

# **Argos Police Department**

101 S. First Street  
Argos, Indiana 46501  
Phone: (574)892-5122  
Fax: (574)892-5092

## **General Information and Instructions**

1. The salary range is \$47,174 for probationary officers and \$51,870 to \$55,190 for ILEA certified officers. Salary for a certified officer will depend on experience.
2. The probation period for non-ILEA certified persons shall be (1) year from the date of hire, with the option of an extension of up to (6) months from the date of completion of the Indiana Law Enforcement Academy.
3. Other benefits will be the same as other Town of Argos employees.
4. Any non-ILEA certified person who attends the ILEA must pass all of the required tests on the first attempt. Failure to do so may result in dismissal from the department, with a determination to be made by the Chief of Police,
5. Applicants must be at least 21 yrs. of age and must not have reached their 40<sup>th</sup> birthday by the time of employment. Each applicant will be required to complete and pass a MMPI test at no charge to the applicant. Successful applicants) are required to pass a physical examination permitting their participation in the 1977 Police and Fire Pension Fund.
6. All applicants will be required to complete and pass a physical agility course, which includes minimum standards established by the Indiana Law Enforcement Academy, and other tests included at the discretion of the Argos Police Department.
7. All applicants will be required to complete and pass a written test.
8. Pages 9,10, and 11 of the application must be signed in the presence of a Notary Public and be notarized. Incomplete applications may be disqualified and removed from consideration for employment.
9. Because of confidential information contained in the application, it should be placed in a sealed envelope and hand delivered to the Argos Police Department at 101 S. First Street, Argos, IN 46501.
10. If you are not the successful applicant, your application will be returned at your request.

**ARGOS POLICE DEPARTMENT**

**APPLICATION FOR EMPLOYMENT**

**General Instructions**

Type or print in black ink, an answer to every question. If a question does not apply to you, answer with N/A. If the space provided is insufficient, use a separate sheet of paper and precede each explanation with the number of the reference block. Do not misstate or omit material facts, since the statements made herein are subject to verification to determine your qualifications for employment.

**POSTION APPLYING FOR:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(1) **Name.**

Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Alias (if any) \_\_\_\_\_

(2) **Address.** Street \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_

(3) **Phone.** Home ( ) \_\_\_\_\_ Work ( ) \_\_\_\_\_

(4) **Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_ (5) **Place of Birth** \_\_\_\_\_

(6) **Social Security Number** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

(7) **Physical Description.** Ht. \_\_\_\_\_ Wt. \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_

(8) **Citizenship.** Are you an American Citizen? Yes \_\_\_\_\_ No \_\_\_\_\_ If no, please provide your Alien number, and date and state of issue \_\_\_\_\_  
\_\_\_\_\_

(9) **Marital Status.** Single \_\_\_\_ Married \_\_\_\_ Separated \_\_\_\_ Divorced \_\_\_\_ Widowed \_\_\_\_  
If engaged, please provide the name, address and telephone number of your fiancé \_\_\_\_\_  
\_\_\_\_\_

If married, please provide the name of your spouse \_\_\_\_\_

If divorced or separated, please list the name, address and telephone number of your estranged spouse  
\_\_\_\_\_  
\_\_\_\_\_

a. **Dependents** Please list all dependents living within your household.

<u>Name</u>	<u>Relationship</u>	<u>Age</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(10) **Military Status.** Have you ever served in the armed forces? Yes \_\_\_\_\_ No \_\_\_\_\_  
While in the service, were you ever arrested for an offense that resulted in a trial by  
court-martial or by summary special or general court-martial? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes,  
please list all information.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you a member of the Reserves or the National Guard? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes,  
please list grade and service number, as well as the organization and location.

\_\_\_\_\_  
Active \_\_\_\_\_ Inactive \_\_\_\_\_ Standby \_\_\_\_\_ Commander \_\_\_\_\_

(11) **Education.** Please list all schools attended, beginning with elementary school and continue  
until completion of college.

<u>Name</u>	<u>City/State</u>	<u>Dates</u>	<u>Graduate?</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Trade or vocational schools attended.** List any trade or vocational schools that you have attended.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(12) **Foreign language.** List each foreign language, and indicate your knowledge of each aspect, with a (+) to indicate strong knowledge and a (-) to indicate weak knowledge.

<u>Language</u>	<u>Read</u>	<u>Speak</u>	<u>Understand</u>	<u>Write</u>	<u>Translate</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

(13) **Special skills and qualifications.** Please list all special skills that you may have. For example: pilots license, radio operator, computer, etc.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(14) **Vehicle operator's license.** License Number \_\_\_\_\_  
 Type \_\_\_\_\_ State \_\_\_\_\_ Restrictions \_\_\_\_\_

Has your license ever been suspended or revoked for any reason? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Has your auto insurance ever been canceled: Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Auto insurance company name and address. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(17) **Employment history.** Beginning with your most recent or current job, please list your work history from the time you graduated from high school or were discharged from the military, whichever applies to you. Also include any periods of unemployment if applicable.

Employer: \_\_\_\_\_  
 City/State: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
 Phone \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_

Employer: \_\_\_\_\_  
 City/State: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
 Phone \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_

Employer: \_\_\_\_\_  
City/State: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Phone \_\_\_\_\_ Supervisor \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

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Phone \_\_\_\_\_ Supervisor \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

Employer: \_\_\_\_\_  
City/State: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Phone \_\_\_\_\_ Supervisor \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

Employer: \_\_\_\_\_  
City/State: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Phone \_\_\_\_\_ Supervisor \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

Employer: \_\_\_\_\_  
City/State: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Phone \_\_\_\_\_ Supervisor \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

Employer: \_\_\_\_\_  
City/State: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Phone \_\_\_\_\_ Supervisor \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

Employer: \_\_\_\_\_  
City/State: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Phone \_\_\_\_\_ Supervisor \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

Have you ever been discharged (fired), put on inactive status for cause, or subjected to disciplinary action while employed in any position? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain.

\_\_\_\_\_  
\_\_\_\_\_

Have you ever resigned (quit) after being informed by your employer that they intended to discharge (fire) you for any reason? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain.

\_\_\_\_\_  
\_\_\_\_\_

**(18) Financial status.**

Current yearly base income? \_\_\_\_\_

Do you have income from another source? \_\_\_\_\_ Yes \_\_\_\_\_ No

May we obtain a copy of your credit history? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you currently have a checking account? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, which financial institution, including City and State.

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**(19) Arrest, Detention and Civil litigation.** Please list all arrests, including traffic, juvenile and criminal. Also list any and all civil litigations that you were a party in.

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Have you ever been fingerprinted for any reason? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain.

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**(20) Residences.** Please list all residences you have had for the past 10 years, beginning with the most recent or current.

<u>Address</u>	<u>City/State</u>	<u>From</u>	<u>To</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**(21) References.** Please list five people with direct knowledge of your ability to perform the duties of the job that you are applying for. Do not list former employers, former supervisors, relatives or persons residing outside Indiana. When listing, be sure to provide all the correct information as it will be necessary to contact them.

<u>Name</u>	<u>City/State</u>	<u>Phone</u>	<u>Years Known</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**(22) Past or present membership in organizations.**

<u>Name</u>	<u>City/State</u>	<u>Office Held</u>	<u>From</u>	<u>To</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**(23) Hobbies, sports and activities.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**(24) Pertinent incidents.** Are there any incidents in your life that are not already mentioned in this application, that may reflect upon your suitability to perform the duties which you may be called upon to do? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**(25) Previous governmental applications.** Have you ever applied with any other governmental agency? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please give dates and locations.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**(26) Polygraph (Lie Detector) examination.** Will you agree to submit to a polygraph test? Yes \_\_\_\_\_ No \_\_\_\_\_ If no, please explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**(27) Contact of present employer.** Do you object to your current employer being contacted in regard to your application? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers. I also certify that the entries made by me are true, complete, and correct to the best of my knowledge and belief.**

**I further agree and consent In advance to be being summarily discharged without case or hearing if any of the above information contains any misrepresentations or falsifications and/or any pertinent information has been omitted.**

**DO NOT SIGN UNTIL YOU ARE IN THE PRESENCE OF A NOTARY PUBLIC**

\_\_\_\_\_  
Signature of Applicant

Subscribed and sworn before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public My commission expires \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_



**ARGOS POLICE DEPARTMENT**  
101 S. FIRST STREET  
ARGOS, IN 46501

**RECORDS AND REFERENCE CHECK**  
**GENERAL WAIVER AND AUTHORIZATION FOR RELEASE**

I, \_\_\_\_\_, hereby authorize any and all schools, physicians, hospitals, Armed Services, employers, law enforcement agencies, credit information agencies, or any other person or organization or agency to furnish to the Argos Police Department, or its designated agent (s) any and all current and/or past information, opinions, reason for leaving, documents and records which may be requested; and to allow the visual inspection and copy of all reports, photographs, or other documents.

I hereby waive any objection to the release of said information and grant to the Argos Police Department, or its designated agent(s), any right I may have to said information.

I also authorize investigation of all statements made in my application for employment.

I understand that in the event of my employment with the Town of Argos, I shall be subject to dismissal if any of the information I have given in this application is false or if I have failed to give any material information herein requested

**DO NOT SIGN UNTIL YOU ARE IN THE PRESENCE OF A NOTARY PUBLIC**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**State of Indiana**

County of \_\_\_\_\_

Subscribed and sworn to before me, a Notary Public, in and for said county and state

This \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Printed

\_\_\_\_\_  
County of Residence

My Commission Expires:

\_\_\_\_\_

**Argos Police Department**  
**Physical Fitness Assessment Test**

The Physical Fitness Assessment Test is comprised of five (5) fitness components. Each component will be measured on testing day and will be scored as: **Pass or Fall**

**1. Vertical Jump**

- a. The vertical jump measures leg power and measures how high a person can jump from a stationary position.
- b. Candidates must be able to jump vertically a minimum of **sixteen (16) inches**.

**2. Push-Ups**

- a. Push-ups measure muscular endurance of the upper body.
- b. Candidates must be able to perform **twenty-five (25) strict push-ups (no time limit)**

**3. Sit-Ups**

- a. Sit-Ups measure abdominal or core endurance.
- b. Candidates must be able to perform **twenty-nine (29) strict sit-ups in 1 minute**.

**4. 300 Meter Run**

- a. The 300 Meter Run measures aerobic power, or the ability to perform an intense burst of effort for a short period of time or distance.
- b. Candidates must be able to run 300 meters in **seventy-one (71) seconds or less**.

**5. 1.5 Mile Run**

- a. The 1.5 mile run measures cardiovascular endurance over an extended period of time.
- b. Candidates must be able to run one and one half miles (1.5) in **sixteen minutes and twenty eight seconds (16:28)**.

## NOTICE TO CANDIDATES

The following documents must be submitted with your application. Copies are sufficient with the application; however, you will be asked to provide the original documents later in the process.

1. Birth certificate
2. Valid driver's license
3. Accredited high school diploma
4. High school transcripts
5. College, trade, or vocational diploma, if applicable
6. College, trade, or vocational transcripts, if applicable
7. DD form 214, if applicable
8. Copies of certification from Law Enforcement schools attended
9. Copy of driver's license
10. Copy of social security card
11. A 2"x2" color front view photo of yourself taken within the last 2 years

You are hereby advised that should you fail to meet/pass any of the following requirements, your application will not be processed further.

1. Police Department Written Examination
2. Physical Agility Test
3. Criminal History Check
4. Oral Interview
5. Background Check
6. Polygraph Examination

Should an applicant successfully meet the above requirements and be offered a position with the Argos Police Department, he/she must successfully pass the following tests for appointment to the department:

1. Psychological evaluation
2. Doctor's physical exam/vision requirements
3. Drug Test

Each applicant who fails to meet the minimum requirements will be informed in writing of such a result as soon as practical.

