

P.O. BOX 569 • CORDELE, GA 31010



PHONE 229-273-3102 • FAX 229-273-6773

REFERENCE: **APPLICATION FOR POLICE OFFICER / POLICE DEPARTMENT**

DEAR SIR/MADAM:

PLEASE COMPLETE APPLICATION IN ITS ENTIRETY. SIGN ALL PAGES WHERE INDICATED.

YOU MUST ALSO RETURN THE JOB DESCRIPTION, SIGNING PAGES 2 AND 4 OF THE JOB DESCRIPTION.

SHOULD THERE BE A **NOTICE** ATTACHED REQUESTING CERTAIN ITEM(S), PLEASE BE SURE THESE ITEM(S) ARE WITH THE APPLICATION WHEN RETURNED. IF NOT, THE APPLICATION MAY NOT BE ABLE TO BE PROCESSED.

RETURN TO: CITY OF CORDELE, ATTN: HUMAN RESOURCES, P. O. BOX 569, CORDELE, GA. 31010

OR

DROP IT OFF AT CITY HALL ON THE 2ND FLOOR IN ROOM 211.

YOU WILL NOT BE ABLE TO EMAIL THE FORMS BACK DUE TO US NEEDING YOUR SIGNATURE ON THE FORMS.

SHOULD YOU HAVE ANY QUESTION YOU MAY CONTACT PERSONNEL AT 229-276-2903.

RESPECTFULLY,

JS NEUMANS

JOYCE S NEUMANS
Administrative Assistant/H/R

JSN/jn



CITY COMMISSION: ZACK H. WADE, Chairman; A.J. RIVERS, Vice Chairman; JIMMY BLACK, CURTIS LUCAS, Jr., JEANIE BARTEE, EDWIN T. COTTON, City Attorney; JEFFERY W. JOHNSON, City Manager



CRIMINAL HISTORY / LICENSE CHECK / DRIVERS LICENSE CHECK

RELEASE FOR THE CITY OF CORDELE

- FDC PULL A LICENSE CHECK FOR HUMAN RESOURCES
- CHECK IF NO INCIDENT REPORTS FOUND
FDC INITIAL CHECKED FOR INCIDENT REPORT _____
(FOR ALL POSITIONS)

POSITON... POLICE OFFICER

I HEREBY AUTHORIZE THE CITY OF CORDELE TO RECEIVE ANY CRIMINAL HISTORY / DRIVERS' HISTORY RECORD AND THEIR FLEET INSURANCE CARRIER TO RECEIVE ANY DRIVER'S HISTORY RECORD INFORMATION PERTAINING TO ME WHICH MAY BE IN THE FILES OF ANY STATE OR LOCAL CRIME JUSTICE AGENCY IN GEORGIA OR ELSEWHERE. I ALSO AUTHORIZE THE CITY OF CORDELE TO CHECK MY RECORD TO VALIDATE THAT I HAVE A VALID, DRIVERS LICENSE. I ALSO UNDERSTAND THAT MY DRIVERS' HISTORY// LICENSE MY BE CHECKED RANDOMLY BY THE CITY OF CORDELE.

PRINT FULL GIVEN NAME _____

PRINT NAME AS INDICATED ON YOUR DRIVERS' LICENSE _____

PRINT YOUR PHYSICAL ADDRESS _____

PRINT YOUR MAILING ADDRESS OR INDICATE SAME _____

PRINT CITY / STATE / ZIP _____

PRINT COUNTY OF RESIDENCE _____

PRINT LICENSE # CLASS EXPIRATION DATE

SOCIAL SECURITY# _____

* INFORMATION NEEDED AND USED FOR IDENTIFICATION PURPOSES ONLY:

*SEX *RACE *DATE OF BIRTH

✓
SIGNATURE _____

✓
DATE _____

HISTORY REQUESTED BY _____

DATE _____



CREDIT AUTHORIZATION
RELEASE FOR THE
CITY OF CORDELE
(POLICE OFFICER)

PRINT THE FOLLOWING INFORMATION:

NAME _____

PHYSICAL ADDRESS _____

MAILING ADDRESS _____

CITY/STATE/ZIP _____

POSITION... _____ *POLICE PERSON* _____

I UNDERSTAND THAT IN ORDER TO PROCESS MY APPLICATION FOR EMPLOYMENT WITH THE CITY OF CORDELE THAT MY **CREDIT HISTORY** WILL BE OBTAINED BY A CONSUMER REPORTING AGENCY. I UNDERSTAND THAT THE CITY OF CORDELE INTENDS TO OBTAIN SUCH A REPORT AND THAT I HAVE A RIGHT TO REQUEST THAT THE CONSUMER REPORTING AGENCY DISCLOSE TO ME, ITS RESULTS.

IN AUTHORIZING THIS **CREDIT CHECK**, I HEREBY RELEASE ANY AGENCIES FROM **ALL LIABILITY** FOR ANY DAMAGES WHATSOEVER FOR ISSUING THIS INFORMATION.

A PHOTOGRAPHIC COPY OF THIS AUTHORIZATION SHALL BE AS VALID AS THE ORIGINAL.

I HEREBY REQUEST YOUR COOPERATION WITH THE CITY OF CORDELE OR THEIR ACTING AGENT IN OBTAINING ANY INFORMATION AS STATED ABOVE. IT IS UNDERSTOOD THAT THE INFORMATION PROVIDED WILL BE HELD IN STRICT CONFIDENCE BY THE CITY OF CORDELE.

✓
SIGNATURE

✓
DATE



REFERENCE / BACKGROUND AUTHORIZATION
RELEASE FOR THE
CITY OF CORDELE
(POLICE OFFICER)

PRINT THE FOLLOWING INFORMATION:

NAME _____

PHYSICAL ADDRESS _____

MAILING ADDRESS _____

CITY/STATE/ZIP _____

I UNDERSTAND THAT IN ORDER TO PROCESS MY APPLICATION FOR EMPLOYMENT WITH THE CITY OF CORDELE, MY PREVIOUS WORK, PERSONAL REFERENCES, AND EDUCATION MUST BE VERIFIED AND THAT A THOROUGH BACKGROUND CHECK WILL BE PERFORMED. I UNDERSTAND THAT THE BACKGROUND INVESTIGATION MAY DISCLOSE INFORMATION AS TO MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, AND MODE OF LIVING.

I AUTHORIZE A BACKGROUND CHECK. I HEREBY AUTHORIZE ANY COMPANY, SCHOOL OR AGENCIES WHERE I HAVE BEEN EMPLOYED OR ATTENDED, AS WELL AS NEIGHBORS, ACQUAINTANCES, AND CO-WORKERS TO GIVE ANY INFORMATION THEY MAY HAVE REGARDING MY EMPLOYMENT, EDUCATION OR CHARACTER. I HEREBY RELEASE SAID COMPANIES, SCHOOLS OR AGENCIES AND PERSONAL ACQUAINTANCES FROM ALL LIABILITY FOR ANY DAMAGES WHATSOEVER FOR ISSUING THIS INFORMATION.

A PHOTOGRAPHIC COPY OF THIS AUTHORIZATION SHALL BE AS VALID AS THE ORIGINAL.

I HEREBY REQUEST YOUR COOPERATION WITH THE CITY OF CORDELE OR THEIR ACTING AGENT IN OBTAINING ANY INFORMATION AS STATED ABOVE. IT IS UNDERSTOOD THAT THE INFORMATION PROVIDED WILL BE HELD IN STRICT CONFIDENCE BY THE CITY OF CORDELE.

SIGNATURE

DATE



DRUG / INTOXOLIZER ANALYSIS CONSENT PRE-EMPLOYMENT FORM

SAFETY SENSITIVE POSITIONS ONLY
(FOR DRIVERS OF ANY CITY VEHICLE, INCLUDING GAS, FIRE & POLICE, SCHOOL CROSSING GUARDS)
RELEASE FOR THE
CITY OF CORDELE

DRIVER GAS... PUBLIC SAFETY CDL

POLICE OFFICER

POSITION>>>>>>

NAME

PHYSICAL ADDRESS

MAILING ADDRESS

CITY/STATE/ZIP

I, _____

PRINT FULL GIVEN NAME

AS AN APPLICANT FOR EMPLOYMENT WITH THE CITY OF CORDELE, I DO HEREBY CONSENT TO SUBMIT TO URINE SPECIMENS FOR ***PRE-EMPLOYMENT*** DRUG SCREEN OR INTOXIMETER TESTING FOR ALCOHOL IN ACCORDANCE WITH THE CITY OF CORDELE'S ANTI-DRUG PROGRAM.

I REALIZE THAT, AS AN APPLICANT, ANY POSITIVE RESULT NOT CAUSED BY THE PRESENCE OF LEGITIMATELY PRESCRIBED OR OVER-THE-COUNTER DRUGS WILL CAUSE MY BEING REFUSED EMPLOYMENT, OR DISMISSAL IF RESULTS OF THE TEST ARE RECEIVED AFTER MY INITIAL EMPLOYMENT DATE.

I FURTHER GIVE MY PERMISSION TO **CRISP REGIONAL HOSPITAL &/OR DOCTORS' LAB** MEDICAL REVIEW OFFICER TO RELEASE THE RESULTS OF THIS TEST TO THE CITY OF CORDELE'S AUTHORIZED PERSONNEL, DIRECTOR OF HUMAN RESOURCES OR HUMAN RESOURCES ADMINISTRATIVE ASSISTANT. I ALSO AGREE THAT IN RETURN FOR CONSIDERATION OF MY APPLICATION FOR EMPLOYMENT, I HEREBY RELEASE THE CITY OF CORDELE AND ANY OF IT'S AGENTS, IT'S AUTHORIZED PERSONNEL, MEDICAL LABORATORY / MEDICAL REVIEW OFFICER FROM ANY LIABILITY IN CONNECTION WITH THIS PRE-EMPLOYMENT ANALYSIS.

SIGNATURE

DATE



NOTICE

FIRE & POLICE PERSONNEL ONLY

IF YOU ARE FILING OUT AN APPLICATION FOR EITHER FIRE OR A POLICE OFFICER POSITION YOU MUST HAVE THE MANDATORY INFORMATION WITH YOUR APPLICATION FOR PERSONNEL TO BE ABLE TO PROCESS IT. FOLLOWING DIRECTIONS ARE AN IMPORTANT PART OF THE HIRING PROCESS.

THANK YOU

- RESUME'
- COPY OF YOUR SIGNED SOCIAL SECURITY CARD
- COPY OF YOUR HIGH SCHOOL DIPLOMA OR GED
 - COPY OF YOUR DD214 (IF APPLICABLE)
- COPY OF YOUR POST CERTIFICATION (IF APPLICABLE)
- COPIES OF ANY TRAINING CERTIFICATES (THESE ITEMS ARE NOT MANDATORY AS THE OTHER ITEMS BUT MAY BE HELPFUL INFORMATION IN THE DEPARTMENT MAKING A DECISION WITH YOUR APPLICATION)
- *LEAVE ALL SHEETS INTACT, DO NOT REMOVE SHEETS FOR KEEPING, BE SURE TO SIGN ALL FORMS WHERE INDICATED INCLUDING PG 2 & 4 OF THE JOB DESCRIPTION.*
- *ALL FORMS INCLUDING THE JOB DESCRIPTION MUST BE RETURNED TO HUMAN RESOURCES*

NOTICE FIRE & POLICE PER ONLY 05

REVIEWED:	02/24/2011								
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POLICE DEPARTMENT
Field Service
PATROL PERSON

JOB DEFINITION

A skilled police position responsible for preventing and suppressing crime, protecting life and property; enforcing Municipal and State laws pertaining to the prevention, deterrence and control of crime. Under the direct supervision of the assigned on-duty police Sergeant or Captain of the Field Services Division.

PRINCIPLE DUTIES

Performs manual tasks that require physical stamina and the use of hand tools, police equipment and apparatus, firearms and other weapons, and their application. Some examples of these duties are:

- ! Operates police vehicles and radios.
- ! Employs hand tools, chemicals, firearms and other weapons.
- ! Protects people, places, and things.
- ! Testifies and provides evidence in court cases.
- ! Administers first aid, rescue aid and related devices.
- ! Investigates citizen complaints, crimes, and accidents.
- ! Conducts routine search and seizure procedures.
- ! Enforces Municipal and State traffic and criminal laws.
- ! Trains and drills in police methods, technology, systems, first aid, and Municipal and State laws and codes.
- ! Attends classes, seminars, or training occasionally requiring overnight travel.
- ! Inspects security of buildings, structures, premises, and vehicles.
- ! Prepares extensive, grammatically correct written and oral reports, both accident and investigative.
- ! Secures crime scenes.
- ! Collects, tags and secures evidence.
- ! Fingerprints persons.
- ! Obtains arrest and search warrants.
- ! Conducts effective investigations and interrogations to obtain necessary information.
- ! Analyzes immediate situations, adopting quick, effective and reasonable courses of action.
- ! Prevents crime through aggressive patrol.
- ! Directs traffic.
- ! Maintains Police equipment, apparatus, physical facilities.
- ! Other duties as may be assigned from time to time.

JOB QUALIFICATIONS

- ! Must be at least 18 years of age.
- ! Minimum education of high school diploma or equivalent with the scholastic and physical ability to successfully complete the Georgia state-mandated basic police officer training (P.O.S.T.).
- ! Skilled in both written and oral communications, including general math, grammar and spelling, with the ability to express ideas clearly and concisely.
- ! Complete City employment application.
- ! Pass background check including police security and job-related credit checks, personal and previous employment references, criminal history, and MVR.
- ! Pass psychological assessment, basic skills examination, physical performance standard, pre-employment and random drug and alcohol screen, and job related physical examination (see attached sheet for requirements).
- ! Must be able to obtain and maintain minimum firearm qualification score.
- ! Must be able to work rotating 12 hour shifts including on-call status, nights, weekends and holidays.
- ! Possess and maintain a valid applicable Georgia Drivers License with a clean driving record.
- ! Must maintain a telephone at residence
- ! Must pass pre-employment drug screen

DESIRED JOB CHARACTERISTICS

- ! Dependable, punctual with excellent attendance background.
- ! Neat, clean professional appearance.
- ! Must be able to perform arduous tasks frequently under strenuous and adverse conditions often involving personal danger.
- ! Must establish and maintain effective working relationship with other employees, supervisors and the general public.
- ! Knowledge of or the ability to easily learn the City street system, physical layout and adjacent areas.

Signature

Date

JD3PAT.WPD
Revised 3/93, 8/29/95, 6/27/00, 01/22/01, 1/2/02

JOB TITLE: PATROL PERSON
EEO CLASS#: 4 (Aptrak)

EEO CLASS: 04 (Abra)
EEO CLASS: PROTECTIVE SERVICE
EEO4: POLICE PROTECTION

Grade 12P

PHYSICAL DEMANDS & EXPOSURES

for

POLICE DEPARTMENT / Field Services / PATROL PERSON

Total number of hours spent, or could be spent on the job in the following activities:

Situation	At ONE Time	ENTIRE Work Day
SITTING:	2 to 4 Hours	5 to 6 Hours
STANDING:	2 to 4 Hours	4 to 5 Hours
WALKING:	1 Hr or Less	1 Hr or Less
RUNNING:	1 Hr or Less	2 Hrs or Less

Repetitive Use of Hands:

{Operation of Office machines, driving}

Situation	Simple Grasping	Pushing / Pulling	Fine Manipulation
RIGHT:	Yes	Yes	Yes
LEFT:	Yes	Yes	Yes

Repetitive Use of Feet:

Situation	Results
RIGHT:	Yes
LEFT:	Yes
BOTH:	Yes (standing, walking, running, self-defense, driving)

Frequency of the following activities on the job:

LIFTING:	Occasionally	Frequently	Continuously
up to 15 lbs.:		X	
16 to 30 lbs.:	X		
31 to 50 lbs.:	X		
50 plus lbs.:	X		

CARRY:	Occasionally	Frequently	Continuously
up to 15 lbs.:			X (equipment, duty belt)
16 to 30 lbs.:		X	
31 to 50 lbs.:	X		
50 plus lbs.:	X		

REACH:	Occasionally	Frequently	Continuously
Above Shoulder:	X		
Chest Level:		X	

PSYCHOLOGICAL DEMANDS:	Occasionally	Frequently	Continuously
Mental Stress:		X	
Working w / others			X

PHYSICAL DEMANDS & EXPOSURES
for
POLICE DEPARTMENT / Field Services / PATROL PERSON

<i>Situation:</i>	<i>Occasionally</i>	<i>Frequently</i>	<i>Continuously</i>
Bend:		X	
Squat / Crouch:		X	
Climb:	X (fences, rails, walls, etc.)		
Twist / Turn		X	
JUMPING	X (from elevated surfaces to 4 ft plus		

Exposure to the following:

<i>Situation:</i>	<i>Occasionally</i>	<i>Frequently</i>	<i>Continuously</i>
Vibration:		X (auto)	
Heights:	X (unprotected , climbing ladder, fences, etc.)		
Moving Machinery:		X	
Inclement Weather:		X	
Extreme Heat:	X		
Dust / Fumes / Grasses:	X		
Pollen / Plant Matter:	X		
Grasses:	X		
Chemicals:		X (O. C. spray)	

(Telephone, Computer, Driving)

<i>AUDIO / VISUAL NEEDS:</i>	<i>Occasionally</i>	<i>Frequently</i>	<i>Continuously</i>
Hearing:			X
Near Vision:			X
Far Vision:			X
Peripheral Vision:			X
Color Discrimination:			X
Depth Perception:			X (communication, driving, self-defense, radio operation, shooting)

<i>OTHER:</i>	<i>Consequences</i>
	Exposure to hum or electronic machines, video screens, and other office machine & equipment. Occasional exposure to high voltage equipment. Physical, sometimes dangerous, contact with the public involving foot and high-speed pursuit. Exposure to infectious diseases, blood born pathogens and other bodily fluids

Please sign and date below, acknowledging that you have read and understand the attached JOB DESCRIPTION and PHYSICAL DEMANDS AND EXPOSURES forms, and that you correctly answered the last question on page two (2) of the EMPLOYMENT APPLICATION form as related to this information.

Signature

Date

Application For Employment



The City of Cordele considers applicants for all positions without regard to race, color, religion, national origin, age, disability, veterans status, or any other legally protected status.

Aptrak Posted # _____

(PLEASE PRINT IN BLACK INK)

Position(s) Applied For POLICE DEPT / POLICE OFFICER	Date of Application
How Did You Learn About Us?	
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative
	<input type="checkbox"/> Walk-In
	<input type="checkbox"/> Other _____

Last Name		First Name		Middle Name	
Address	Number	Street	City	State	Zip Code
Telephone Number(s)				Social Security Number	

If you are under 18 years of age, can you provide required proof of your eligibility to work?

Yes No

Have you ever filed an application with The City of Cordele?

Yes No

If yes, for which position(s)? _____ Dates _____

Have you ever been employed by The City of Cordele?

Yes No

If yes, in which position(s)? _____ Dates _____

Are you currently employed?

Yes No

May we contact your present employer?

Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

Yes No

Proof of citizenship or immigration status will be required upon employment

On what date would you be available for work? _____

Are you available to work: Full Time Part Time Shift Work Temporary

Are you currently on "lay-off" status and subject to recall?

Yes No

Have you been convicted of a felony within the last 7 years?

Yes No

Convictions will not necessarily disqualify an applicant from employment

If Yes, please explain _____

Education

School Name & Address	Elementary School					High School				Undergraduate College / University				Graduate / Professional			
Circle Years Completed	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
List Diploma/Degree Received																	
List Courses of Study																	
Specialized training, apprenticeship, skills and extra-curricular activities.																	
Honors You Have Received.																	
State any additional information you feel may be helpful to us in considering your application.																	

List professional, trade, business or civic activities and offices held.
You may exclude memberships which would reveal sex, race, religion, national origin, age, disability or other protected status:

References

Give name, address and telephone number of three references who are not related to you and are not previous employers.

1. _____

2. _____

3. _____

Have you ever had any job-related training in the United States military? Yes No

If Yes, please describe _____

Please read the attached job description thoroughly and state whether or not you are able to perform the duties of this position, with or without accommodation:

Yes No

Employment Experience

Must have complete mailing addresses w/zip codes & area codes for telephone #'s. Without information needed only delays process of application consideration.

Start with your present or last job. Include any job-related military service assignments and volunteer activities.

EVEN THOUGH YOU HAVE A RESUME, THIS AREA STILL

MUST BE COMPLETED STARTING WITH YOUR MOST

CURRENT POSITION DOWN

1.	Employer	Date Employed		Job Title And Duties
		From	To	
	Address			
	Telephone Number(s)	Supervisor	Hourly Rate / Salary	
			Starting	
	Reason for Leaving			
2.	Employer	Date Employed		Job Title And Duties
		From	To	
	Address			
	Telephone Number(s)	Supervisor	Hourly Rate / Salary	
			Starting	
	Reason for Leaving			
3.	Employer	Date Employed		Job Title And Duties
		From	To	
	Address			
	Telephone Number(s)	Supervisor	Hourly Rate / Salary	
			Starting	
	Reason for Leaving			
4.	Employer	Date Employed		Job Title And Duties
		From	To	
	Address			
	Telephone Number(s)	Supervisor	Hourly Rate / Salary	
			Starting	
	Reason for Leaving			
5.	Employer	Date Employed		Job Title And Duties
		From	To	
	Address			
	Telephone Number(s)	Supervisor	Hourly Rate / Salary	
			Starting	
	Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Applicant's Statement

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I also understand that the City of Cordele will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being considered at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this municipality is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this municipality.

I understand that all appointments are for an orientation period of at least 12 (twelve) months, during which time I must demonstrate my fitness for continued employment. I am further aware that willfully withholding information or making false statements on this application will be a basis for denial of a position prior to employment, and should such willful withholding or false statement become evident after appointment, such evidence will constitute sufficient grounds for dismissal from service with the City of Cordele. I fully understand and agree to these conditions. I hereby certify that all statements made by me on this application, related documents, and in interviews are true and complete to the best of my knowledge.

Signature of Applicant

Date

**WE ARE AN EQUAL
OPPORTUNITY EMPLOYER**