#### **APPENDIX A**

# Blossburg Borough Police Department



#### JOB DESCRIPTION

JOB TITLE: PATROL OFFICER

DATE PREPARED/REVISED: SEPTEMBER 25, 2015

#### **POSITION SUMMARY:**

Work requires an individual who can follow general supervisory direction and use self-initiative to complete tasks identified by supervisory personnel as priorities. The patrol officer must keep the public's trust and confidence with a professional demeanor both on and off the job by paying consistent attention to the agency's goals and objectives. This position requires a high level of problem solving ability and confidence in decision making and requires an individual who can work independently in a sometimes dangerous environment. Physical stamina is required as the officer may be required to be in situations outside for long periods in all types of weather. Successful performers are those who are capable and willing to make decisions that are consistently in line with the agency's missions, goals and objectives.

#### **ESSENTIAL FUNCTIONS OF THE JOB:**

Takes calls for service and investigates complaints, traffic accidents or criminal complaints. Cites and/or arrests law violators.

Provides traffic control in all types of weather as directed.

Patrols in vehicle, on foot, or via bicycle to deter and detect crime in all types of weather conditions.

Protects persons and property. Secures and protects prisoners. Prepares for and testifies in court.

Has the ability to move 100 pounds to a height of 4 feet and carry 100 pounds. Has the ability to sit or stand for extended periods of time.

Has flexibility sufficient to enter and exit vehicles frequently, ambulate for long periods of over all types of terrain, climb over and around obstacles and suddenly move out of the way of dangers.

Has the ability to wear respiratory protection equipment.

Pursues subjects by vehicle, bicycle or on foot and uses necessary force to subdue individuals who are a threat.

Has the ability to be a credible witness in Court.

Efficiently operates computer equipment and software programs used by the Police Department.

Has the capability of certifying annually with less lethal weapons. Maintains Act 120 Certification.
OTHER FUNCTIONS:
Works with other public service departments such as fire and ambulance at scene of incidents. Follows up on pending reports and cases.
Other related duties as assigned.
QUALIFICATIONS:
U.S. citizen.
High School diploma or equivalent
Possession of a valid Pennsylvania Motor Vehicle Operator's License.
Current Act 120 training and must have passed the state exam. Ability to communicate effectively and professionally in English both verbally and in writing.
At least 18 years of age.
20/20 corrected eyesight with no color blindness or night-blindness.
Corrected hearing so the loss is no greater than 40 decibels in the better ear on the average at 500 Hz, 1,000 Hz and 2,000 Hz.
Has sufficient bi-lateral manual dexterity to enable safe operation of all equipment used in the job.
Offer of employment is contingent upon successful completion of all Civil Service and/or MPOETC requirements.
I have read the foregoing job description and certify that I can perform all aspects of the job and meet
qualifications as required by the Borough of Blossburg.
Signature Date

# **Blossburg Borough Police Department**



## POLICE OFFICER APPLICATION PACKAGE

#### **APPLICATION INCLUDES:**

**QUESTIONNAIRE** 

APPENDIX A: Notification Procedure Release

APPENDIX B: Waiver and Release for Background Investigation

APPENDIX C: Patrol Officer Job Description

GENERAL INSTRUCTIONS: This application consists of several sections: a questionnaire; a Notification Procedure Release; a Waiver and Release for Background Investigation; and a Patrol Officer Job Description. Each one of these sections must be completed in order for the Borough of Blossburg to accept the application as complete. Print (do not type) an answer to each question. If a particular question does not apply to you, so state with N/A. If space available is insufficient, use reverse side and proceed with the number of the referenced block. DO NOT MISSTATE OR OMIT MATERIAL FACT SINCE THE STATEMENTS MADE HEREIN ARE SUBJECT TO VERIFICATION TO DETERMINE YOUR QUALIFICATIONS FOR EMPLOYMENT.

#### **QUESTIONNAIRE**

Last Name	First Name	Middle Name	Social Security Number
Alias (es), Nickna	ıme(s) Maiden Name, (	Other Changes in Name	Telephone Number
Present Residence	ce Address	Street/C	City/State/Zip Code
Mailing Address	if different from above	::	
U.S. Citizen: Nat	ive? Yes	No	
If answered no:	Naturalization No	Date	Place Court
RESIDENCE: Li	st all for the past ten y	ears beginning with curre	nt
From	То		With whom did you live?
(Please include	e Month & Year)	Address	Where are they now?

Name Father		Address if	Living
Other Immediate Fa			
Name	anny nsted above.	Address if	Living
VEHICLE OPERATOR'S	LICENSE:		
Give the following info	rmation concerning an	y vehicle operator's license you l	nave held or now ho
Type of License	Number	Issuing Authority	Expira
Type of License	Number	Issuing Authority	Expira
Type of License	Number	Issuing Authority	Expira
Type of License	Number	Issuing Authority	Expira
Type of License  Have you ever had a license			Expira
Have you ever had a lie	cense suspended or re	voked? Yes	
Have you ever had a lie	cense suspended or re		
Have you ever had a lie	cense suspended or re	voked? Yes	
Have you ever had a lie	cense suspended or re	voked? Yes	
Have you ever had a lie	cense suspended or re	voked? Yes	
Have you ever had a lie	cense suspended or re	voked? Yes	

	STATUS.			
Do you hav all accounts	e or have you had a s during the past se	any financial account (saving even (7) years.	gs, checking, loans, stoc	ks, bonds, etc.)? Lis
Name and A	Address of Financia	l Institution:	Type of Accou	nt:
PAST AND	PRESENT MEMBER	SHIP IN ORGANIZATIONS.		
Name	Address	Zip Type (Social, Fraternal, Professio	Office Held	Membership Da From To
(Yes/No)	'E ORGANIZATIONS			
Are	you now or have y	ou ever been a member of ar	_	_
which has a deny other	persons their right	of advocates the overthrow of advocating or approving ts under the Constitution of lited States by any unconstit	the commission of acts the United States or v	
which has a deny other form of gov	ndopted the policy persons their right vernment of the Un	of advocating or approving to under the Constitution of lited States by any unconstiturer been affiliated or associat	the commission of acts the United States or w utional means?	which seeks to alte
which has a deny other form of gov Are above, as a	edopted the policy persons their right vernment of the Unerson vernment of the Unerson or have you even agent, official or a you now associate	of advocating or approving to under the Constitution of lited States by any unconstiturer been affiliated or associat	the commission of acts the United States or w utional means? red with any organization	which seeks to alte on of the type descr ual, including relat

If yes to any of the answers above, describe the circumstances. Attach additional sheets for a fully detailed statement. If associated with any of these organizations, specify nature and extent of association with each, including office or position held. Also include dates, places and credentials now or formerly held. If associations have been with individuals who are members of these organizations, then list the individuals and the organization with which they were or are affiliated.

# 9. **EDUCATION** List all elementary, junior high and high schools attended Graduated? A. Address Yes/No Name City Zip В. Higher Education. List all colleges or universities attended. Attach transcript from last institution. Degree **Credit Hours** Name City Zip Years Attended Semester/Quarter Major and Minor Courses C. Other Schools or training (trade, vocational, military). List for each the name and location of school, years attended, subjects studied, certificate earned, and any other pertinent data. Include complete mailing address. 10. SPECIAL QUALIFICATIONS AND SKILLS. Indicate type of special license such as pilot, radio operator, etc., showing licensing authority, A. where the license was first issued and date current license expires. Special skills you possess and machines and equipment you can use. (For example, computer В. programmer, polygraph operator, vehicle inspection mechanic, scientific or professional devices.)

C.	Special qualifications not covered patents, inventions, public speal and fellowships received, etc.)			· · · · · · · · · · · · · · · · · · ·
FOREIC Langua	<b>GN LANGUAGE</b> . Enter language an	nd indicate fluency. Speaking	Understanding	Writing
	<b>DYMENT</b> . Begin with your most reng part-time, temporary or season Name and Address of Employe	nal employment and	•	•
includi	ng part-time, temporary or seaso	nal employment and	•	ment.
includi rom Date	ng part-time, temporary or seaso	nal employment and	all periods of unemploy	ment.
includi	ng part-time, temporary or seaso	nal employment and er Job Title	all periods of unemploys	ment.

Description of Duties

Name of Co-Worker

To Date

Salary

Name of Supervisor

From Date	Name and Address of Employer	Job Title	Reason for leavin
To Date		Description of Duties	
Salary	Name of Supervisor	Name of Co-Worker	
From Date	Name and Address of Employer	Job Title	Reason for leavin
To Date		Description of Duties	
Salary	Name of Supervisor	Name of Co-Worker	
Have y	tional employer blocks are needed, att rou ever been discharged, asked to res t to disciplinary action while in any po	ign, furloughed, or put or	n inactive status for cause, or
•	resigned after being informed your elame and address of employer, approx	• •	
13. MILIT <i>A</i>	ARY STATUS		YES NO
=	ou ever served in the US Armed Force attach copy of discharge or separation		
=	u claim veteran's preference? include a copy of your DD 214.		

	A.	felony or greater o	ffense? If yes, list date, p	lace, law enforcing au	ime graded as a misdemeanor, othority or type of court or court sheet to record this information.
В.	Are yo	• •	r of a U.S. Reserve or Sta	te Guard organization	? If yes, complete the
	Grade	and Service No.:			
	Service	e and Component:			
	Organ	ization and Station or	Unit and Address:		
	Indica	te reserve obligation	and status, if any		
14.		•	se provide a copy of your		•
			Local Boar		
<b>15.</b> qual	<b>CHARA</b> (ification	CTER REFERENCES. Lins for the position of a	st only character referen	ces that have definite	knowledge of your not list relatives, former
Nam	ne	Address	Home Phone	Work Phone	Years Known
perf		duties which you ma	ur life not mentioned he y be called upon to take	•	t upon your suitability to e further explanation? If yes,
				<del></del>	

17. Have you ever applied for a position with any other g	overnmental agencies? If yes, provide details.
Verifica	tion
I certify that there are no misrepresentations, omission answers and the entries made by me on the Police Officer best of my knowledge, belief and are made in good statements are grounds for rejection, and if I become e that this application has been completed subject to the production to authorities.	r Application are true, complete, and correct to the od faith. I understand that any false or misleading mployed are grounds for termination. I understand
	Signature of Applicant
	Date

### **APPENDIX B**

#### **Notification Procedure Release**

In the processing procedure required for applicants, it may become necessary to contact the applicant in the event they are being given further consideration for the position of police officer with the Blossburg Police Department.

If conventional methods fail in attempting to contact the applicant a certified or registered letter will be sent to the applicant's address listed on the application. Should the registered letter be returned indicating that it was unclaimed or undeliverable; the applicant will be eliminated from further processing and consideration.

It is the applicant's responsibility to notify Blossburg Police Department, in writing, of the address change. By affixing your signature to this form, the applicant acknowledges reading and understanding the contents of this procedure.

·	<del></del>
Date	Signature

### **APPENDIX C**

# Waiver and Release for Background Investigation

I, \_\_\_\_\_\_\_, am presently applying for employment as a police officer with the Blossburg Police Department which I acknowledge and understand must thoroughly investigate my employment background, criminal history, personal background, education and references in order to evaluate my qualifications for a position as a police officer. I understand that it is in the public's interest that all relevant information in this regard, including my personal and employment history with my current and former employers, be disclosed to the Borough of Blossburg.

By this release, I hereby authorize any representative of all of my former employers, which have been fully disclosed and identified in my employment application, to divulge any information in its files pertaining to my employment records and history, and I further authorize the release of such information upon request to any representative of the Borough of Blossburg. I also authorize all former employers identified in my employment application to permit a review and full disclosure of all records, or any part thereof, concerning myself and my employment with those former employers, by and to any duly authorized agent of the Borough of Blossburg whether said records are of public, private, or confidential nature.

The intent of this authorization is to permit all former employers identified in my employment application to provide, and for the Borough of Blossburg to obtain, full and free access to the background and history of my personal life and my employment history and performance, for the specific purpose of permitting the Borough of Blossburg to conduct a thorough background investigation regarding me that will provide pertinent data for consideration by the Borough of Blossburg in determining my suitability for employment as a police officer. It is my specific intent to provide the Borough of Blossburg with access to personnel information, however personal or confidential it may appear to be.

I authorize all former employers, which have been fully disclosed and identified in my employment application, to release any and all public and private information that it may have concerning me, my work record, my background and reputation, my military service records, educational records, my financial status, my criminal history record, including my arrest record(s) and records compiled during or as the result of a criminal investigation(s) of me, efficiency ratings, complaints or grievances filed by or against me, the records or recollections of attorneys at law, or other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had, an interest, attendance records, polygraph examinations, and any internal affairs investigations and discipline, including any files which are deemed to be confidential and/or sealed.

I hereby release all former employers identified in my employment application, and, if applicable, then-elected and appointed officials, employees and agents and all others from liability or damages that may result from furnishing the information requested, including any liability or damage pursuant to any state or federal laws. I hereby release all former employers identified in my employment application, and, if applicable, its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. I direct all former employers identified in my employment application to release such information upon request of the duly accredited representative of the Borough of Blossburg regardless of any agreement, written or oral, I may have made with the former employer to the contrary.

In addition, I also give the Borough of Blossburg the right to thoroughly investigate my background, previous employment, education and references in order to ascertain my suitability for service as a Borough of Blossburg employee. I release and hold harmless the Borough of Blossburg, its elected and appointed officials, agents and employees from and against any and all liability which might result from conducting such an investigation, including any damages of whatever kind which may at any time result to me, my heirs, family or associates because of such investigation.

I recognize and understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access and disclosure of records, and I waive those rights with the understanding that information furnished by any former employer will be used by the Borough of Blossburg in conjunction with employment procedures.

I understand that if a former employer refused to cooperate with this investigation by failing to provide full disclosure of any and all relevant information about me, then the Borough of Blossburg may disqualify me from further consideration for employment as a police officer.

A photocopy or facsimile of this release form will be valid as an original thereof, even though the said photocopy or facsimile does not contain an original writing of my signature. This waiver is valid for a period of one year from the date of my signature. Should there be any questions as to the validity of this release, you may contact me at the address listed on my employment application.

employees, from and against all claims, damages, loarising out of or by reason of complying with this rec	osses and expenses, including reasonable attorney's fees, luest.
Signature	Date

I agree to indemnify and hold harmless the person to whom this request is presented, as well as his agents and