERED FOR EMPLOYMENT.

<b>Position Applying For:</b>	Full - Time Certified Public Safety Officer

Part - Time Certified Public Safety Officer

Fire Fighter Public Safety Position

Non-Certified (Reserve) Public Safety Officer Position

Today's Date:			Time: _			AM	I PM
Full Name:							
Las		First		Middle		Suffix	
Address:	at .		City	State	Zip		Length/Time Living Ther
Previous Address	eı		City	State	Zip		Length/Time Living Ther
	:						
	Street		City	State	Zip		Length/Time Living Ther
Telephone Numbe	r:			Social Security Nun	nber:		
Driver's License N	umber:			Sta	te:		
If applying for the	part-time or r	eserve officer positi	on, what days	s and hours are you	available?		
Mon	Tue	Wed	Thu	Fri	Sat		Sun
Hours:							
Are you a relative t	o any Charter	Township of Emme	ett elected off	icial or employee?		Yes	No
If Yes: Name				Relationship			
Are you <u>under</u> 18 y	ears of age?	(If yes, please attach wo	rk permit)	Yes	No		
Are you currently v	vorking?			Yes	No		
Are you on lay-off?				Yes	No		
If yes, are	vou subiect to	recall?		Yes	No		

Have you ever applied for work with t	Yes	No		
If yes, when?				
Have you ever been employed by the G	Charter Township of Emmett?		Yes	No
If yes,	Department	From:	To	o:
			ite	Date
	ming employed in this country because roof of citizenship or immigration status may be requested upon		Yes	No
Have you even been arrested for <u>any</u> o	rime?		Yes	No
Are there any pending criminal charge	es against you?		Yes	No
If yes to either, give date locat	ion, charge and explanation:			
	cessarily bar employment; factors such	h as age, time of of	fense, serious	ness and
nature of the offense and rehabilitat	tion will be considered.			
	<b>REFERENCES</b>			
	(Do NOT include relatives or former emplo	oyers)		
Name	Address		To	elephone #
			_	
	MILITARY SERVICE REC	<u>ORD</u>		
Have you had any experience in the U	nited States Armed Forces or in the Na	ational Guard?	Yes	No
If yes, which branch?	Ra	ank at discharge		
Where you honorably dischar	ged? (Please provide copy of DD-214)		Yes	No
NOTE: A dishonorable di	scharge from the military will not nece	essarily be a bar fro	om employme	nt.
٠	ht	:-		
	hout reasonable accommodation (special a colved in the job or occupation for which yo		Yes	No
(See Attached Job Description	1)			

#### **EDUCATION**

	High School	Vocational/Technical	College	Graduate School
School Name City, State				
Did you Graduate (If not, credit hours completed)	Yes No	Yes No	Yes No	Yes No
Degree/Certificate				
Major/Minor				

Describe any specialized training, apprenticeships, internships, skills, certifications, and other extra-curricular activities that pertain to the position(s) for which you are applying.

List professional, trade, business group memberships and offices held and volunteer work. (excluding groups with the name and character of which indicate race, color, sex, religion, national origin, age, height, weight, marital status or disability which is unrelated to an individual's ability to perform the duties of the particular job, or any other protected class).

#### PUBLIC SAFETY TRAINING

Check all that apply

LAW	V ENFORCEMENT(Certification required)  I am/was employed as a law enforcement officer and possess a valid MCOLES certification(attach) #			
	I am a pre-service academy graduate eligible of MCOLES certification. (Graduation date:)			
	I am currently enrolled as a Law Enforcement pre-service academy student. (Anticipated Graduation date:)			
	$I\ am/was\ employed\ as\ a\ Law\ Enforcement\ Officer\ in\ another\ state\ and\ I\ am\ eligible\ for\ certification\ in\ Michigan.$			
FIRE	FIGHTING & EMERGENCY MEDICAL SERVICES (Certification required)  I am/was employed as a firefighter and possess a valid MFFTC Fire Fighter I certification. (Attached)  Lam/was employed as a firefighter and possess a valid MFFTC Fire Fighter II certification (ALL).			

### **EMPLOYMENT HISTORY**

Employer	Dates		Work Performed
	From	То	
Address & Telephone			
		ate/Salary	
Job Title	Start	Final	
Supervisor			
Supervisor			
Reason for leaving			
Employer	De	ates	Work Performed
Limployer	From	To	WorkTenormed
	110111		
Address & Telephone		•	
		ate/Salary	
Job Title	Start	Final	
Supervisor			
Reason for leaving			
reason for reaving			
n 1			W. 1 D. C. 1
Employer	From	ates To	Work Performed
	From	10	
Address & Telephone			
11441 500 St 1 510 p.10110	Hourly R	ate/Salary	
Job Title	Start	Final	
Supervisor			
Decree for leading			
Reason for leaving			
	1	-	
Employer		ates	Work Performed
	From	То	
Address & Telephone			
ridaress & Telephone	Hourly R	ate/Salary	
Job Title	Start	Final	
Supervisor			
Reason for leaving			
Employer		ates	Work Performed
	From	То	
Allows 0 maloulous			
Address & Telephone	Hannler D	oto/Colows	
Job Title	Start	ate/Salary Final	
JOD THE	Start	1.11191	
Supervisor	<u> </u>	1	
Reason for leaving			

## AGREEMENTS AND UNDERSTANDING

#### PLEASE READ CAREFULLY

1.	without evasion, and is complete and corr misrepresentation or omission of any info	5 - I certify that the information on this application is truthful, made ect to the best of my knowledge. I understand that falsification, mation submitted in connection with my application or interview, in rejection of my application or, if hired, in dismissal, regardless of
	Signature	Date
2.	listed in the Application for Employment, an organizations to give the Charter Township of they may have, personal or otherwise, and refurnishing any lawful information to the Chemployer and from any of my former em	T/EDUCATIONAL INFORMATION — I authorize the references d any prior employer, educational institution, or any other persons or of Emmett any and all information or any other pertinent information, clease all parties from all liability for any damage that may result from arter Township of Emmett. I waive written notice from my current ployers regarding the disclosure of disciplinary reports, letters of action contained in my personnel records. This waiver is made Right-to-Know Act.
	Signature	Date
3.	employers and their agents listed in this approvious employment and any pertinent inf	<b>RMATION</b> - I authorize the references and current and former lication to give you any and all information concening my current and formation they may have (even if more than four (4) years old) and amages that may result from furnishing same to you.
	Signature	Date
4.	and policies of the Charter Township of Emsubject to the provisions of any written agreeminated with or without cause, and with Township of Emmett or myself. I understant Emmett other than the Township Supervisor	d, in consideration of my employment, I agree to abide by the rules mett including any change made from time-to time, and agree that, reement to the contrary, my employment and compensation can be a or without notice, at any time, at the option of either the Charter d that no manager or other representative of the Charter Township of has any authority to enter into any agreement for employment for any the any agreement contrary to the foregoing. Any such agreement made a writing to be effective.
	Signature	Date
5.	will, before commencing employment, take a or its designated representative(s) to withdra purpose of this analysis is to determine understand that decisions concerning my en	<b>DALCOHOL TESTING</b> – I agree that if a job offer is made to me I physical examination and authorize the Charter Township of Emmett aw specimen(s) of my blood, urine or hair for chemical analysis. One or exclude the presence of alcohol, drugs or other substances. I aployment will be made as a result of these tests. I further authorize sting to release the results of such tests to the Charter Township of
	Signature	Date
6.	perform the job, I must notify the Charter reasonability should have known that an ac	am a person with a disability who requires an accommodation to Township of Emmett of that need within 182 days after I knew or commodation was needed. Failure to do so will preclude me from Emmett has not accommodated me as required by law.
	Signature	Date
7.	mobilization of personnel in emergencies, I v township limits of the Charter Township of E acceptance of that offer, I will abide by this re	stand that due to the requirement of off duty call back that require a will be required to live within a ten (10) minute response radius of the mmett. Further, based on a conditional offer of employment and your equirement within 6 months of my first day of work.
	Signature	Date

## AGREEMENT AND UNDERSTANDING (continued):

	AVE READ, UNDERSTAND AND AGREE OVE FIFTEEN (15) INDIVIDUAL STATEN	E TO THE ABOVE TERMS OF EACH OF THE MENTS, AS INDICATED ABOVE.
	Signature	Date
15.	<u>LIMITATIONS TO LITIGATION</u> – I agree that ar or termination of employment, including but not lim statutes, must be filed within one year of the event limitations period to the contrary.	ny lawsuit against the Township arising out of my employment nited to, claims arising under the State or Federal Civil Rights giving rise to the claims or be forever barred. I waive any
	Signature	Date
14.	the job I seek, I may ask the Charter Township of En	hat if I have a protected disability that affects my ability to do nmett to attempt to make a reasonable accommodation for it. p Supervisor as soon as possible after the date I know that
	Signature	Date
13.		erstand that my application will be considered pursuant to the for a period of sixty (60) days. If I am still interested in
	Signature	Date
12.	<u>AUTHORIZATION TO WORK</u> – If I am selected am authorized to work as required by the Immigration	for hire, I will be offered employment provided I verify tham I on Reform and Control Act of 1986.
	Signature	Date
11.		cute an authorization for the Charter Township of Emmett to iate law enforcement agency should the Charter Township of
	Signature	Date
10.	benefits when eligible as provided now or in the f documentation for verification of eligibility for fring	ith the Charter Township of Emmett, I agree to accept all fringe future. I understand that it is my responsibility to provide ge benefits as well as information regarding mailing address, olding exemptions and dependent information. The Charter formation for all purposes.
	Signature	Date
9.	<b>DRIVING RECORD CHECK</b> – If applying for a pauthorize the Charter Township of Emmett or its again driving record.	position that requires driving an Emmett Township vehicle, I ents the authority to make investigations and inquiries of my
	Signature	
	of such examination to the Charter Township of Emn	



# CHARTER TOWNSHIP OF EMMETT DEPARTMENT OF PUBLIC SAFETY

## SUPPLEMENTAL QUESTIONNAIRE FOR SWORN OFFICERS

Name (pri	nt):			
order to qu	ng knowledge, skills and abilities are minimum qual alify for consideration as a sworn Public Safety Off marking Yes or No below.			
YES NO		YES	NO	
	Read and interpret complex technical documents written in English, such as diagrams, manuals and textbooks			Willing and able to travel locally and out-of-state
	Write clearly, concisely, and legibly, using correct English grammar and spelling.			Willing to attend meetings and classes while off-duty
	Willing to work: Irregular hours Overtime Hours On-Call 18-24 hours shifts Any location. Willing to carry a firearm			ng constitute some of the essential functions of the Public Safety Officer. Are you willing and able to? Pull the trigger of a firearm with either hand. Apply sufficient force to an individual to restrain or subdue that that individual Squat and Crouch Crawl, walk, run and stand
	Willing to use approved weapons including (but not limited to)			See long and short distances during daylight and
	firearms, batons, if justified by laws, & policies and procedures?			darkness, and in dark and smoky environments.
	Willing to comply with Department grooming standards and to wear a uniform			Hear radio transmissions, long range conversations and other communications when obscured by background
	Willing and capable, both physically and mentally, to work under adverse conditions, such as fumes, gases, noise, dust, odors darkness, smoke, crowds, dampness, confined spaces, alone for long periods of time, heights, and decomposed,			noise.  Speak clearly on radio or loudspeaker  Smell odors  Freely use both hands and arms
	burnt or dismembered bodies.			Drive a motor vehicle under normal & emergency
	Willing to enforce all laws, policies and procedures.			conditions.
	Willing to take the life of another, if justified by laws, policies and procedures.			Exercise the required physical capabilities while wearing a uniform and equipment weighing up to 60 pounds+.
	Willing to train other employees Willing to perform routine work to completion.			Speak with a wide variety of people, using tact, self- Restraint, judgement and strategy?
YES NO				
	Is there any illegal drug, narcotic or controlled subsbody within the last two years?	stance t	hat y	ou have ingested, inhaled, or injected into your
	Have you ever been convicted of a crime of violence including but not limited to, battery or domestic violence?			
	Have you ever been convicted of a crime that is equ	ivalent	to a	felony as defined by Michigan statute?
	Have you ever been found guilty of a civil offense in limited to, fraud or misappropriation?	volving	disl	nonesty or breach of trust, including but not
CERTI	FICATION			
informat process, that I wi	that the above information is true and correct artion from this supplemental application. I also und I will be required to participate in the full screening the required to submit proof of age, U.S. citizenship the United States prior to being appointed to a swood	lerstan g proce p, or m	d the ess, u y ap	nt if I and selected to continue in the selection which I hereby agree to. I further understand
Signature	of Applicant:			Date: