BROWNTON POLICE DEPARTMENT

Salary Range per hour based upon relative experience and certification. The position will remain open until filled or until an eligibility list is established. Early applications are encouraged to ensure consideration.

As part of the application process we would like you to take the time to consider the following questions and respond in writing. You may type or print your answers on a separate sheet of paper. Do not use more than one page per question. Please include your answers with the application.

- 1. Why do you want to become a peace officer in a city and police department of this size, and what are your long and short term goals?
- 2. What do you perceive the duties of a peace officer to be in today's society?
- 3. What is your philosophy on issuing citations and what would prompt your decision on whether or not you would issue a driver a citation after you had him/her stopped?
- 4. Explain any community oriented projects you have been involved in, and what type of project would you like to be involved in?
- 5. Describe three situations where you have used common sense.

CITY OF BROWNTON APPLICATION FOR EMPLOYMENT

THE CITY OF BROWNTON IS AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER AND WILL NOT DISCRIMINATE AGAINST ANY APPLICANT OR EMPLOYEE ON ANY GROUNDS PROTECTED UNDER FEDERAL, STATE, OR LOCAL LAW, INCLUDING RACE, COLOR, CREED, RELIGION, AGE, SEX, SEXUAL ORIENTATION, NATIONAL ORIGIN, ANCESTRY, MARITAL STATUS, DISABILITY, DISABILITY RELATED TO PREGNANCY OR CHILDBIRTH, MEMBERSHIP OR ACTIVITY IN ANY LOCAL COMMISSION, STATUS REGARDING PUBLIC ASSISTANCE, MEMBERSHIP OR NON-MEMBERSHIP IN ANY LABOR ORGANIZATION, OR ANY OTHER CHARACTERISTIC PROTECTED UNDER FEDERAL, STATE OR LOCAL LAW. NONE OF THE QUESTIONS IN THIS APPLICATION ARE INTENDED TO ELICIT INFORMATION REGARDING ANY PROTECTED CHARACTERISTICS, NOR IMPLY ANY LIMITATION, ILLEGAL PREFERENCES, OR DISCRIMINATION BASED UPON NON-JOB-RELATED INFORMATION OR PROTECTED CHARACTERISTICS.

(PLEASE PRINT OR TYPE INFORMATION)

POSITION APPLIED FOR		D	ATE			
LAST NAME						
	T NAME MIDDLE NAME/INITIAL					
ADDRESS						
CITY						
CELL PHONE NUMBER	EMAIL					
DRIVERS LICENSE #, REGISTRATIONS, LICENS	SES AND CER	TIFCATES	<u>.</u>			
License Type Number	Class	Expira	ition			
1						
2						
3						
IF YOU ARE UNDER 18 YEARS OF AGE, CAN YO		REQUIRE	D PROOF OF YOUR			
ELIGIBILITY TO WORK?	YES	S N	0			
ARE YOU CURRENTLY EMPLOYED?	YES	S N	0			
MAY WE CONTACT YOUR PRESENT EMPLOYE	R? YES	S N	0			
ARE YOU PREVENTED FROM LAWFULLY BECOBECAUSE OF VISA OR IMMIGRATION STATUS?						
		SN				
<u>ON WHAT DATE WOULD YOU BE AVAILABLE F</u>	UK WUKK!					

ARE YOU AVAII	_ABL	E TO) WC	DRK:													
FULL TIME	PART TIME SI					SHIF	HIFT WORK TEMPORA				DRAR'	Y					
ARE YOU CURF	ARE YOU CURRENTLY ON LAY-OFF STATUS AND SUBJECT TO RECALL? YESNO																
HAVE YOU BEE (Applicants who not necessarily of IF YES PLEASE EXPLAIN:	are f lisqu	finalis alify	sts wi an ap	II be oplica	subje ant fro	ct to a	a crim nployn	inal banent.)	ackgro	ound ii	nvesti	RS? gation	YES _ . Con	victio	NO .	ill	
						ED	UCA	TION	I								
	Elementary School				High School				Undergraduate College/University				Graduate/ Professional				
School Name & Location									_			_					
YEARS COMPLETED	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree																	
Describe Course of Stu	ıdy																
Describe any specialized training, apprenticeship, skills and extra- curricular activities																	
Describe any honors you have received																	
State any additional information you feel may be helpful to us in considering your application																	
LIST PROFESSIONAL, memberships which wou status.																	

Employer	Length c	of Service	Work Performed			
Address						
Telephone Number(s)	Hourly Rate/Salary Starting Final					
Job Title	Supervisor					
Reason For Leaving						
Employer		Length o	of Service	Work Performed		
Address						
Telephone Number(s)		Hourly Rate Starting	/Salary Final			
Job Title	Supervisor					
Reason For Leaving						
Employer		Length o	of Service	Work Performed		
Address						
Telephone Number(s)		Hourly Rate Starting I	/Salary -inal			
Job Title	Supervisor					
Reason For Leaving						
Employer		Length o	of Service	Work Performed		
Address						
Telephone Number(s)	Hourly Rate/Salary Starting Final					
Job Title	Supervisor	_				
Reason For Leaving						
SPECIAL SKILLS AND Q				arate sheet of paper.) syment or other experience.		

not previous employers.
1
2
3
F YOU HAVE SERVED IN THE UNITED STATES MILITARY, PLEASE INDICATE WHICH BRANCH, DATES SERVED, TYPE OF DISCHARGE AND DATE OF DISCHARGE. ALSO, PLEASE DESCRIBE YOUR DUTIES AND TRAINING:
DO YOU QUALIFY FOR VETERANS PREFERENCE POINTS? IF YES, PLEASE PROVIDE COPY OF FORM 214

APPLICANT'S STATEMENT

BY MY SIGNATURE BELOW, I PROMISE THAT THE INFORMATION PROVIDED IN THIS EMPLOYMENT APPLICATION AND DURING ANY INTERVIEW (AND ACCOMPANYING RESUME OR DOCUMENTATION, IF ANY) IS TRUE AND COMPLETE, AND I UNDERSTAND THAT ANY FALSE OR MISLEADING INFORMATION OR SIGNIFICANT OMISSIONS MAY DISQUALIFY ME FROM FURTHER CONSIDERATION FOR EMPLOYMENT, AND MAY LEAD TO MY DISMISSAL FROM EMPLOYMENT, IF DISCOVERED AT A LATER DATE. I AGREE TO IMMEDIATELY NOTIFY THE CITY OF BROWNTON IF I SHOULD BE CONVICTED OF A FELONY, OR OF ANY CRIME INVOLVING DISHONESTY, BREACH OF TRUST, CONTROLLED SUBSTANCES, OR SEXUAL MISCONDUCT WHILE MY JOB APPLICATION IS PENDING, OR DURING MY PERIOD OF EMPLOYMENT, IF HIRED.

I UNDERSTAND THAT THIS APPLICATION SHALL BE CONSIDERED ONLY FOR THE POSITION(S) LISTED ON THE FIRST PAGE OF THE APPLICATION AND CURRENTLY AVAILABLE AS OF THE DATE OF THIS APPLICATION.

I AUTHORIZE ANY PERSON, SCHOOL, CURRENT EMPLOYER, PAST EMPLOYER(S), AND ORGANIZATIONS NAMED IN THIS APPLICATION (AND ACCOMPANYING RESUME, IF ANY) TO PROVIDE THE CITY OF BROWNTON WITH ANY INFORMATION AND OPINION REQUESTED BY THE CITY OF BROWNTON IN CONNECTION WITH ANY APPLICATION, AND I RELEASE SUCH PERSONS AND ORGANIZATIONS FROM ANY LEGAL LIABILITY IN MAKING SUCH STATEMENTS.

I UNDERSTAND THAT THIS APPLICATION DOES NOT CREATE A CONTRACT OF EMPLOYMENT. I UNDERSTAND THAT, IF HIRED, I AM OBLIGED TO COMPLY WITH ANY AND ALL CURRENT AND SUBSEQUENTLY ADOPTED CITY OF BROWNTON POLICIES, INCLUDING PHYSICAL EXAMINATION AND DRUG AND ALCOHOL TEST.

I DO NOT KNOW OF ANY REASON WHY I WOULD NOT BE ABLE TO PERFORM THE DUTIES AND TASKS OF THIS POSITION AS OUTLINED IN THE JOB DESCRIPTION.

Signature of Applicant	Date

CITY OF BROWNTON 335 Third Street South P. O. Box 238 BROWNTON, MN 55312 cityclerk@cityofbrownton.com PHONE – 320-328-5318