Danny Rains
Chief of Police

Oakwood Hills Police Department
3020 North Park Drive
Oakwood Hills, Illinois 60013
www.oakwoodhills.org

Administrative 815-444-9456
Fax 815-444-9445

AN EQUAL OPPORTUNITY EMPLOYER

EMPLOYMENT APPLICATION FOR CERTIFIED FULL-TIME POLICE OFFICER

It is the policy of the Village of Oakwood Hills to provide equality of opportunity to all persons regardless of sex, color, race, ancestry, religion, national origin, age, physical or mental handicap, marital status, military status, sexual orientation or any other protected group status. This policy applies to all aspects of our personnel policies, practices and operations. The Village complies with the Americans with Disabilities Act (ADA). Persons needing accommodations in the recruitment process should notify the Chief of Police in advance. The Village of Oakwood Hills will consider all information contained in or connected with this application personal and confidential and used only in conjunction with your possible employment. Please furnish complete information as outlined in this application.

Any misrepresentation on this application, whether actual or by omission, may disqualify you for consideration for employment by the Village of Oakwood Hills.

THIS FORM IS A PART OF THE APPLICATION PROCESS AND MUST BE AS COMPLETE AS POSSIBLE.

You cannot be considered for the position unless you meet the minimum requirements listed herein.

Your application will be removed from the active file if you fail to respond to a letter or phone call concerning your interest in the position or fail to show for a scheduled test or interview.

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MINIMUM QUALIFICATIONS

Candidates selected must first meet all of the following criteria:

1. 21 years of age.
2. High school graduate (or equivalent).
3. Valid Driver's License.
4. Valid Illinois Firearm Owners Identification (FOID) card.
5. Good moral character.
6. Mentally and physically able to perform the tasks of the job.
7. Able to pass a drug screening.
8. No felony, or certain misdemeanor convictions including domestic violence.
9. Graduate of an Illinois Basic Law Enforcement Training course or another program qualified by the Illinois Law Enforcement Training and Standards Board for certification in Illinois.

GENERAL INSTRUCTIONS

- To be eligible for consideration, the application MUST be complete, accurate and legible.
- If a question does not apply to you, mark N/A in the space provided.
- If space provided is insufficient, attach a separate sheet and precede the additional information with the section title to which you are referring/continuing.
- It is your responsibility to notify the Village of any changes of address or phone number.
- *Authorization to Release Information* and *Verification and Waiver* forms must be signed and returned with the application, in order to be considered.
- Include copies of the following documents:
  - Birth certificate.
  - High school diploma or G.E.D. certificate.
  - Military discharge certificate (if applicable).
  - State of Illinois/ILETSB Law Enforcement Officer Certification (if applicable).
  - Any Police Training Certificates (if applicable).
  - Certificate of Naturalization (if applicable).
  - A résumé is not required, but may be submitted in addition to this application.

If you have any questions, you may call (815) 444-9456.

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PERSONAL INFORMATION

Last Name: _____ First: _____ Middle: _____

Any other previous names, aliases or maiden name if applicable: _____

Date of Birth: _____ Social Security #: ___--___--____

Current Address: _____
Street Number Street Name Apartment Number

_____ _____ _____
City State Zip

Home Phone: ___--___--____

Other Phone: ___--___--____ [ ] Office [ ] Mobile [ ] Pager

Other Phone: ___--___--____ [ ] Office [ ] Mobile [ ] Pager

Email: _____

Are you a U.S. Citizen? [ ] Yes [ ] No
If "no", are you a Naturalized Citizen? [ ] Yes [ ] No
City and State of birth: _____

Is your driver's license currently valid? [ ] Yes [ ] No

Driver's License: _____ _____
Number State

Do you presently have any relatives employed by the Village of Oakwood Hills? [ ] Yes [ ] No

If yes, please give name, department and position: _____

RESIDENCES

List your addresses for the last fifteen (10) years, beginning with your current address.

From	To	Street Address of Residence	City & State

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EDUCATIONAL INFORMATION

SCHOOL	Name of School (including City and State)	Dates Attended From To	Major	Degree (if none, list credits earned)
HIGH SCHOOL/ G.E.D.				
COLLEGE				
OTHER				
OTHER				

List any professional certificates or licenses you hold (besides basic law enforcement certification):

_____

_____

MILTARY SERVICE

Have you ever served in any military organization? [ ] Yes [ ] No (If "No", move to the next section.)
If "Yes," indicate type of service: [ ] Active [ ] Reserve [ ] National Guard
Which Branch(es)? _____

What is your serial number?	Highest rank held:	Rank at discharge:
Give date and location of entrance to active duty (City & State):		List period(s) of active duty From (Date) To (Date)
Give date and location of discharge (City & State):		
What type of discharge was received? [ ] Honorable [ ] Medical [ ] Dishonorable [ ] Honorable Conditions [ ] Other		
Were you ever formally disciplined or convicted at a court-martial? [ ] Yes [ ] No If "Yes," explain: _____		
List any awards/commendations received: _____		

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EMPLOYMENT HISTORY

List all jobs you have held for the last fifteen (15) years, including periods of unemployment. List your present or most recent job first. Include Military Service and temporary or part-time jobs in proper time sequence. Include additional sheets, if necessary.

1. Employer's Name & Type of Business:	Street Address: City, State & Zip:	
Name & Title of Supervisor:	Business Phone Number:	
Exact Title or Positions You Hold/Held:	From (Date) To (Date)	Salary per Month
Explain Your Duties:		
Reason for Leaving:	May we contact this employer? [ ] Yes [ ] No If "No," list reason:	

2. Employer's Name & Type of Business:	Street Address: City, State & Zip:	
Name & Title of Supervisor:	Business Phone Number:	
Exact Title or Positions You Hold/Held:	From (Date) To (Date)	Salary per Month
Explain Your Duties:		
Reason for Leaving:	May we contact this employer? [ ] Yes [ ] No If "No," list reason:	

EMPLOYMENT HISTORY
(CONTINUED)

3. Employer's Name & Type of Business:	Street Address: City, State & Zip:	
Name & Title of Supervisor:	Business Phone Number:	
Exact Title or Positions You Hold/Held:	From (Date) To (Date)	Salary per Month
Explain Your Duties:		
Reason for Leaving:	May we contact this employer? [ ] Yes [ ] No If "No," list reason:	

EMPLOYMENT HISTORY

Were you ever discharged or forced to resign from employment because of misconduct or unsatisfactory service?
[ ] Yes [ ] No

If "Yes," explain: _____

Please list any volunteer work, unsalaried experience and/or work internships related to public safety (past 10 years):

LAW ENFORCEMENT TRAINING & EXPERIENCE

Describe all duty and specialty training and/or assignments in your police career, besides normal patrol activities. (E.g., traffic unit, investigations, narcotics, community relations/crime prevention, FTO/training of officers, etc.)

List any commendations awarded, special achievements, and/or innovative programs you implemented:

Describe any discipline you have received: _____

Have you had a break of service in your law enforcement career? [ ] Yes [ ] No
If "Yes," list dates not in active service, and reason for break in service:

PERSONAL FINANCIAL HISTORY

Have you ever filed for bankruptcy relief? [ ] Yes [ ] No
If "Yes," provide details:

Are there currently any liens or judgments against you? [ ] Yes [ ] No
If "yes", provide details:

CRIMINAL HISTORY

Have you ever been arrested or convicted of a misdemeanor or felony? [ ] Yes [ ] No
If "Yes," explain:

Have you ever been placed on probation? [ ] Yes [ ] No
If "Yes," explain:

Have you ever been fingerprinted by a police agency other than for an arrest? [ ] Yes [ ] No
If "Yes," explain (including agency, date & purpose):

Have you received any traffic citations in the past three (3) years? [ ] Yes [ ] No
If "Yes," explain violation & outcome:

Have you been cited for any ordinance violation in the past five (5) years, other than parking citations?
[ ] Yes [ ] No
If "Yes," explain (including agency, date & violation):

PROFESSIONAL REFERENCES

Fill in the names of three adults, not related to you and not current or former employers, who have known you for a period more than five (5) years. All persons to whom you refer will be asked to appraise your character, ability, experience, personality and other qualities.

1. Name:	Years Known: How Known:
Address: [ ] Home [ ] Work [ ] Other _____	Phone Number: [ ] Home [ ] Work [ ] Other _____
Occupation/Profession:	

2. Name:	Years Known: How Known:
Address: [ ] Home [ ] Work [ ] Other _____	Phone Number: [ ] Home [ ] Work [ ] Other _____
Occupation/Profession:	

3. Name:	Years Known: How Known:
Address: [ ] Home [ ] Work [ ] Other _____	Phone Number: [ ] Home [ ] Work [ ] Other _____
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1. Name:	Years Known: How Known:
Address: [ ] Home [ ] Work [ ] Other _____	Phone Number: [ ] Home [ ] Work [ ] Other _____
Occupation/Profession:	

2. Name:	Years Known: How Known:
Address: [ ] Home [ ] Work [ ] Other _____	Phone Number: [ ] Home [ ] Work [ ] Other _____
Occupation/Profession:	

3. Name:	Years Known: How Known:
Address: [ ] Home [ ] Work [ ] Other _____	Phone Number: [ ] Home [ ] Work [ ] Other _____
Occupation/Profession:	

PLEASE READ THE FOLLOWING BEFORE SIGNING

VERIFICATION

I hereby affirm that any information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I understand that any false statements or significant omissions may cause rejection of this application, disqualify me from further consideration for employment, and may be considered justification for termination of employment if discovered at a later date.

WAIVER

I authorize investigation of all statements contained herein and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from liability for any damage that may result from furnishing information to the Village of Oakwood Hills. I waive any right of privilege, privacy, and/or confidentiality I may have in the information provided by references or others who I have indicated may be contacted.

In submitting this application, I further understand that it becomes the property of the Village of Oakwood Hills Police Department and it will not be returned. I understand that a drug screen, confidential background investigation, credit check, and interview will be required as a condition of employment.

_____ _____

Signature in Full Date

_____

Print Full Name

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AUTHORIZATION TO RELEASE INFORMATION

APPLICANT INFORMATION

LEGAL NAME: _____

OTHER NAMES USED: _____

DATE OF BIRTH: _____

TO WHOM IT MAY CONCERN:
As an applicant for a position with the Oakwood Hills Police Department, I am required to furnish information for use in determining my moral character, honesty, dependability and physical and mental qualifications.

I hereby request and authorize the disclosure of any and all information concerning my moral character, honesty and dependability. This includes, but is not limited to, the release of: employment records, including training records and disciplinary records; previous employment background investigation documents and applications for employment; financial records and credit history; military records; academic records; medical records, including the results of previous psychological and polygraph examinations, pertaining to employment. I authorize photocopies of these records, if requested, to be provided to the Oakwood Hills Police Department.

I hereby release you, your organization and others from any liability and/or damage which may result from furnishing the above information. This authorization shall be valid and effective for one year from the date signed.

Applicant Signature: _____

Date Signed: _____

REFERENCE PROVIDER:
PLEASE RETAIN THIS COPY FOR YOUR FILES