Application for Employment as Police Officer



City of Bridgeport Attn: City Clerk PO Box 1310 515 West Main Street Bridgeport, WV 26330

Date of Application
The City of Bridgeport is an equal opportunity employer and does not discriminate against applicants employees because of race, color, religion, national origin, sex, age, marital status, or disability status otherwise qualified individuals. Equal access to programs, services and employment is available to persons. Those applicants requiring reasonable accommodation to the application and/or interview proc should notify the Personnel/HR Department.
Position: Probationary Police Officer
Name (First) (Middle Initial) (Last)
Address City State Zip
Social Security Number Home Phone Number ()
Driver's Lic. Number State of Issuance
Date of Birth Place of Birth
Personal History Are you legally entitled to apply as a Police Officer in West Virginia, because you are at least 18 years of age and not more than 40 years of age? Yes No
Did you serve in the U.S. Armed Forces? Yes No (DD-214 is required if you seek veteran's preference)
Dates of ServicetoRank
Did you receive any discharge other than an honorable discharge? Yes No

City of Bridgeport ©5/2019 (Police Department) Relevant skills and training acquired during military service: Have you ever been employed by the City of Bridgeport? Yes ☐ No Have you ever applied to the City of Bridgeport before? ☐ Yes □ No Referred by: Applied on my own Current/Former Employee Employment Ad College Career Fair
Other (Explain) Web-site If offered a position, what date could you start? Addresses for previous 5 years **Dates** Address City State Zip Code (Should additional space be required, list information on a separate sheet) References (List name, address, occupation, telephone number and length of relationship for 3 business/work references who are not related to you and are not previous supervisors/employers. If not applicable, list three school or personal references who are not related to you.) Name/Address/Occupation: ____ Time Known _____ Name/Address/Occupation: _____ Time Known _____ Name/Address/Occupation: __) Time Known Phone:(Do you authorize the City of Bridgeport to contact the references listed above? Yes No

Edu	<u>ication</u>	al H	istory

Type of School	Name and Location	Degree/Area of Study	<u>Dates Attended</u> <u>From-To</u>	Did you Graduate?
High School	,			☐ Yes ☐ No
Technical/ Trade School				☐ Yes ☐ No
College				☐ Yes ☐ No
Graduate School				☐ Yes ☐ No
Other				☐ Yes ☐ No
	ations: (Summarize any s _i	pecial training, skil	ls, licenses and/or cer u are applying)	tificates that may qualify
Kills and Qualific eing able to perform jo	p-related functions in the pos			
ang able to perform jo	p-related functions in the pos	reign Langua	ges nd your proficier	ncy level)
eing able to perform jo	p-related functions in the pos	reign Languaq ge you know a	nd your proficier	ncy level) Basic

Q & A		
Are you legally authorized to work in the United States?	Yes	☐ No
Have you ever held a position of trust, such as handling money or		
confidential material?	☐ Yes	□ No
Have you had a valid driver's license for two (2) years prior to the	_	_
date of this application?	Yes	∐ No
Has your driver's license ever been revoked or suspended? If Yes, explain.	Yes	No
Have you ever been convicted of a misdemeanor?	□ Voc	□ No
If Yes, explain.	Yes	☐ No
Have you ever been convicted of a felony?	Yes	No
If Yes, explain.		
Have you ever been convicted for domestic violence?	Yes	No
If Yes, explain		
Have you ever been convicted of a traffic violation (includes moving]	
or non-moving offenses)	Yes	☐ No
If Yes, explain.		
Are you currently using illegal drugs?	Yes	☐ No
Do you drink alcoholic beverages?	Yes	☐ No
Have you applied for the position of police officer at another municip		p
or department?	☐ Yes	☐ No
If Yes, where.	<u> </u>	
Have you been employed as a police officer at another municipality or department?		
If Yes, where	Yes	∐ No
Have you previously applied for employment with the West Virginia	_	· · · · · ·
State Police?	☐ Yes	□No
Have you been employed by the West Virginia State Police?	Yes	No
Have you previously tested for the position of West Virginia State		
Police Trooper?	Yes	No
If you checked Yes to any of the questions pertaining to a previous		
application or employment as a police officer with another mu	inicipality or	
department or the West Virginia State Police, please give det	ails.	
		
What is your state of health and physical conseils for this and the second		
What is your state of health and physical capacity for this position? Are you able to perform the essential functions of this position with/		
without accommodations?	□Vos	□ Ma
Will reasonable accommodations be needed during the testing	∐ Yes	No
process for this position?	Yes	□ No
Do you object to inquiry of your present employer regarding your	163	☐ No
character, work record, qualifications or abilities?	Yes	□ No
	163	

otty of Bridgeport ©5/2019 Police Department)	
perore a person is selected for enlistment, or	entries made in his/her application are verified and a
rregularities that may be disclosed by our inve	is conducted. You may use this space to explain an
rregularities triat triay be disclosed by our life	astigations.
mployment History	
edin with present or most recent employer	List ALL work experience beginning with your preser
most recent ich and working hack Include	do ALL work experience beginning with your preser
And Summer John Volunteer Week at	de ALL work experience: Full- or Part-Time, Militar
ervice, Summer Jobs, Volunteer VVolk, etc.	If you have held more than one position/title with th
ame employer, list each position/title separate	ery.
Name of Company:	Employed from:
Address:	Employed from: to:
Type of Business:	to: Starting salary \$
Last position held:	
Name of supervisor:	Last salary \$
Describe the work you did: Reason for leaving:	
reason for leaving.	Part Time Full time
Name of Comment	
Name of Company: Address:	Employed from:
Type of Business:	to: Starting salary \$
Last position held:	Starting satary 5
Name of supervisor:	Last salary \$
Describe the work you did:	
Reason for leaving:	Part Time Full time
Name of Company:	Employed from:
Address: Type of Business:	to:
Last position held:	Starting salary \$
Name of supervisor:	Last salary \$
Describe the work you did:	
Reason for leaving:	Part Time Full time
Name of Company:	E. 1. 10
Address:	Employed from:
Type of Business:	to: Starting salary \$
Last position held:	
Name of supervisor:	Last salary \$
Describe the work you did:	
Reason for leaving:	Part Time Full time
Name of Company	
Name of Company: Address:	Employed from:
Type of Business:	
Last position held:	Statuting satary p
Name of supervisor:	Last salary \$
Describe the work you did:	

Reason for leaving:

Full time

Part Time

(Police Department) May we contact your past employer(s)? ☐ Yes ☐ No May we contact you at work? Yes No Will you work overtime if required? Yes No Are you able to meet attendance requirements of the position? Yes No Have you ever been bonded? ☐ Yes ☐ No Additional Information: List professional, trade, business or civic associations and/or any special accomplishments, publications, awards, etc. (Exclude membership that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.)

City of Bridgeport ©5/2019

Applicant Statement

- I certify that answers given herein are true and complete to the best of my knowledge. I understand that any falsification or misrepresentation in this application may disqualify me from consideration for employment or may result in discipline or discharge from employment.
- I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.
- I understand that, under certain circumstances, I may be entitled under federal law to request in writing and receive from the City disclosure of the nature and scope of certain aspects of the City's investigation.
- I understand that the result of any pre-employment investigation, i.e., criminal background check, polygraph, credit report, DMV, etc. including any information or report received in connection with the investigation, may be made known to other City personnel involved in the hiring process. I consent to the conducting and receiving of any such reports and consent to the dissemination of the results to the City's investigation personnel.
- If hired, I agree to conform to the rules and regulations of the City which will include a
 prescreening drug/alcohol screening/test. I understand that, if hired, I may be required
 to furnish proof of age and will be required to furnish proof that I am legally entitled to
 work in the United States and that my age meets the Civil Service requirement of at
 least 18 years of age and not more than 40 years of age.
- This application for employment shall be considered for a period not to exceed three (3) years. Any applicant wishing to be reconsidered for employment after this time should file a new application.

Signature of Applicant

Date



Opportunity lives here.

Bridgeport Police Civil Service Commission

Physician's Certification of Fitness to Perform Physical Testing

I have reviewed all aspects of the atta Department Physical Ability Standards tes perform the test safely.	_		
Candidate's Name:			_
Physician's Signature:		Date	

Bridgeport Police Department Physical Ability Standards

PUSH-UPS – Designed to measure upper body muscular endurance and absolute strength. Applicants must be able to complete 18 properly executed push-ups within one minute.

The hands are placed about shoulder width apart. The administrator places a fist on the floor below the applicant's chest.

Starting from the up position (elbows fully extended), the applicant must keep the back straight at all times and lower the body to the floor until the chest touches the administrator's fist. Applicant then returns to the up position.

<u>SIT-UPS</u> – Designed to measure abdominal muscular endurance. Applicants must be able to complete 28 properly executed sit-ups within one minute.

The applicant starts in the up position, knees bent, heels flat on the floor, hands folded across the chest touching the shoulders.

A partner holds the feet down firmly,

In the up position, the applicant should pass the elbows over the knees then return until the shoulder blades touch the floor. Any resting must be done in the up position.

1.5 MILE RUN – Designed to measure cardiovascular capacity.
Applicants must be able to complete the 1.5 mile run within 14 minutes, 36 seconds.

Equipment: A stopwatch; an indoor or outdoor track or another suitable running area measured to 1.5 miles; testing forms to record data.

The applicant should refrain from smoking or eating for two hours preceding the test.

Allow adequate time prior to the

Allow adequate time prior to the test for stretching and warm-up exercises

During the administration of the test, the applicants can be informed of their lap times. If several applicants run at once, their individual times at the finish can be called out and recorded later.

An important consideration at the end of the run is the "cool down" period. The applicants should be cautioned about sitting or standing around immediately after the run to prevent venous pooling. They should be instructed to walk an additional five minutes or so in order to enhance venous return and aid in recovery.

HOW TO PREPARE FOR THE TESTS

Consult your physician prior to starting this exercise program. The following guidelines are presented based on a twelve (12) week period preceding screening.

Preparing for the PUSH-UPS (upper body strength):

Determine how many push-ups you can do in one (1) minute. At least three (3) times per week do three (3) sets of the amount you can do in one (1) minute.

Preparing for the SIT-UPS (muscular endurance).

The progressive routine is to do as many bent-leg sit-ups (hands folded across the chest with someone holding your feet) as possible in one minute. At least three (3) times per week do three (3) sets (three (3) groups of the number of repetitions you did in one (1) minute).

Preparing for 1.5 MILE RUN (cardiovascular capacity)

Below is a gradual schedule that would enable you to perform a maximum effort for the 1.5 mile run. If you can advance the schedule on a weekly basis, then proceed to the next level If you can do the distance in less time, then that is encouraged.

WEEK ACTIVITY DISTANCE,

(Week) (Miles) TIME (Minutes) (FREQUENCY)

2) Walk, (1.5), (25-29),(5)

1) Walk,(1),(17-20), (5)

3) Walk, (2),(32-35),(5)

4) Walk, (2), (28-30), (5) 5) Walk/Jog, (2), (27), (5)

6) Walk/Jog, (2), (26), (5)

7) Walk/Jog, (2), (25), (5)

8) Walk/Jog, (2), (24), (4)

9) Jog, (2), (23), (4) 10) Jog, (2), (22), (4)

11) Jog, (2), (21), (4)

12) Jog, (2), (20), (4)

Applicants must successfully pass this pre-employment physical ability examination. These tests have been validated and demonstrate the ability to perform job-related tasks necessary to carry out the essential functions of the position of state police officer. The tests described are graded as pass or fail; acceptance is based upon successfully passing all four measures.