



Ulysses Police Department

Job Description

&

Application for employment

INSTRUCTIONS

- Read the job description (Pages 2 & 3)
- Read and sign the release of information sheet. Release must be notarized. (Page 4)
- Fill out the application for employment as completely as possible (pages 5 through 16)
- Attach copies of any diplomas or degrees to this application.
- Attach copies of any military discharge papers to this application.
- If you are a naturalized citizen attach copies of your citizenship papers.
- Return this completed application packet to the following address:

**Ulysses Police Department
210 E. Central
Ulysses, Ks. 67880**

Police Officer

City of Ulysses

Position Summary

Under the supervision of the Chief of Police, the Police Officer is a non-exempt position under the FLSA, which performs duties in the protection of life and property and the preservation of order in the City of Ulysses. The employee in this position enforces all federal, state, local laws, ordinances and assists with investigations. Patrol duties include enforcing traffic laws, investigation of crimes, accidents and providing public assistance. This employee will be required to exercise initiative and discretion when faced with emergency situations.

Essential Functions

- Enforces all federal, state and local laws and ordinances
- Patrols streets of business district and residential neighborhoods
- Investigates suspicious conditions and complaints
- Investigates and records traffic accidents
- Searches for, collects and identifies evidence found at crime scenes
- Arrests individuals who violate laws and ordinances
- Appears in court as the arresting officer
- Investigates and intervenes in domestic disputes
- Directs traffic and issues citations for traffic law violations
- Operates radio transmittal equipment and communicates with dispatchers
- Answers citizen complaints and takes necessary action
- Assist other law enforcement, fire and emergency medical service agencies
- Works at a desk preparing reports
- Assist with civil defense in emergencies

Marginal Functions

- Assists with severe weather watches
- Participates in public information education meetings and programs
- Provides security checks
- Assists with funeral escorts
- Assists with animal control duties
- Other related duties as deemed necessary or as required

Position Requirements

Experience: This is an entry-level position and prior experience is not required. One to three years' prior law enforcement experience is preferred. Employee is expected to have acquired the necessary information and skills to perform the job reasonably well after one year in the position.

Education: High school diploma or GED required. Must complete and pass Kansas State Certification Program for Law Enforcement Officers within one year of employment or have passed a Law Enforcement Training Program. Forty hours of annual continuing education in police procedures and techniques is required after employment. Requires a valid Kansas driver's license.

Skills: The ability to understand and enforce federal, state, local laws, ordinances and police techniques. The ability to gather, evaluate and present information in a concise manner. Must have good communication and interpersonal skills. Must learn proper operation of radio equipment, firearms, intoxilizer equipment and related law enforcement equipment.

Problem Solving: Frequent problem solving exists in the day-to-day performance of duties, in handling aggressive suspects and in finding evidence for conviction of a crime.

Decision Making: Frequent decision-making exists in this position. Decisions include determining proper procedures at the scene of a crime, probable cause, arresting alleged criminals and insuring their rights are protected.

Financial Accountability: Employee is not responsible for budgetary control of the department and does not participate in the annual department budget process.

Supervision: There is limited supervision provided and the Chief of Police will review job related decisions. Employee does not have supervisory responsibility over subordinate personnel.

Personal Relations: Occasional contact with other city departments and continual contact with the general public.

Working Conditions: Physical effort is required. Employee may be confronted with adverse weather, life threatening situations and stressful conditions. Hazardous and dangerous situations may arise in the apprehension of alleged criminals. Exposure to blood borne pathogens is a factor in this position.

Physical Requirements: The ability to pass and maintain all physical requirements and activities of the Law Enforcement Training Center. Must be at least twenty-one years of age.

Ulysses Police Department

210 E. Central

Ulysses, Kansas 67880

620-356-3500

RELEASE OF INFORMATION

Last Name First Name Middle Name Sex Race Date of Birth
(m/d/y)

Place of Birth County or City Social Security # State Country

I _____ do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself, by and to any duly authorized agent of the Ulysses Police Department, whether the said records are of public, private or confidential nature.

The intent of this authorization is to give consent for full and complete disclosure of the records of educational institutions; financial or credit institutions, including records of deposits, withdrawals and balances of checking and/or savings accounts, loans, and also the records of commercial or retail credit agencies (including credit reports and/or ratings); public utility companies; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me, and salary records; real and personal property tax statements and alleged or actual violations of law, including criminal, civil and/or traffic records; the results of any polygraph examinations; records of complaints of a civil nature made by or against me, where-so-ever located, and to include the records and recollections of attorneys at law, or of other counsel, whether representing me or another person in any case in which I presently have, or have had an interest.

I reiterate, and emphasize that the intent of this authorization is to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing a background investigation, which may provide pertinent data for the Ulysses Police Department to consider in determining my suitability for employment by that department. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be, and the sources of information specifically identified herein.

I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the Ulysses Police Department. I understand that all materials pertaining to this background investigation become the property of the Ulysses Police Department and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and employees, from and against all claims damages, losses and expenses, including reasonable attorney fees, arising out of complying with this request. I further understand that in the event my application is disapproved, the sources of confidential information cannot be revealed to me.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

MUST BE SIGNED IN THE PRESENCE OF A NOTARY:

Signature _____

Street Address _____ City _____ State & Zip _____

Subscribed and sworn before me this _____ day of _____ 20_____

My commission expires _____ 20_____ Notary: _____

Personal History Statement

Personal

Name:

Last	First	Middle
------	-------	--------

Aliases:

Current Address:

Number	Street	CITY	State	Zip Code
--------	--------	------	-------	----------

Phone Number: Day time _____ Night time _____

Birth Date _____ Social Security Number _____

Height _____ Weight _____ Hair Color _____ Eye Color _____

Scars and Tattoos _____

Relatives

Spouse

Name	Address	Phone
------	---------	-------

Father

Name	Address	Phone
------	---------	-------

Mother

Name	Address	Phone
------	---------	-------

Father in law

Name	Address	Phone
------	---------	-------

Mother in law

Name	Address	Phone
------	---------	-------

Brothers and Sister

Name	Address	Phone
------	---------	-------

Name	Address	Phone
------	---------	-------

Name	Address	Phone
------	---------	-------

Others

Name	Address	Phone
------	---------	-------

Name	Address	Phone
------	---------	-------

References

List three persons not living with you that know of your skills and qualifications

Name	Address	Phone
------	---------	-------

Name	Address	Phone
------	---------	-------

Name	Address	Phone
------	---------	-------

Education

List High Schools, Colleges or Vocational Schools you have attended

Name of School	Address	Dates Attended	Highest Grade Completed
----------------	---------	----------------	-------------------------

Education Continued

Have you ever been suspended or expelled from any high school or post secondary school?
(Post secondary schools include two and four colleges, universities, and business and vocational schools –any formal education beyond the high school level.)

Yes _____

No _____

If “yes” please explain (include school, date, and circumstances).

Residence

Please list all of your residences during the last 10 years (list nothing prior to your 15th birthday).
Begin with your most current residence.

Address	City, State	Dates from and to	If rented give names and address of the Person responsible For collection of the rent
<hr/>			
<hr/>			
<hr/>			
<hr/>			
<hr/>			
<hr/>			
<hr/>			
<hr/>			
<hr/>			

Experience and Employment

Beginning with your most current employment, please list all jobs (including part-time, temporary and voluntary positions) you have held in the past 10 years. (For the purpose of this personal history statement, volunteer work should be included as employment.) For identification and verification, please indicate the nature of the activity; i.e. full-time, part-time, or voluntary. If you have had intervening periods of military service or unemployment, please list those periods in sequence in the spaces provided.

Dates of employment		Name & Address of Employer	Name of Supervisor
From	To		
Mo/Yr	Mo/Yr		
_____	_____	_____	
		Title and Duties	

		Reason for Leaving	

Dates of employment		Name & Address of Employer	Name of Supervisor
From	To		
Mo/Yr	Mo/Yr		
_____	_____	_____	
		Title and Duties	

		Reason for Leaving	

Dates of employment
From To
Mo/Yr Mo/Yr

Name & Address of Employer

Name of Supervisor

Title and Duties

Reason for Leaving

Dates of employment
From To
Mo/Yr Mo/Yr

Name & Address of Employer

Name of Supervisor

Title and Duties

Reason for Leaving

Dates of employment
From To
Mo/Yr Mo/Yr

Name & Address of Employer

Name of Supervisor

Title and Duties

Reason for Leaving

Would any problem result if your present employer were contacted during the course of this background investigation? Yes _____ No _____

If "no" when should contact be made? _____

Have you extended work absences for reasons other than earned vacations?

Yes _____ No _____

If "yes", please explain (include when, name of employer, why).

Have you ever been fired or asked to resign from any place of employer? Yes _____ No _____

If "yes" please give details (Include when, where, circumstances).

Have you ever been successful or unsuccessful candidate for another position requiring police officer powers?

Yes _____ No _____

If "yes" please give details (include when, name of agency, circumstances).

Military Service

If you are under age 26, please provide the following:

Selective Service Number

Approximate Date of Registration

Address at time of Registration

Are you currently participating in any Military Reserves or National Guard program?

Yes _____ No _____

Have you ever served in the armed forces, National Guard, or Military Reserves? Yes _____ No _____

If "yes" please supply the following information:

Branch of Service

Service Number

Dates of Service

Type of Discharge

Are you currently participating in any Military Reserves or National Guard program?

Yes _____ No _____

Have you ever been the subject of any judicial or disciplinary action while in the Military, National Guard or Military Reserves? Yes _____ No _____ If "yes" please give details (include branch of service, when, where, circumstances).

Military Service Continued

Past commanding officers or military acquaintances are potential sources of relevant information pertaining to your background. Please list those individuals who know you well enough to provide accurate information about you.

Name	Contact Address	Contact Telephone	Years Known	
			From	To
<hr/>				
<hr/>				
<hr/>				

Financial

The management of personal finances is relevant to an individuals qualifications for the position of police officer. Be complete and accurate. The amount of indebt ness in itself will not be used in evaluating your qualifications, but rather the behavior exhibited in meeting your financial obligations.

Current Monthly Income

Monthly Salary \$ _____

Spouses Salary \$ _____

Other Income \$ _____

Estimated monthly cost of living
Include utilities, food, gas and car maintenance,
Entertainment and any other obligations

Total Monthly Income \$ _____

Current Monthly Expenditures

Real Estate (mortgage pymts) \$ _____

Rent \$ _____

other payments \$ _____

\$ _____

Total Monthly Expenditures \$ _____

Current Assets

Savings \$ _____

Checking \$ _____

Real Estate \$ _____

Stocks & Bonds \$ _____

Autos \$ _____

Total Assets \$ _____

Current Liabilities

Real Estate \$ _____

Long Term Loans \$ _____

Real Estate \$ _____

Other Liabilities (describe) \$ _____

Total Liabilities \$ _____

Please supply more detailed information about your charge accounts, contracts, or other financial liabilities.

Name of Firm

Address

Account Number

Have you ever filed or declared bankruptcy? Yes _____ No _____

If "yes" please give details (include when, where, why).

Have any of your bills ever been turned over to a collection agency? Yes _____ No _____

If "yes" please give details (include when, firms involved, circumstances).

Have you ever had purchased goods repossessed? Yes _____ No _____

If "yes" please give details (include when, firms involved, circumstances).

Have your wages ever been garnished? Yes _____ No _____

If "yes" please give details (include when, where, why).

Financial Continued

Have you ever been delinquent on income or other tax payments? Yes _____ No _____

If "yes" please give details (include when, where, why).

Legal

If you have ever been arrested or convicted of any crime (excluding traffic citations) please give the following information: (The fact that your record may have been affected by a sealing, an expungement, a release or a pardon has specific implications as to how you should answer this question).

Approximate Date

Police Agency

Circumstances

Have you ever been placed on probation as an adult? Yes _____ No _____

If "yes" please give details (include when, where, why).

Were you ever required to appear before a juvenile court for an act, which if committed by an adult would have been a crime? Yes _____ No _____

If "yes" please give details (include when, where, why).

Have you ever been reported to a law enforcement agency as a missing person or runaway?

Yes _____ No _____

If "yes" please give details (include date, law enforcement agency, circumstances).

Legal Continued

Are you now or have you ever been involved as a plaintiff or defendant in any civil court action?

Yes _____ No _____

If "yes" please give details (include when, name and location of court, circumstances).

Motor Vehicle Operation

Operation of a motor vehicle is an integral part of the position of patrol officer. An investigation of your driving history will be made through a records check. To expedite this procedure, please supply the following information:

Drivers License Number

Expiration Date

Name under which license was granted

Please list other states where you have been licensed to operate a motor vehicle

State & name under which license was granted

Have you ever been refused a driver's license by any state? Yes _____ No _____

If "yes" please explain (include when, where, why).

Law requires that operators & owners of motor vehicles be covered by liability insurance or bond or deposit of \$35,000 with the Department of Motor Vehicles. Therefore, please list your current liability insurance.

Company Address

Policy Number

Date of Expiration

Please list all traffic citations (exclude parking citations) you have received within the last 5 years.

Name of violation

Location (city)

Approximate Date

Motor Vehicle Operation Continued

Have you ever been involved as a driver in a motor vehicle accident within the last 5 years?

Yes _____ No _____

Date _____ Location _____ Injury or Non Injury _____

Police Investigation _____ Police Agency _____

Date _____ Location _____ Injury or Non Injury _____

Police Investigation _____ Police Agency _____

Date _____ Location _____ Injury or Non Injury _____

Police Investigation _____ Police Agency _____

If there is anything you wish to discuss about your driving record, please use the space below.

Has your license ever been suspended, revoked, or placed on negligent operator's probation?

Yes _____ No _____

If "yes" please give details (include what, when, where, why).

General Information

Have you ever been refused insurance for any reason other than failure to pay a premium?

Yes _____ No _____

If "yes" please explain (include company name and address, date and reason).

General Information Continued

Have you ever applied for a permit to carry a concealed weapon? Yes _____ No _____

If "yes" please provide the following information:

Permit granted? Yes _____ No _____

Date	Name of Law Enforcement Agency	Purpose
------	--------------------------------	---------

I hereby certify that all statements made in this personal history statement are true and complete, and I understand that any misstatements of material facts will subject me to disqualification or dismissal.

Signature in Full

Date Completed
