



## EVANSVILLE POLICE DEPARTMENT

535 E. MAIN ST., EVANSVILLE, WI 53536

Non-Emergency (608)882-2292

Admin (608)882-2299 FAX (608)882-2295

e-mail [evanspd@charter.net](mailto:evanspd@charter.net)



Scott A. McElroy

Chief of Police

11/10/2008

### OFFICIAL NOTICE

Applications are now being accepted to create an eligibility list for anticipated full-time & part-time entry level police officer vacancies (subject to approval by the Evansville Police Commission). Once approved by the Evansville Police Commission, the eligibility list shall be good for a period of up to six (6) months.

Application packets can be downloaded on the city web site or picked up at the Evansville Police Department. Required qualifications are specified in the application packet.

If you are re-applying for a position of Police Officer with the City of Evansville you may use your on file application materials if you've applied within **three (3) months** of the closing date of the prior process. Please contact a hiring and recruitment officer to see if you qualify. If it's determined you qualify, a new letter of interest, a letter including all changes or updates to any on file application materials, and a current signed DJ-LE-305 wavier **will be required**.

You may check required qualifications on-line at [www.wilenet.org](http://www.wilenet.org) or [www.ci.evansville.wi.gov](http://www.ci.evansville.wi.gov) (carry mouse icon over "other information tab" on left side of web page and click the job posting link).

In addition, each applicant **SHALL SUBMIT** to the Hiring and Recruitment Team the following application materials:

1. Completed Resume including letter of interest.
2. Completed DJ-LE-330 Application which may be downloaded at <https://wilenet.org/html/employment/index.jsp>
- 3."Signed " Authorization for Release of Information, DJ-LE-305
4. Minimum Qualification Statements

**BE PREPARED TO PROVIDE A COPY OF THE FOLLOWING WHEN REQUESTED.**

1. Official College Transcripts
2. Official DMV Abstract –WI DMV form request MV2896  
<http://www.dot.wisconsin.gov/drivers/drivers/points/abstract2.htm>
3. Photo Copy of DD214 Military Separation Documentation (if applicable)
4. Photo Copy of Certificate of Birth
5. Three (3) letters of recommendation

Application packets can be obtained by visiting the City of Evansville web site. [www.ci.evansville.wi.gov](http://www.ci.evansville.wi.gov) (find the other information tab on the left hand side of the web page and select the job posting link) Questions should be directed to the hiring and recruitment team by calling 608-882-2299 or emailing [evansvillepolice.wi@gmail.com](mailto:evansvillepolice.wi@gmail.com)

The application process may consist of, but not limited to an assessment center including a written test/exam, practical examination(s), interviews, medical examination, drug screen, physical agility exam, extensive background investigation, psychological examination, and a probationary period.

All information provided will be verified any false/misleading information will disqualify the candidate from the process and revoke any offers of employment and or result in termination.

**Note:** Final offer(s) of employment shall be conditional, and are subject to Evansville Police Commission approval.

**Deadline:** Complete application materials must be received and/or post marked NO LATER then 5:00PM, January 9th, 2009. Incomplete or late application materials shall disqualify a candidate.

“ The City of Evansville is an Affirmative Action, Equal Opportunity Employer”



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**Scott A. McElroy**      **Chief of Police**

**EMERGENCIES DIAL 9-1-1**

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Thank you for your interest in employment for the City of Evansville Police Department. Please read and follow the **GENERAL INSTRUCTIONS**.

## **GENERAL INSTRUCTIONS:**

This packet has all the materials necessary for you to apply for entry level Police Officer for the City of Evansville Police Department. The minimum qualifications statement sheet is designed to inventory relevant education and experience for Police Officer for the City of Evansville.

Read all instructions and examples throughout the packet.

## **HOW TO APPLY:**

Completed applications must be returned to:

City of Evansville Police Department  
Attention: Hiring and Recruitment  
535 E Main St.  
Evansville, WI 53536

Completed applications must include:

- Completed Resume including letter of interest
- Completed DJ-LE-330 application
- Signed Authorization for Release of Information, DJ-LE-305
- Minimum Qualifications Statement Sheet

The top group of candidates will be invited to participate in the next phase of the selection process. Applicants must go through an extensive hiring process including, but not limited to, assessment center, written test, physical agility, oral interview, Personal Evaluation Profile and a complete and thorough background investigation. A medical screening, physical, and psychological testing will be done on final candidates. All candidates must successfully pass each section of the hiring process to continue on, regardless of prior experience or education. At this time we do not have a determined date for interviews or the exact number of vacancies to be filled.

When filling out your application materials please keep the following in mind:

- Information provided in all phases of the hiring process including all application materials are subject to verification. False or incomplete information will be cause for disqualification and could result in criminal charges.
- Make your entries clear and legible. No credit will be given for information that cannot be understood.

Be careful when filling out the required materials and make sure all information provided is verifiable. You may want to keep a copy of these materials for future reference.

*“No man is above the law and no man is below it; nor do we ask any man’s permission when we require him to obey it. “”Obedience to the law is demanded as a right; not asked as a favor.” Theodore Roosevelt Third annual message to Congress, 12/07/1903*

**Minimum Qualifications Statement Sheet**

Full Name (printed) \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Note: It is a Wisconsin Training and Standards requirement that all law enforcement personnel have a minimum of 60 college credits within 5 years of employment as a law enforcement officer. Select A, B, C, D, or E whichever best describes your education or work experience.

A. \_\_\_\_\_ Completed or in the process of completing (within six months) a four year advanced degree.

Bachelor Degree Program & Major: \_\_\_\_\_ Month & Year Graduated: \_\_\_\_\_

Institution: \_\_\_\_\_

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Graduate Degree Program & Major: \_\_\_\_\_ Month & Year Graduated: \_\_\_\_\_

Institution: \_\_\_\_\_

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B. \_\_\_\_\_ Completed or in the process of completing (within six months) a two year degree.

Associate Degree: \_\_\_\_\_ Month & Year Graduated: \_\_\_\_\_

Institution: \_\_\_\_\_

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C. \_\_\_\_\_ I am **CERTIFIABLE** as a Law Enforcement Officer in Wisconsin based on completing an academy as a civilian or out of state law enforcement certification.

Name of Academy or Out of State Agency: \_\_\_\_\_

Dates: \_\_\_\_\_

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D. \_\_\_\_\_ I am **CERTIFIED** as a law enforcement officer.

Name of Agency(s): \_\_\_\_\_

Dates: \_\_\_\_\_

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E. \_\_\_\_\_ I do not have the required 60 college credits.

Number of college credits currently completed: \_\_\_\_\_

Institution: \_\_\_\_\_

**Please answer YES or NO to questions 1-9. (All questions must be answered)**

1. Do you currently possess a valid Wisconsin driver's license or are you eligible to obtain a valid Wisconsin driver's license upon appointment?

YES \_\_\_\_ NO \_\_\_\_

2. Are you at least 21 years of age?

YES \_\_\_\_ NO \_\_\_\_

3. Do you have any unpardoned felony convictions?

YES \_\_\_\_ NO \_\_\_\_

4. Do you have any domestic violence convictions?

YES \_\_\_\_ NO \_\_\_\_

5. Have you been convicted of any misdemeanor or other criminal offense within the past five years?

YES \_\_\_\_ NO \_\_\_\_

6. Have you been convicted of operating a vehicle while intoxicated, operating after suspension or revocation, or operating without a valid driver's license (excluding expired license convictions or suspension violations for failure to pay fine)?

YES \_\_\_\_ NO \_\_\_\_

7. Have you been convicted of more than one moving traffic violation within the past two years or have you received more than 6 demerit points on your driver's license in the past 3 years?

YES \_\_\_\_ NO \_\_\_\_

8. Have you been convicted of any alcohol violations within the past five years ?

YES \_\_\_\_ NO \_\_\_\_

9. Are you available to work nights, weekends, and holidays?

YES \_\_\_\_ NO \_\_\_\_

*Information provided in this minimum qualification statement form is subject to verification. False or incomplete information will be cause for disqualification.*

Signature: \_\_\_\_\_ SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date: \_\_\_\_\_

Note: After a conditional offer of employment is made, a medical and psychological examination will be scheduled and conducted. Failure to meet acceptable standards for the credit history, drug test, physical, or psychological examination or background will be grounds for disqualification.



EVANSVILLE POLICE DEPARTMENT  
 Employing Agency

**APPLICATION FOR EMPLOYMENT AS LAW ENFORCEMENT, JAIL OR SECURE DETENTION OFFICER**

**NOTICE:** Application must be typewritten or clearly printed in ink. All questions must be answered, if applicable. If not, indicate NA (not applicable). Applications which are incomplete or illegible will not be considered. If space provided is insufficient for complete answers or you wish to furnish additional information, attach sheets of the same size as this application and number answers to correspond with questions.

**1. PERSONAL INFORMATION**

Name in Full (Last, First, Middle)			Social Security Number
Address (Apartment, Street, P.O. Box)			Home Telephone Number ( )
City	State	Zip Code	Work Telephone Number ( )

Are you over the age of 18?  Yes  No

Are you a United States citizen?  Yes  No

Do you have a valid Wisconsin driver's license?  Yes  No

Do you have a valid driver's license from another state?  Yes  No

Have you ever been convicted of a felony?  Yes  No  
 If yes, please attach a separate sheet giving full information.

Have you completed at least 60 college credits?  Yes  No

**IMPORTANT:** Administrative Rule LES 2.01(1)(e) requires that a law enforcement officer possess either a two-year Associate Degree or 60 college level credits, or meet the standard within the first five years of employment. The Law Enforcement Standards Board may waive up to 30 credits upon documentation of writing, problem solving, and other communication skills. The College Credit Waiver Application (DJ-LE-331) is available at [www.wilenet.org](http://www.wilenet.org).

**2. EDUCATION**

Name of School	Location	Dates		Course Pursued	Degree, Diploma, or Credits Earned
		From	To		
High Schools					
College					
Graduate School					

List any scholarships, apprenticeships, licenses, certifications, membership in professional organizations or other information you believe should be considered in evaluating your qualifications.

### 3. EMPLOYMENT

Begin with current or most recent employer. List chronologically all employment, including summer and part-time employment while attending school. All time must be accounted for. If unemployed for a period, provide dates. To furnish additional employment information, attach sheets of the same size and format as this application.

Name and Address of Employer	Dates	Position and Kind of Work
Name _____ Street _____ City, State _____ Supervisor's Name/Telephone: _____ May we contact the employer/supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	From      To  Full-Time <input type="checkbox"/>  Part-Time <input type="checkbox"/>  Annual Salary/Wages:	Reason for Leaving
Name _____ Street _____ City, State _____ Supervisor's Name/Telephone: _____ May we contact the employer/supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	From      To  Full-Time <input type="checkbox"/>  Part-Time <input type="checkbox"/>  Annual Salary/Wages:	Reason for Leaving
Name _____ Street _____ City, State _____ Supervisor's Name/Telephone: _____ May we contact the employer/supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	From      To  Full-Time <input type="checkbox"/>  Part-Time <input type="checkbox"/>  Annual Salary/Wages:	Reason for Leaving
Name _____ Street _____ City, State _____ Supervisor's Name/Telephone: _____ May we contact the employer/supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	From      To  Full-Time <input type="checkbox"/>  Part-Time <input type="checkbox"/>  Annual Salary/Wages:	Reason for Leaving

#### 4. MILITARY SERVICE

Branch of Service	Month/Year Served From	To	Active Duty or Reserve	Highest Grade	Skill Specialty or Primary Duty

List special schools attended/skills acquired during military service.

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#### 5. REFERENCES

Give three references (not relatives, or present employer; avoid listing members of the clergy).

<b>Name</b> _____	<b>Number of Years Acquainted</b>
<b>Address</b> _____ <b>City/State/Zip</b> _____ <b>Telephone Number</b> (    ) _____	<b>Position/Title/Profession</b>
<b>Name</b> _____	<b>Number of Years Acquainted</b>
<b>Address</b> _____ <b>City/State/Zip</b> _____ <b>Telephone Number</b> (    ) _____	<b>Position/Title/Profession</b>
<b>Name</b> _____	<b>Number of Years Acquainted</b>
<b>Address</b> _____ <b>City/State/Zip</b> _____ <b>Telephone Number</b> (    ) _____	<b>Position/Title/Profession</b>

#### 6. GENERAL

**COMPLETE IF INSTRUCTED TO DO SO BY EMPLOYING AGENCY.**

For questions A-C, attach no more than one additional page for each answer.

- A. Why have you chosen to apply for this position?
- B. Discuss things you have done which have contributed to your life experience. Remember to include information regarding volunteer work with civic, school, or professional organizations. Be specific about names and dates.
- C. Why do you believe you could relate to and/or work with people of different races, sexes, cultures, ages, socio-economic groups, and educational levels?

**APPLICANT PLEASE READ CAREFULLY AND SIGN BELOW**

Information provided and statements made as part of this application may be grounds for not employing you or for dismissing you after you begin work. All information provided and statements made are subject to verification.

**CERTIFICATION**

ALL INFORMATION PROVIDED AND STATEMENTS MADE BY ME AS PART OF THIS APPLICATION, OR AS PART OF ANY ADDITIONAL INFORMATION PROVIDED IN SUPPORT OF THIS APPLICATION, ARE COMPLETE, CORRECT, AND TRUE TO THE BEST OF MY KNOWLEDGE.

I UNDERSTAND THAT IF I AM EMPLOYED, FALSE INFORMATION PROVIDED OR FALSE STATEMENTS MADE AS PART OF THIS APPLICATION MAY BE CONSIDERED AS CAUSE FOR DISMISSAL.

Applicant's signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

Under the provisions of section 19.36, Wisconsin Statutes, I request that my identity as an applicant for the position of \_\_\_\_\_ not be revealed without my consent or until required under law.

Applicant's signature: \_\_\_\_\_ Date signed: \_\_\_\_\_



## AUTHORIZATION FOR RELEASE OF INFORMATION

*(For official use only, not to be released to unauthorized persons)*

I hereby empower an employee of the \_\_\_\_\_  
*Employing Agency*  
or other authorized representative thereof bearing this release to obtain information and records, within one year of the date of this release, pertaining to me from any or all of the following sources:

1. Municipal, State, or Federal law enforcement agencies
2. Selective Service System
3. Any banking institution
4. Any place of business (for purposes of obtaining credit or employment data)
5. Credit rating bureaus or institutions
6. Any previous employer
7. Present employer
8. Any school, college, university, or other educational institution
9. Any law enforcement or jail officer

### Exceptions to this blanket authorization

1. Any medical information in the possession of any source named above until subsequent to a conditional offer of employment (per Americans With Disabilities Act).
2. \_\_\_\_\_
3. \_\_\_\_\_

This release is executed to authorize \_\_\_\_\_,  
*Employing Agency*  
as a prospective employer, to obtain the above information. It is understood that said information shall be used only in consideration of my employment and shall not be further disseminated for any purpose.

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature - Full Name*

\_\_\_\_\_  
*Address - Street and Number*

\_\_\_\_\_  
*City State Zip*

Witness: \_\_\_\_\_  
*Signature*

# Evansville Police Department

## Authorization and Release

I hereby authorize the Evansville Police Department, Evansville, Wisconsin, and any third party designated by the Evansville Police Department to investigate the accuracy of the information submitted on my application, during the application review process, in my resume or transmitted by me in any other manner to the Evansville Police Department in connection with my application for employment with the Evansville Police Department.

I hereby release the Evansville Police Department and any third party designated by them, along with all related persons, companies and organizations from all claims and liabilities of any nature arising from such investigation or information given other than claims or liabilities to the extent arising from any of their gross negligence or willful misconduct.

This authorization and release relates to any and all records, documents and information that relates to me in any way and includes, but is not limited to: current and former employers, schools, colleges and universities, financial institutions, banks, credit reporting agencies, law enforcement agencies, custodians of driving records, governmental agencies and other units of government (local, state and federal) and any other organizations that maintain records of contacts with law enforcement agencies and dispositions related to those contacts.

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Maiden name or alias

\_\_\_\_\_  
Street/Mailing address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Telephone including area code

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

(ori: DCSO 01/30/08 pjr – Southworth & Associates LLC) Complete this form w/ initial application.