Schererville Police Department Emergency Hire Police Applicant Confidential Questionnaire





Applicant's Full Name:	 	
Applicant's Address:	 	
Date:		

INSTRUCTIONS

- 1. Read this Questionnaire in its entirety prior to completing any portion of this packet.
- 2. Answers must be typed, or handwritten, legibly, in black ink.
- 3. Answer *all* questions completely and accurately. Incomplete packets will not be accepted or processed.
- 4. Answer each question thoroughly and honestly. Untruthful statements may be cause for removal from the hiring process.
- 5. The following documents **must be submitted** with the Confidential Questionnaire [if you have not already provided them].
 - a. DD-214 (Military Personnel Only)
 - b. Authorization for Release of Information Form
 - c. Sealed School Transcripts [High School/College]
 - d. Birth Certificate [certified copy]
- 6. Make a copy of this booklet. Provide one copy to this office within **5 business days** and keep the other copy for your records to bring to the interview.
- 7. If you have any contact of an investigative or prosecutable nature with any law enforcement agency during any phase of the selection process, immediately notify the recruiting investigator assigned to your background.
- 8. If you receive any adverse actions from your current employer you *must* contact your investigator immediately.

If you have any additional questions, contact Deputy Chief of Police Steven McNamara #168

smcnamara@schererville.org

Schererville Police Department 25 E. Joliet St Schererville, In 46375 (219) 322-5000 Est. 2349 (219) 865-5529 facsimile

Schererville Police Department Information Certification

l,, t	understand and acknowledge that all
information and all entries made by me in response to the	requested information contained within this
questionnaire are true, complete, and correct to the best of at any time during the course of the background investigation.	,
the Schererville Police Department, it is discovered that I he confidential questionnaire, and/or have given, or provided removal from the employment process.	nave made untruthful statements, falsified my
Signature	Date

PART I Personal Data

Name:				
Last	First		Middle	(Maiden)
Current				
Address:				
Street			Apt#	
City		State		Zip Code
Social Security Number:		/		
Date of Birth:				
Home Phone: []				
Work Phone: []				
Pager Number: []				
Cell Phone: []				
Email Address:			@	com

PART II Employment History

Current	
Employ	er:
	S:
Phone:	
[]	
Position	n/Title:
Dates o	of Employment: From:/
Reason	for leaving: (Exclude Medical Reasons)
Supervi	sor's name and title:
•	ou ever been fired from any position: Yes [] No [] blease explain fully.
	Current Co-Workers
List two	[2] co-workers with whom you presently work, and who are not listed elsewhere.
1.	Name:
	Address:
	Home Phone: []
	Work Phone: []
	Occupation:
2.	Name:
	Address:
	Home Phone []
	Home Phone: []
	Work Phone: []
	Occupation:

PART III Military Service

If these questions do not apply to you, put NA in the response lines.

Are you registered with the Selective Service System? Have you served in the Armed Forces of the U.S.? If yes, Branch of Service[s]:	Yes [] Yes []	No [] No []
Dates of Service:		
Type of Discharge (Exclude Medical Reasons]:		
Job Title and Rank at time of separation:		
Do you have any current Military Reserve Obligation:	Yes [] Active []	No [] Inactive []
Were you ever subjected to any disciplinary actions [Judicial or	r Non-Judicial]? Yes	[] No[]
If yes, explain:		
If you received anything less than an Honorable Discharge, ple	ase explain below.	
What special training did you receive in the Armed Forces?		

PART IV Education

If you attended college, list your area[s] of concentration:
What, if any, degrees have been conferred upon you, beyond the high school level:
If you attended college, but did not graduate, please provide a brief explanation.
Have you ever been suspended, expelled or placed on Academic Probation from any school or educational facility? Yes [] No [] If yes, explain:
Have you ever been interviewed, cited, detained, arrested, or had any other contact with any college police agency? Yes [] No [] If yes, explain:

PART V Driving Record

Has your automobile insurance ever been cancelled for non-medical reasons? If yes, explain:	Yes []	No []
Have you ever been denied automobile insurance for non-medical reasons? If yes, explain:	Yes []	No []
Has your license or privilege to operate a motor vehicle ever been revoked, ref	used, suspen	ded, or
cancelled for non-medical reasons? If yes, explain:	Yes []	No []
Has your vehicle registration ever been cancelled, refused, revoked or suspend reason?	ed for any no Yes []	on-medical No []
If yes, explain [Include dates, location, disposition, etc.]:		
List all traffic citations and/or warnings issued during the past five [5] years. List dispositions:	st dates, loca	tions, and

Have you ever been detained, arrested, or charged with Driving While I	ntoxicated [DWI] or [Oriving
Under The Influence [DUI]?	Yes []	No[]
If yes, explain [Include date, location, Arresting Agency, disposition, etc.	.]:	
Were you ever involved in an accident:	Yes []	No []
If yes, provide the following information:		
Date and location of accident:		
Was anyone injured?	Yes []	No. []
Was anyone injured? Was the accident reported to the police?	Yes []	No [] No []
Did you file a claim with an insurance company?	Yes []	No[]
What was the outcome [Court appearance, Court finding, etc.]?	. 55 []	

PART VI Arrest/Conviction Data

Have you ever been [including Cam	pus Police and Security Ag	encies]:		
Arrested	Yes []	No []		
Interviewed	Yes []	No []		
Interrogated	Yes []	No []		
Detained	Yes []	No []		
Indicted	Yes []	No[]		
Convicted `	Yes []	No []		
Received a Criminal Summons	Yes []	No[]		
Received a Civil Citation	Yes []	No []		
If checked, explain, in detail, includ	ing date, reason, agency, a	nd disposition:		
If yes, explain: Have you ever been convicted of a underage consumption]? Yes If yes, provide all details, dates, local	s [] No []		-	
Have you ever:				
Been a member of a street/motorc	vcle gang?	Yes []	No []	
Committed a crime for which you w		Yes []	No []	
Been involved in, or accused of, a d	•	Yes []	No []	
Been a victim or complainant in any	•	Yes []	No []	
Patronized the act of prostitution?	,	Yes []	No[]	
Participated in any in incidences in	volving hazing or rituals?	Yes []	No []	
Misused or threatened anyone via	•	Yes []	No []	
Been charged/convicted of domest	·	Yes[]	No []	

PART VII Current/Former Police Officers Only

What 	Law Enforcement Ager	ncy[ies] are y	ou curre	ntly, or w	ere previous	sly emplo	oyed by: 	
Date(s	s) of employment:	From:		/	To:			
	you been subject to an explain fully:	y internal inv	estigatio	ons or citiz	en complaiı	nts? 	Yes []	No []
Dispo	sition:							
medic	you ever been suspend al? explain fully:	ed from duty	y, with o	r without	your police	powers, t	for any reaso Yes []	on, except No []
	you ever been subject t explain fully:	to any depar	tmental	disciplinar	y actions?		Yes []	No []
Yes [If so, l	you been involved in ar No [] now many? was the disposition of		idents w	hile opera	ting departi	mental o	r governmer	nt vehicles?
How h [] [] [] []	nave you been rated on Excellent Above Satisfactory Satisfactory Below Satisfactory Unsatisfactory	your evalua	tions? [F	Please che	ck all that a	oply]		

Have vou eve	r heen auestion	ned/interviewed/inte	errogated by your de	epartment's Internal Affairs L	Init?
Yes[]	No []	ied/interviewed/inte	errogated by your de	spartinent 3 internal Arians C	Jilit:
If yes, explain					
yes, explain	· · · · · · · · · · · · · · · · · · ·				
Have you eve	r discharged yo	ur service weapon, e	either on-duty or off	-duty, other than for training	3
		nimal destruction?	Yes []	No []	
If yes, explain	fully:				
-	_	or investigated for t	he use of excessive	force or police brutality?	
Yes []	No []	or investigated for t	he use of excessive	force or police brutality?	
Yes [] If yes, explain	No [] fully:				
Yes [] If yes, explain	No [] fully:			force or police brutality?	oous
Yes [] If yes, explain Have you bee abuse?	No [] fully:	oy your current/past No []			oous
Yes [] If yes, explain Have you bee abuse?	No [] fully: en investigated by Yes []	oy your current/past No []			oous.
Yes [] If yes, explain Have you bee abuse?	No [] fully: en investigated by Yes []	oy your current/past No []			oous
Yes [] If yes, explain Have you bee abuse?	No [] fully: en investigated by Yes []	oy your current/past No []			oous
Yes [] If yes, explain Have you bee abuse? If yes, explain	No [] fully: In investigated by Yes [] In full, all circu	oy your current/past No [] Imstances:	agency for an allego	ation of domestic violence/sp	
Yes [] If yes, explain Have you bee abuse? If yes, explain	No [] fully: In investigated by Yes [] In full, all circuits and the second control of the second control o	oy your current/past No [] Imstances:	agency for an allego		
Yes [] If yes, explain Have you bee abuse? If yes, explain Are you resign Yes []	No [] Ifully: In investigated by Yes [] In full, all circuits In full, all circuits In full or have you no []	oy your current/past No [] Imstances: u been asked by curr	agency for an allego	ation of domestic violence/sp	
Yes [] If yes, explain Have you bee abuse? If yes, explain Are you resign Yes []	No [] fully: In investigated by Yes [] In full, all circuits and the second control of the second control o	oy your current/past No [] Imstances: u been asked by curr	agency for an allego	ation of domestic violence/sp	

PART VIII

Drug Experimentation/History

Have you ever smoke/experimented/tasted/ingested/used/injected/sniffed or been exposed to any of the following:

Check each as applicable:

Substance	YES	NO	# Of Times	Date
Marijuana/Hashish				
Cocaine [Powder, Crack]				
Heroin				
Morphine				
Codeine [non-prescribed]				
Amphetamines [Speed]				
Barbiturates [Downers]				
Inhalants [Solvents,				
Aerosols]				
Anabolic Steroids				
LSD				
PCP				
Mushrooms				
Ecstasy				
Special K				
Quaaludes				
Valium [non-prescribed]				

Any other drug/narcotic specifically listed above?
Have you ever purchased any of the above listed substances?
Have you ever used a prescribed medication not issued to you?
Have you ever sold or abused any type of drugs or illegal substances?
Have you ever used prescription drugs or alcohol excessively?





SCHERERVILLE POLICE DEPARTMENT [219]322-5000

<u>Personal Inquiry Waiver</u> Authority for Release of Information

	oncerned Person or Authorized Re	epresentative of any Orga	anization, Instituti	on or Repository of
Re	ecords			
Re:	APPLICANT NAME:			
	DATE OF BIRTH:			
	SOCIAL SECURITY NUMBER:			
inform record detern Depar	ectfully request and authorize you nation that you may have concern I and financial and credit status. I mining my qualifications and fitne tment. A copy of this form may s	ning my criminal history, or This information is to be less for the position I am s substitute for the original	work record, scho used to assist the eeking with the So	ol record, military department in chererville Police
	by release you, your organization ning the information above.	or others from ay liabilit	y or damage that	may result from
Applic	ant's Signature		Date	
Street	Address	City	State	Zip Code
		<u>AFFIDAVIT</u>		
STATE	OF:			
	TY OF			
	e me personally appeared the said			
he/she executed the above instrument of his/her own free will and accord, with full knowledge of the				
purpo	se therefore.			
Sworn	to and prescribed to in my prese	ence thisda	ay of	20
Му со	mmission expires:			
			Notary Public	

THIS WAIVER MUST BE RETURNED WITH APPLICATION

Schererville Police Department

Applicant Interview

Pre-Conditional Offer of Employment for Police Officer

Why do you want to become a police officer?			
Are you at least twenty-one [21] years of age?	Yes []	No []	
Are you a US Citizen?	Yes []	No []	
Do you have a High School Diploma or GED?	Yes []	No []	
Do you have a valid driver's license?	Yes []	No []	
Do you have relatives employed by this agency?	Yes []	No[]	
Are you applying to other Law Enforcement agencies? If so, indicate <i>All</i> agencies and your current status on their e	Yes []	No []	
Have you ever been denied employment by a criminal justice Do you speak any foreign languages? If yes, to what proficiency?	ce agency?	Yes [] Yes []	No[]
Have you ever been arrested or detained? If yes, give specifics, with dates:		Yes []	No []
Are you presently using illegal drugs?		Yes []	No []
How often do you consume alcohol? [] Daily [] Weekly [] Weekends Only []	Social Drinker	[] Non Dri	nker
	•		
Do you have any outstanding Civil Judgments against you? If yes, state convictions:		Yes []	No[]

Are you an honest person?	Yes []	No []
Are you reliable?	Yes []	No []
Are you able to manage your personal finances?	Yes []	No []
Are you good at communicating with a diverse group of people?	Yes []	No []
Are you able to control your anger when insulted or threatened?	Yes []	No []
Are you able to function normally when placed under temporary or prolonged stress?	Yes []	No []
Are you willing and able to work rotating shifts?	Yes []	No []
Are you willing and able to meet department grooming standards?	Yes []	No []
Are you willing and able to wear a uniform?	Yes []	No []
Are you willing and able to render emergency aid to trauma victims?	Yes []	No []
Are you willing and able to view an autopsy?	Yes []	No []
Are you willing and able to use deadly force, if necessary, to protect your life or that of Yes $[\]$ No $[\]$	another?	
Review the Basic Essential Job Functions of a police officer. These functions are include Confidential Questionnaire. Are you willing and able to perform the Essential Job Functions		Law
Enforcement Officer?	Yes[]	No[]
With proper training and supervision, do you believe that you can perform All of the Es	sential Job)
Functions of a Law Enforcement Officer, unassisted, and without delay?	Yes []	No []

Town of Schererville Schererville Police Department

Basic Essential Job Functions

Personnel in this classification of the Schererville Police Department, perform duties related to the protection of lives and property in the Town of Schererville to include, but not limited to, responding to calls for service, apprehending violators, directing vehicular and pedestrian traffic, enforcing traffic laws and investigating complaints of illegal or unlawful activity.

Basic Essential Functions For Police Officer Reserves

Patrol assigned area on foot or drive a vehicle searching for suspicious activity or situations, or checking for persons in need of service.

Monitor Radio and other communication devices to receive assigned runs and to maintain awareness of activities in assigned areas or by other officers.

Assist citizens with problems such as lost children, injured persons, animal bites, civil disputes, locked doors, vehicle inspection and verifications, or abandoned vehicles.

Refer persons to appropriate social service agencies when situation warrants.

Respond to assigned run by driving, walking, or running to specified location, assess situation, determine need for other assistance, and take appropriate action.

Move people away from danger, including carrying unconscious people and providing emergency aid to injured people.

Investigate accidents, extract victims, provide emergency aid, gather evidence, record observations and statements of witnesses and victims, request assistance from other officers or agencies as needed, direct the removal of the vehicles involved, and ensure an area is clear.

Search crime scenes, take prescribed actions to preserve and protect evidence, and record findings and observations.

Interview victims, suspects, and witnesses, and record their responses and observations.

Pursue, apprehend, search, and arrest suspects using only necessary force, advise suspects of rights, and transport suspect to detention area.

Restrain people from physically striking or injuring others using appropriate weapons.

Drive a vehicle at high speed when situation warrants due to nature of emergency.

Stop drivers of vehicles when traffic violations are observed, verify license and registration data, advice driver or safe driving practices, and issue citations or make arrests as warranted.

Direct vehicular and pedestrian traffic when traffic congestion occur or as directed.

Report as directed to scenes of general emergencies and take appropriate action to protect life and property, such as directing traffic, quarantining and area, assisting individuals in leaving an area, preventing looting and requesting appropriate assistance.

Maintain visibility in the community by meeting and talking with citizens, provide information, visit local businesses, and make presentations to school, neighborhood and civic organizations.

Write reports and complete forms as required by operating procedures, and make oral reports to appropriate personnel.

Testify in court, prepare for such testimony by reviewing reports and notes, meet with attorneys and obtain appropriate evidence.

Participate in training of law enforcement procedures, including firearms, criminal justice, and court procedures, emergency medical aid and related subjects.

Maintain uniforms, equipment and weapons.

Maintain personal physical fitness.

Perform related duties as assigned.

Conduct routine preventive maintenance of police vehicles (check oil, lights, tires, etc.)

Use the telephone, portable radio, computer and other communications systems.

Environmental Factors For Police Officer

The essential functions of police officers are performed in and affected by the following environmental factors. A Police Officer must:

Operate both as a member of a team and independently at incidents of uncertain duration.

Face exposure to infection to infectious agents such as Hepatitis B and HIV.

Perform complex tasks during life threatening emergencies.

Work for long periods of time, requiring sustained physical activity and intense concentration.

Face life or death decisions during emergency conditions.

Tolerate exposure to grotesque sights and smells associated with major trauma.

Make rapid transitions from rest to near maximal exertion without warm-up periods.

Use firearms, self-defense equipment and body armor.

Be able to physically protect him/herself.

Be able to communicate with people effectively.

Schererville Police Department Credit References

Credit Check Equif	ax, Trans Union, and Experian.				
All Credit card accounts should depict current balance					
Banks:					
Savings Account[s]					
1	Average Monthly Balance:				
2	Average Monthly Balance:				
Checking Account[s]					
	Average Monthly Balance:				
	Average Monthly Balance:				
Outstanding Loans [Mortgage	e, vehicle, school, personal, etc.]:				
1	Average Monthly Balance:				
	Average Monthly Balance:				
3	Average Monthly Balance:				
4	Average Monthly Balance:				
5	Average Monthly Balance:				
6	Average Monthly Balance:				
7	Average Monthly Balance:				
Advance Astivity Vac [l Nafil				
Adverse Activity Yes [
[Overdrafts, checks issued on	closed accounts, late payments, fraudulent activity, etc.]				
Bank Representative:					
Bankruptcy Information					
Obtain through Intersect inqu	uiry and federal courts.				
	,				



Schererville Police Department 25 E. Joliet St. Schererville, IN. 46375 219-322-5000

General Background

Current/Previous Addresses:

Street Address	City or Town	State	Zip	How Long? From/To

Citizenship:

Are you a United States Citizen? [] Yes [] No

References:

Provide four (4) references, non-relatives, which you have known for at least five (5) years. These references must be at least twenty-one (21) years of age and of reputable standing.

Name	Address	Phone	Years Known