

# CITY OF OREGON

## **POLICE CANDIDATE EXAMINATION INFORMATION**

**Thank you for requesting an application:**

**Please make note of the following REQUIRED forms:**

- Form 2018-01: Background Investigation Authorization**
- Form 2018-02: Medical Screening Examination**
- Form 2018-03: Personnel File Release**
- Form 2018-04: Test Result Waiver**
- Form 2018-05: Physical Agility Release of Liability Waiver**
- Form 2018-06: Waiver of Liability and Release Form**
- Form 2018-07: Job Description Acknowledgment Form**
- Application**

**It is also necessary to supply and return with the above forms the following items:**

- **Copy of High School diploma, or equivalent**
- **College Transcripts**
- **Copy of birth certificate or equivalent**
- **Copy of military record (DD214) if applicable**
- **Recent Photograph max 2" x 2" min 1" x 1"**

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FOR YOUR  
RECORDS**

# Oregon Police Department

Application No. \_\_\_\_\_

## Application for Employment

INSTRUCTIONS: Fill out this application completely and accurately. If your application is made out properly it may increase your chances of employment. All statements in your application are subject to verification. Incorrect statement(s) will bar or remove you from employment. If writing space provided is inadequate, use the continuation sheet at the end of this application and identify additional information by question number. Use the term "DNA" (does not apply) if the question does not apply.

~ Affix Photo Here ~

1. Name:			2. List any other names, aliases you have used, or been known by (include maiden name if applicable).	
Last:	First:	Middle:		
3. Home address (No. Street, City, State, Zip & County):			4. Cell Ph: (____) ____-____	5. Social Security No.:
			Email: _____	- - -

6. With whom do you live at the above address? List Full Names & Relationship:

7. Date of Birth (Month/Day/Year): ____/____/____  Used to assist us with your background investigation.	8. Are you a U.S. Citizen? Yes    No    (If "YES": Native Born    Naturalized    )
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9. List every member of your immediate family who are still living (include father, mother, sisters, and brothers).

Name	Relationship	Address	Occupation

10. Are you:      Single              Married              Separated              Widowed              Divorced

**EDUCATION**

11. List the various schools you have attended & other information requested.

Name & Address of School (Include City, State, & Zip Code)	No. Of Years Completed	Date(s) Attended	Graduate		Average Grade
			Yes	No	
<b>Grammar Schools:</b>					
<b>High Schools:</b>					
<b>College or University:</b>	No. Credit's Earned	Major/Minor	Full Time	Part Time	Degree(s) Attained
<b>Business College(s):</b>					
<b>Junior College(s):</b>					

12. Were you ever expelled or suspended from any school?      Yes      No

If "Yes" Explain:

13. List any other education not listed above:

14. Can you operate an automobile?      Yes      No

15. Do you possess a valid driver's license?      Yes      No      Driver's License No.:

If "Yes": Date of Expiration: \_\_\_\_/\_\_\_\_/\_\_\_\_      State of Issuance: \_\_\_\_\_

16. Has your license ever been suspended or revoked?      Yes      No      If "Yes" Explain:

17. Has your license ever been placed on probation?      Yes      No      If "Yes" Explain:

**RESIDENCES**

18. List all of your addresses, starting with your present address.

<b>From (Mo/Yr):</b>	<b>To (Mo/Yr):</b>	<b>Address of Residence</b>	<b>City, State, &amp; Zip Code</b>

19. Do you own or are you buying your home:      Yes      No  
If "Yes" Give Location:

20. Do you own or are you buying other real estate?      Yes      No  
If "Yes" Give Location:

**CRIMINAL HISTORY**

21. Have you ever been convicted of a crime?      Yes      No  
If "Yes" explain:

Date (mm/dd/yyyy):  
By Whom (Police Agency):

22. Have you ever been placed on probation?      Yes      No

Charge:

23. Have you ever been required to pay a fine in excess of \$100.00?      Yes      No  
If "Yes" Explain:

24. Have you ever been a victim of a crime?      Yes      No      Was the crime reported?      Yes      No

25. Have you ever been fingerprinted by another police agency other than for an arrest?      Yes      No

If "Yes" Explain:

**ACQUAINTANCES**

26. List three adults, not related to you & not former employers or references, who are friends, fellow students, or fellow workers.

(List only persons who you have seen frequently during the past year.)

<b>1.</b>	Name: ..... Address, City, State & Zip: ..... Occupation or Profession: ..... Business Address, City State & Zip: ..... In what capacity do you know this person? .....	Home or Cell Phone: ( ) - Business Phone: ( ) -
<b>2.</b>	Name: ..... Address, City, State & Zip: ..... Occupation or Profession: ..... Business Address, City State & Zip: ..... In what capacity do you know this person? .....	Home or Cell Phone: ( ) - Business Phone: ( ) -
<b>3.</b>	Name: ..... Address, City, State & Zip: ..... Occupation or Profession: ..... Business Address, City State & Zip: ..... In what capacity do you know this person? .....	Home or Cell Phone: ( ) - Business Phone: ( ) -

**MILITARY SERVICE**

27. Have you ever served in any Military Organization of the U.S.?      Yes      No      If "Yes" Branch? \_\_\_\_\_

Date of service: \_\_\_\_\_ to \_\_\_\_\_      Reserve Status: \_\_\_\_\_

28. What was your Service Serial No.? \_\_\_\_\_

29. Highest Rank Held? \_\_\_\_\_

30. Rank at Discharge? \_\_\_\_\_

31. Date of Discharge? \_\_\_\_\_

32. Type of Discharge:      Honorable      Dishonorable      Other

33. Are you registered for the Selective Service?      Yes      No

Selective Service Number: \_\_\_\_\_ Classification: \_\_\_\_\_

34. Are you now, or were you ever, a member of the National Guard?      Yes      No

If yes, give unit, location, grade, and duty assignment: \_\_\_\_\_

List any disciplinary action taken against you during your service in the military:

Make copies of all applicable service records including any discharge papers and attach to this application.

**EMPLOYMENT HISTORY**

35. Have you ever taken a civil service exam?                      Yes                      No

<b>If "Yes" Explain:</b>	<b>Agency:</b>	<b>Approx. Exam Date:</b>	<b>Pos. on List:</b>	<b>Status:</b>

36. List all jobs that you have held for the last ten years, including periods of unemployment. Put your present, or most recent job first. Include military service, in proper time sequence & temporary or part-time jobs.

1.	Employer's Name:	Name & Title of Supervisor:
	Phone No.: (        )	Type of Business:
	From (Date)                      To (Date)	
	Explain what your duties were (include exact title or position):	Reason For Leaving:
2.	Employer's Name:	Name & Title of Supervisor:
	Phone No.: (        )	Type of Business:
	From (Date)                      To (Date)	
	Explain what your duties were (include exact title or position):	Reason For Leaving:
3.	Employer's Name:	Name & Title of Supervisor:
	Phone No.: (        )	Type of Business:
	From (Date)                      To (Date)	
	Explain what your duties were (include exact title or position):	Reason For Leaving:
4.	Employer's Name:	Name & Title of Supervisor:
	Phone No.: (        )	Type of Business:
	From (Date)                      To (Date)	
	Explain what your duties were (include Exact title or position):	Reason For Leaving:
5.	Employer's Name:	Name & Title of Supervisor:
	Phone No.: (        )	Type of Business:
	From (Date)                      To (Date)	
	Explain what your duties were (include Exact title or position):	Reason For Leaving:

37. Indicate by number any employer you do not wish us to contact.

38. Explain your reason for applying for this position: (Please use continuation sheets if needed.)

**REFERENCES**

39. Fill in below the names of five adults not related to you & not former employers, who have known you for a period, preferably more than five years. All persons to whom you refer may be asked to appraise your character, ability, personality, and other qualities.

1	Name	Address	Cell Phone	
	Business Address	Occupation	Business Phone	Years Known
2	Name	Address	Cell Phone	
	Business Address	Occupation	Business Phone	Years Known
3	Name	Address	Cell Phone	
	Business Address	Occupation	Business Phone	Years Known
4	Name	Address	Cell Phone	
	Business Address	Occupation	Business Phone	Years Known
5	Name	Address	Cell Phone	
	Business Address	Occupation	Business Phone	Years Known

40. Person(s) to be notified in case of an emergency

Name	Address	Cell Phone	Relationship
Name	Address	Cell Phone	Relationship

- 41. Do you know of any reason that you could not pass a background check?    Yes    No
- 42. Have you ever been fired or asked to resign from a job?    Yes    No
- 43. Have you ever received disciplinary action from an employer?    Yes    No
- 44. Have you ever stolen from an employer?    Yes    No
- 45. Have you ever committed a crime for which you were not arrested?    Yes    No
- 46. Have you ever assisted someone in committing a crime?    Yes    No
- 47. Have you ever falsified a police report?    Yes    No
- 48. Have you ever accepted money not to report a crime?    Yes    No
- 49. Have you ever slept on the job?    Yes    No
- 50. Has any driver's license issued to you ever been suspended or revoked?    Yes    No
- 51. Have you ever used, sold, or otherwise handled in an illegal manner any controlled substance?    Yes    No

\*\* If you answered yes to any of the questions listed above, please write a brief explanation for that question on a separate sheet. List the question by number. If you are interviewed, you will be asked about any "yes" answers. Any "yes" answers will be closely examined during a background check. A "yes" answer does not automatically eliminate you from consideration for employment. Your omission of these facts will automatically eliminate you from consideration.





# CITY OF OREGON

## BACKGROUND INVESTIGATION AUTHORIZATION

I authorize and empower the City of Oregon, the Oregon Police Department and any consumer reporting agency, or other outside service company engaged by the City of Oregon for this purpose, now or subsequently, to obtain, prepare, use and furnish information concerning my current and former employment, education, credit, general reputation, health, personal characteristics and mode of living, through correspondence of personal interviews with neighbors, friends or associate or others with whom I am acquainted or who may have knowledge concerning any of the above items.

By my signature below, I hereby, authorize the Oregon Police Department to conduct a background investigation (including school, employer, credit, criminal, traffic, and other records) pursuant to my recent application for a position with the Oregon Police Department.

Upon written request I understand that the Oregon Police Department will provide me with information regarding the scope of the investigation if one is made.

\*Note: A copy, or facsimile of this form shall be treated as the original.

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(Signature)

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(Date)

**City of Oregon  
Oregon Police Department**

**AUTHORIZATION FOR**

**PERSONNEL FILE RELEASE**

By my signature below, I \_\_\_\_\_, hereby authorize the Oregon Police Department full and complete access to my employment personnel file (s) for any and all-past employers.

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

\_\_\_\_\_  
**Signature**

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

\_\_\_\_\_  
**Witness**

CITY OF OREGON

**TEST RESULT WAIVER**

I, THE UNDERSIGNED, UNDERSTAND THAT ALL TESTS AND THE RESULTS THEREOF BECOME THE PROPERTY OF THE CITY OF OREGON AND ARE NOT SUBJECT TO REVIEW.

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

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

# Oregon Police Department Agility Test Waiver and Release of Liability

I, \_\_\_\_\_, the undersigned, on behalf of myself, my heirs and next of kin,  
(Print Name)

personal representative, agents, insurers, successors and assigns (all hereinafter "Releasors") hereby FOREVER RELEASE, DISCHARGE AND COVENANT NOT TO SUE THE CITY OF OREGON ILLINOIS, its insurers, administrators, agents, directors, officers, state organizations, members, committees, volunteers, all employees, and any and all participants, all hereinafter "Releasee" from any and all liabilities, claims, demands, causes of action or losses of any kind or nature, past, present or future, direct or consequential that I may hereafter have for PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, arising out of my participation in, attendance at or traveling to and from the City of Oregon Police Department Agility Testing Sites or activity including, but not limited to, LOSSES CAUSED BY THE PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.

Releasor understands and acknowledges that participation in the Police Department Agility Test in general have inherent dangers that no amount of care, caution, training, instruction, supervision or expertise can eliminate. RELEASOR EXPRESSLY AND VOLUNTARILY ASSUMES ALL RISK OF PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH sustained while participating in, attending, preparing for or traveling to and from the City of Oregon Police Department Agility Testing Sites including the risk of PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.

Releasor acknowledges and fully understands that each participant including Releasor, will be engaging in activities that involve risk of serious injury, including permanent, temporary, total or partial disability, disfigurement, paralysis and any other losses to person or property, including death, and that severe social and economic losses may result not only from releasor's own action, inactions or negligence, but also from the actions, inactions or negligence of others. Further, Releasor acknowledges and fully understands that there may be other associated risks with such activities which are not known or not reasonably foreseeable at this time. Releasor acknowledges and affirms that he/she undertakes such action on activity under his/her own free will.

I ACKNOWLEDGE THAT I HAVE HAD SUFFICIENT OPPORTUNITY TO REVIEW THE PROVISIONS OF THIS DOCUMENT AND UNDERSTAND ITS PURPOSE, MEANING AND INTENT.

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

# Oregon Police Department



115 N. 3<sup>rd</sup> Street ♦ Oregon, IL 61061-1410

Phone: (815) 732-2803 ♦ Fax: (815) 732-7303

Website: [www.oregonpd.org](http://www.oregonpd.org) Email: [oregonpd@comcast.net](mailto:oregonpd@comcast.net)

## WAIVER OF LIABILITY AND RELEASE FORM

In consideration of the Oregon Police Department and the City of Oregon, Illinois, hereinafter referred to as the Agency, processing my application for employment, I, \_\_\_\_\_ hereby irrevocably agree to the following terms and conditions: Full Name (typed or printed)

1. The term “background investigation” as used in this document refers to any and all information and sources of information that the Agency, in its sole discretion, may deem necessary to obtain or contact, to determine my fitness as a candidate for employment with the Agency.
2. I hereby release from liability and promise to hold harmless under any and all possible causes of legal action any officer, agent, or employee of the Agency who may conduct my background investigation.
3. I hereby release from liability and promise to hold harmless under any and all possible causes of legal action, any and all person and entities who shall furnish any information or opinions to the officers, agents, or employees of the Agency who conduct my background investigation.
4. I authorize any person or entity contacted by the Agency’s officers, agents, or employees during the course of my background investigation, to furnish such officer, agents, or employees any information opinions they may have, and hereby expressly waive any and all legal privileges, the clergyman –penitent privilege, the husband-wife privilege, and the accountant – client privilege.
5. I hereby release from liability and promise to hold harmless, under any and all possible causes of legal action, the political subdivision, the Agency or any of its officers, agents or employees for any statements, acts or omissions in the course of my background check.
6. I expressly waive all of my legal rights and causes of actions to the extent that the Agency background check may violate or infringe upon these legal rights and causes of action.
7. I expressly agree that I will never, under any circumstances, attempt to obtain the results of my background investigation as conducted by the Agency, realizing such information must, of necessity remain confidential.

### DO NOT SIGN BEFORE READING

This release from liability given by me to the political division, the Agency, its officers, agents and employees, and all others as mentioned above, shall apply to my right of action of any nature whatsoever that might accrue to myself, my heirs, or my personal representative.

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

Date of birth: \_\_\_\_\_ SSN: \_\_\_\_\_

Driver’s License Number and State: \_\_\_\_\_

Date: \_\_\_\_\_ Witnessed by: \_\_\_\_\_



## City of Oregon

Job Description – Police Officer

Department – Police

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## Job Description: Police Officer

### General Statement of Duties

Performs a variety of public safety work providing emergency aid, security and protection to the citizens of the City of Oregon.

### Supervision Received

Works under the direction of the Chief of Police, Lieutenant, Police Sergeant and Police Corporal.

### Supervision Exercised

Supervision is not a normal responsibility of this position.

### Examples of Principal Duties:

1. On rotating shifts, patrols the city to aid in preventing crime and to enforce Federal, State and City laws.
2. Observes, reports and acts upon conditions conducive to crime and danger such as checking buildings, assisting other officers, enforcing traffic, making arrests, transporting prisoners and investigating crime(s).
3. Using own judgment, determines the nature of a call, investigates the circumstances and takes the necessary or prudent action.
4. Provides assistance to the public in emergency and non-emergency situations; administers first aid and requests appropriate medical response; performs crisis intervention in sensitive situations and domestic disputes; educates the public on laws and ordinances; assists citizens with complaints and inquiries and directs them to the appropriate authority.
5. Responds to emergency radio calls and investigates accidents, robberies, civil disturbances, domestic disputes, fights, drunkenness, missing persons, prowlers, abuse of drugs, etc; takes appropriate law enforcement action.
6. Prepares a variety of written and oral reports.
7. Investigates crimes, interviews witnesses, victims and suspects and provides feedback to the appropriate people concerning case status; collects and documents evidence.
8. Appears in court, and is available to testify in matters which the officer has knowledge of whether it be criminal or civil.
9. Maintains proficiency in the use of police related equipment.
10. Prepares and maintains legible, concise and understandable record of activities (i.e. notebook).

11. Performs special assignments related to investigations, crime prevention and traffic enforcement.

12. Performs other duties as assigned.

## **Recruitment Requirements**

### **Experience & Training**

Any combination equivalent to graduation from high school or GED program; must be 21 years of age; must be a U.S. citizen; have a valid Illinois driver's license; pass a background investigation verifying prior criminal convictions; must successfully complete the basic police academy and one-year probationary period. Probations period maybe extended as described in the labor contract. (Must pass written test, oral interview and medical physical).

### **Knowledge, Skills and Abilities**

Knowledge of City ordinances, civil service, State and Federal laws; content, intent and application of Illinois criminal law; adult and juvenile judicial procedures; civil and constitutional laws; Departmental policies and procedures; laws of arrest and search and seizure; techniques of interview and interrogation; criminal case preparation; crime scene management; oral and written communication skills.

Ability to prepare clear and concise written reports; communicate effectively, both orally and in writing; analyze dangerous situations rapidly and accurately before taking safe effective action; enforce federal, state and municipal laws; work with the public in a courteous respectful manner.

### **Necessary Special Qualifications**

Must possess, or be able to obtain by time of hire, a valid Illinois Driver's License without record of suspension or revocation in any state; ability to meet Department's physical standards; no felony convictions.

### **Working Conditions**

Work is performed in both office and field settings on a rotating shift schedule in all weather conditions.

### **Tools and Equipment Used**

Police car, police radio, handgun and other weapons as required, handcuffs, first aid equipment, personal computer including word processing software.

### **Physical Demands**

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is frequently required to sit, and talk or hear. The employee is occasionally required to stand; walk; use hands to finger, handle, or operate objects, controls, or tools listed above; reach with hands and arms; climb or balance; run, stoop, kneel, crouch, or crawl; and taste or smell.

The employee may be required to carry, drag, or restrain individuals from 50 to 300 pounds and lift in excess of 50 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception, and the ability to adjust focus.

**Vison:** Visual range with or without correction to 20/20 in one eye and 20/30 in the other eye with no color deficiencies.

**Hearing:** Hear in the normal audio range with or without correction. Able to hear in-person; as well as, distinguish radio and telephone conversations, recognize differences or changes in sound patters and loudness or pitch.

### **Hazards**

Conditions present high stress and threat to personal safety during periods of search and seizure and arrest; may be exposed to toxic materials, bloodborne pathogens and other infectious environments; have to deal with unruly or dangerous individuals, unsafe building sites and deadly force; may be required to extend work schedule during emergency situations.

### **Representation**

Fraternal Order of Police

*The above statements are intended to describe the general nature and level of work being performed by the persons(s) assigned to this job. They are not intended to be an exhaustive list of all duties, responsibilities and skills required to do this job. The approved class specifications are not intended to and do not infer or create any employment, compensation, or contract rights to any person or persons. This updated job description supersedes prior descriptions for the same position. Management reserves the right to add or change duties at any time.*

*The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.*

**By signing this form you certify that you are capable of performing all of the requirements of the position of Police Officer with the Oregon Police Department.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date



# **HOW WILL PHYSICAL FITNESS BE MEASURED?**

The Physical Fitness Test Battery consists of 4 basic tests.

## 1) SIT AND REACH TEST

This is a measure of the flexibility of the lower back and upper leg area. It is important area for performing police tasks involving range of motion and is important in minimizing lower back problems. The test involves stretching out to touch the toes or beyond with extended arms from a sitting position. The score is in the inches reached on a sit and reach box with 15 inches being at the toes.

## 2) ONE (1) MINUTE SIT UP TEST

This is a measure of the muscular endurance of the abdominal muscles. It is an important area for performing police tasks that may involve the use of force and is important area for maintaining good posture and minimizing lower back problems. The score is the number of bent leg sit-ups performed in 1 minute.

## 3) ONE (1) REPETITION MAXIMUM BENCH PRESS

This is a maximum weight pushed from the bench press position and measures the amount of force the upper body can generate. It is an important area for performing police tasks requiring upper body strength. The score is a ration of weight pushed divided by body weight.

## 4) 1.5 MILE RUN

This is a timed run to measure the heart and vascular systems' capability to transport oxygen. It is an important area for performing police tasks involving stamina and endurance and to minimize the risk of cardiovascular problems. The score is in minutes and seconds.

### MINIMAL PHYSICAL FITNESS PERFORMANCE REQUIRMENT CHART

Test	MALE				FEMALE			
	Age				Age			
	20-29	30-39	40-49	50-59	20-29	30-39	40-49-	50-59
Sit & Reach	16.0"	15.0"	13.8"	12.8"	18.8"	17.8"	16.8"	16.3"
1 Minute Sit Up	37	34	28	23	31	24	19	13
Maximum Bench Press	.98	.87	.79	.70	.58	.52	.49	.43
1.5 Mile Run	13:46	14:31	15:24	16:21	16:21	16:52	17:53	18:44

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