



## MARION POLICE DEPARTMENT

1001 W. DeYoung St.  
Marion, IL 62959  
Phone: 618-993-2124  
www.marionpolicedept.com

### POLICE OFFICER APPLICATION

The Marion Police Department accepts for employment and promotes its employees without regard to perceived or actual race, color, religion, sex, national origin, sexual orientation, age, marital status, military status, physical or mental handicap unrelated to ability to perform the essential job functions or any other status or class protected by federal, state, or local law. The Marion Police Department bases its hiring practices and promotions on merit, experience, education and other qualifications applied to all applicants and in accordance with the principles of equal employment opportunity and as required by any other applicable federal, state, or local law. The Marion Police Department complies with the American with Disabilities Act (ADA). Persons needing accommodations in the recruitment process should notify the City of Marion Human Resources Director in advance.

All information contained in or connected with this application will be considered personal and confidential and used only in conjunction with your possible employment by the Marion Police Department. Please furnish us with complete information as outlined in this application.

Read every question carefully and answer each question accurately. An applicant may be disqualified from further processing if he/she intentionally makes a false statement of a material fact, practices or attempts to practice any deception or fraud in his/her applications, or examination of appointment. Any false statements on this application will be considered sufficient cause for dismissal. Any misrepresentation on this application whether actual or by omission may disqualify you for consideration of employment by the Marion Police Department.

**THIS FORM IS A PART OF THE EXAMINATION PROCESS AND MUST BE COMPLETED IN ITS ENTIRETY  
and ALL REQUIRED DOCUMENTS MUST BE ATTACHED UPON SUBMISSION.**

See the [Minimum Qualifications](#).

You cannot be considered for the position unless you meet these requirements.

Any questions concerning the employment process should be directed to the Marion Police Dept. 1001 W. DeYoung St. Marion, IL 62959; telephone number (618) 993-2124, Asst. Chief Jody Wright.

City of Marion Police Department  
Entry Level Police Officer Application for Employment

Minimum Requirements and Qualifications

Applicants seeking entry level consideration to the position of Police Officer must meet the following minimum qualifications and requirements at the time of application:

- Must be a United States citizen.
- Individuals must be at least 20 years old, but not exceeding 35 years old.
- Education – High School diploma or equivalent thereof (GED).
- Valid Illinois Driver's License.
- Must agree to comply with all requirements and have the ability to pass all examination and training requirements of the position.
- Ability to furnish upon request, a copy of the following: a resume; any professional licenses; training certificates; documents confirming work experience; birth certificate; high school diploma or GED certificate; transcripts of higher learning; naval or military service board and discharge papers (DD-214); employee evaluations; and other employment related material as requested or required.

Selection Process

Each phase of the process is pass/fail and required to proceed to the next step.

- Pass written exam with score of 70 or above.
- Complete physical abilities assessment
- Interview with the Board of Fire and Police Commissioners.
- Interview by Police Chief and Designated City Officials.
- Character and background investigation and credit check.
- Complete any post-offer examinations including, but not limited to; psychological evaluation; medical examination; polygraph; and drug screening.
- All employment appointments are subject to a probationary period and a 2-year pre-employment contract.

Entry Level Police Officer Eligibility List

An entry level police officer eligibility list will be created from those successful applicants who submit all required application materials; and complete the above required steps in the entry level employment selection process.



Marion Police Department  
Entry Level Police Officer Application for Employment

Date Received: \_\_\_\_\_  
Initials: \_\_\_\_\_

COMPLETE & RETURN THE FOLLOWING PAGES. ATTACH ALL REQUIRED FORMS & DOCUMENTS.  
RETURN TO: MARION POLICE DEPARTMENT, 1001 W. DeYoung St., Marion, IL 62959 in person or  
by mail. NO faxed or emailed applications are accepted.

Name \_\_\_\_\_

Home Address \_\_\_\_\_

Best Number to Contact You: \_\_\_\_\_ Cell \_\_\_\_\_ Home \_\_\_\_\_

Email address (required for correspondence) \_\_\_\_\_

U.S. Citizen or Naturalized Citizen as of the date of submission of this application? YES \_\_\_\_\_ NO \_\_\_\_\_

Do you have a valid driver's license? YES \_\_\_\_\_ NO \_\_\_\_\_

Attach photocopy of Driver's License

Do you hold a valid Firearms Owners ID [FOID] card? YES \_\_\_\_\_ NO \_\_\_\_\_

Number: \_\_\_\_\_ Expiration: \_\_\_\_\_

**EDUCATION**

High School Name and City & State \_\_\_\_\_

Diploma or GED Certificate? YES \_\_\_\_\_ NO \_\_\_\_\_

**College / University Education:**

School Name, City & State \_\_\_\_\_

Major / Curriculum \_\_\_\_\_ Credit Hours Completed or Degree Earned \_\_\_\_\_

School Name, City & State \_\_\_\_\_

Major / Curriculum \_\_\_\_\_ Credit Hours Completed or Degree Earned \_\_\_\_\_

List any training, skills, professional licenses or certificates that you have that pertain to the position for which you are applying:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**City of Marion Police Department  
Entry Level Police Officer Application for Employment**

**PERSONAL HISTORY AND CONVICTION INFORMATION (for background investigation purposes)**

*You are not obligated to disclose criminal history records that have been sealed, impounded, or expunged.*

List all names or aliases you have used, or have been known by \_\_\_\_\_

Date of birth \_\_\_\_\_

Driver's license number \_\_\_\_\_ State \_\_\_\_\_ Expiration date \_\_\_\_\_

Have you ever had a driver's license in any other state? YES \_\_\_\_\_ NO \_\_\_\_\_ If YES, where? \_\_\_\_\_

Has your license ever been suspended or revoked, or have you ever been issued a judicial driving permit?  
YES \_\_\_\_\_ NO \_\_\_\_\_

If YES, please explain \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor in any jurisdiction? YES \_\_\_\_\_ NO \_\_\_\_\_

If YES, provide the following information for all convictions:

| Date of Offense | Jurisdiction | Type of Offense | Disposition of Case |
|-----------------|--------------|-----------------|---------------------|
|                 |              |                 |                     |
|                 |              |                 |                     |
|                 |              |                 |                     |

Have you ever been placed on probation? YES \_\_\_\_\_\* NO \_\_\_\_\_

Have you ever been the respondent or named in an order of protection in any state? YES \_\_\_\_\_\* NO \_\_\_\_\_

Have you ever used marijuana or any other illegal drug? YES \_\_\_\_\_\* NO \_\_\_\_\_

Have you ever been involved with the sale and/or distribution of illegal drugs? YES \_\_\_\_\_\* NO \_\_\_\_\_

Have you ever used misused or abused prescription drugs? YES \_\_\_\_\_\* NO \_\_\_\_\_

Have you ever been involved with the illegal sale and/or distribution of prescription drugs? YES \_\_\_\_\_\* NO \_\_\_\_\_

When was the last time you used illegal drugs? \_\_\_\_\_

When was the last time you used prescription drugs not prescribed to you? \_\_\_\_\_

\* EXPLANATION of any "YES" responses or additional details (attach additional sheet if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List all traffic citations received and accidents you have been involved in during the last seven (7) years:

| Date of Incident | Jurisdiction | Type of Offense | Disposition of Case |
|------------------|--------------|-----------------|---------------------|
|                  |              |                 |                     |
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**City of Marion Police Department  
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**LIST ALL FORMER ADDRESSES FOR THE PAST TEN (10) YEARS IN CHRONOLOGICAL ORDER**

- 1) Address \_\_\_\_\_  
 Dates of Residence: from Mo/Yr. \_\_\_\_\_ to Mo/Yr. \_\_\_\_\_
- 2) Address \_\_\_\_\_  
 Dates of Residence: from Mo/Yr. \_\_\_\_\_ to Mo/Yr. \_\_\_\_\_
- 3) Address \_\_\_\_\_  
 Dates of Residence: from Mo/Yr. \_\_\_\_\_ to Mo/Yr. \_\_\_\_\_
- 4) Address \_\_\_\_\_  
 Dates of Residence: from Mo/Yr. \_\_\_\_\_ to Mo/Yr. \_\_\_\_\_
- 5) Address \_\_\_\_\_  
 Dates of Residence: from Mo/Yr. \_\_\_\_\_ to Mo/Yr. \_\_\_\_\_

**EMPLOYMENT HISTORY**

List all employment you have had for the last ten (10) years, beginning with your current or most recent employer, including military experience and any period(s) of unemployment. Attach additional sheet if necessary.

From Mo/Yr. \_\_\_\_\_ to Mo/Yr. \_\_\_\_\_ Full time \_\_\_\_\_ Part time \_\_\_\_\_  
 Employer \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 Job title \_\_\_\_\_ Job duties \_\_\_\_\_  
 Supervisors name, title, & phone # \_\_\_\_\_  
 Last salary or pay rate \_\_\_\_\_ Reason for leaving \_\_\_\_\_

From Mo/Yr. \_\_\_\_\_ to Mo/Yr. \_\_\_\_\_ Full time \_\_\_\_\_ Part time \_\_\_\_\_  
 Employer \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 Job title \_\_\_\_\_ Job duties \_\_\_\_\_  
 Supervisors name, title, & phone # \_\_\_\_\_  
 Last salary or pay rate \_\_\_\_\_ Reason for leaving \_\_\_\_\_

From Mo/Yr. \_\_\_\_\_ to Mo/Yr. \_\_\_\_\_ Full time \_\_\_\_\_ Part time \_\_\_\_\_  
 Employer \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 Job title \_\_\_\_\_ Job duties \_\_\_\_\_  
 Supervisors name, title, & phone # \_\_\_\_\_  
 Last salary or pay rate \_\_\_\_\_ Reason for leaving \_\_\_\_\_



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**EMPLOYMENT HISTORY, cont.**

From Mo/Yr. \_\_\_\_\_ to Mo/Yr. \_\_\_\_\_ Full time \_\_\_\_\_ Part time \_\_\_\_\_  
 Employer \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 Job title \_\_\_\_\_ Job duties \_\_\_\_\_  
 Supervisors name, title, & phone # \_\_\_\_\_  
 Last salary or pay rate \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Have you ever received formal discipline during any prior employment or job positions such as an oral reprimand, written reprimand, or suspension? NO \_\_\_ YES \_\_\_ (explain below)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you been discharged or forced to resign from any employment (not including layoff)? NO \_\_\_ YES \_\_\_ (explain below)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**MILITARY SERVICE**

Are you a current member of the U.S. military service, including reserve forces or National Guard? YES \_\_\_ NO \_\_\_

If YES, what branch of service do you serve in? \_\_\_\_\_

Are you a Veteran of the U.S. military service, including reserve forces or National Guard? YES \_\_\_ NO \_\_\_

If YES, what branch of service did you serve in? \_\_\_\_\_

Were you Honorably Discharged? YES \_\_\_ NO \_\_\_ If NO, explain in detail

\_\_\_\_\_  
 \_\_\_\_\_

Were you ever convicted at a court-martial? YES \_\_\_ NO \_\_\_ If YES, explain in detail:

\_\_\_\_\_  
 \_\_\_\_\_



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**AREAS of EXPERIENCE**

Describe any duties you have performed that are customer service or community service related. Are you a member of any club, group, or organization that directly impacts or effects your current workplace or community?

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Describe any commendations and/or special achievements you have received:

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**INTEREST STATEMENT**

Please indicate your interest in becoming a police officer with the Marion Police Department and why you feel you are qualified to join the Marion Police Department (attach additional sheet if necessary):

Lined area for writing the interest statement, consisting of 28 horizontal lines.





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**REFERENCES**

Please list five (5) adults not related to you and not former employers, whom you have known for at least three (3) years. All persons to whom you refer will be asked to appraise your character, ability, experience, personality and other qualities. The Marion Police Department or its designee reserves the right to contact the references at any time.

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_  
 Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_ Business phone \_\_\_\_\_  
 Occupation \_\_\_\_\_ Number of years acquainted \_\_\_\_\_  
 Email address \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_  
 Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_ Business phone \_\_\_\_\_  
 Occupation \_\_\_\_\_ Number of years acquainted \_\_\_\_\_  
 Email address \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_  
 Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_ Business phone \_\_\_\_\_  
 Occupation \_\_\_\_\_ Number of years acquainted \_\_\_\_\_  
 Email address \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_  
 Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_ Business phone \_\_\_\_\_  
 Occupation \_\_\_\_\_ Number of years acquainted \_\_\_\_\_  
 Email address \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_  
 Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_ Business phone \_\_\_\_\_  
 Occupation \_\_\_\_\_ Number of years acquainted \_\_\_\_\_  
 Email address \_\_\_\_\_



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ACKNOWLEDGMENT

Read the following carefully before signing.

Acknowledgment: I, the undersigned, certify that I have read and fully comprehend this application for employment with the City of Marion in its entirety. I certify that the information provided on this application for employment and other submitted application materials is true and complete. I understand and agree that any incorrect statement, falsification, misrepresentation or omission of any information in connection with this application for employment or other submitted application materials, whenever or however discovered, will be sufficient reason not to hire and may result in discharge if hired. In submitting this application, I further understand that it becomes the property of the City and will not be returned to me.

I understand that submission of an application for employment does not obligate the City to engage in further review of my application for employment. I understand that nothing in this document constitutes an offer of employment or employment contract and establishes no obligation on the part of the City to employ me or for me to accept employment with the City. I understand that any offer of employment, either verbal or written, is conditional upon the successful completion of a drug screen and (if required for position) a physical exam.

I authorize investigation into my background, including, but not limited to, all statements contained in this application and any other document(s) submitted in connection therewith and permit the City of Marion or its officials, employees, appointees, contractors, agents or representatives - jointly termed "the Employer" - to obtain and use all information relating to my previous and current employment, education, military record, credit record, criminal conviction history, personal characteristics and all other information which may bear favorably or unfavorably upon my application for employment made to the City. I agree to cooperate in such an investigation. I release all parties from all liability for any damage that may result.

I authorize my current and/or previous employers, the educational institutions I attended, any other organizations and individuals to disclose information about me on the subjects covered by this application form, personnel files or related documents to the Employer. Any individual, educational institution, organization or business entity is hereby released from any and all liability for any damages, which may arise as a result of providing such information. I also agree to release the Employer, from any and all liability arising from the use of the information obtained through the investigation of my background and any action taken based on such information.

I authorize any employee or representative of the City to search LInX/N-DEX to obtain information regarding my qualifications and fitness to serve as a Police Officer. I understand that LInX/N-DEX is an electronic repository of information from federal, state, local, tribal, and regional criminal justice entities. This national information sharing system permits users to search and analyze data from the entire criminal justice cycle, including crime incident and investigation reports; arrest, booking, and incarceration reports; and probation and parole information. This release is executed with full knowledge, understanding, and consent that any information discovered in LInX/N-DEX may be used for the official purpose of conducting a complete employment background investigation. I also understand that any information found in LInX/N-DEX will not be disclosed to any other person or agency unless authorized and consistent with applicable law. I release the City from any liability or damage that may result from the use of information obtained from LInX/N-DEX.

I understand it is the policy of the City that the results of any examination or other inquiries made as part of any testing, background and/or screening process are the property of the City, and, as such, the City is under no obligation to share the results of any examination or other inquiries with the candidate, unless specifically required to do so by state or federal law. I further acknowledge that I have fully read this document and am fully aware of the consequences thereof. Being so informed, I knowingly and voluntarily execute this release. A duplicate of this form shall carry the same force as the original. This document is effective for two years from date signed..

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

MARION POLICE DEPARTMENT

1001 W. DeYoung St.  
Marion, IL 62959  
618-993-2124

The City of Marion collects the following information to evaluate its recruitment practices. Disclosure of information is on a voluntary basis. The information disclosed is confidential and will be maintained separate from your employment application. Submission or non-submission of this form shall not be used as a factor concerning eligibility for employment.

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Position applied for: ENTRY LEVEL POLICE OFFICER

Recruitment Date: OPEN

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Name \_\_\_\_\_

Gender       Male       Female

***Ethnicity and Race***

Hispanic or Latino

Non-Hispanic or Latino:

- American Indian / Native Alaskan
- Asian
- Native Hawaiian or Pacific Islander
- Black or African American
- White
- Two or More Races (non-Hispanic or Latino)

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***How did you FIRST learn of this opportunity?***

- The Blue Line website posting
- City of Marion posting (website, Facebook)
- Informed by a current City of Marion / Marion Police Department employee
- Informed by a co-worker in another Police Department / municipality
- Informed by a friend or a relative
- Other referral source – please indicate \_\_\_\_\_

MEDICAL EXAMINER'S CERTIFICATE

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone number: \_\_\_\_\_

This is to certify that I have made a medical examination of the above person and find that he/she is physically able to take part in a strenuous agility performance evaluation consisting of a distance run, push-ups, sit ups, as well as other tests of physical endurance. He/she will be participating in these exercises to demonstrate physical agility in performing the duties for the City of Marion Police Department.

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

Signature of Physician

Address: \_\_\_\_\_

\_\_\_\_\_

Dated: \_\_\_\_\_

APPENDIX A Physical Fitness Standards

1. SIT AND REACH TEST: This is a measure of the flexibility of the lower back and upper leg area. It is an 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 beyond the extended arms from the sitting position. The score is in the inches reached on a yard stick with 15" being at the toes.

|                     | MALE AGE    | MALE AGE    | MALE AGE    | MALE AGE    | FEMALE AGE  | FEMALE AGE  | FEMALE AGE  | FEMALE AGE  |
|---------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| TEST: Sit and Reach | 20-29       | 30-39       | 40-49       | 50-59       | 20-29       | 30-39       | 40-49       | 50-59       |
| 1-14-91             | 16.0        | 15.0        | 13.8        | 12.8        | 18.8        | 17.8        | 16.8        | 16.3        |
| <b>12-15-22</b>     | <b>14.4</b> | <b>13.0</b> | <b>12.0</b> | <b>10.5</b> | <b>17.0</b> | <b>16.5</b> | <b>15.0</b> | <b>14.8</b> |

2. ONE 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 an important area for maintaining good posture and minimizing lower back problems.

|                              | MALE AGE  | MALE AGE  | MALE AGE  | MALE AGE  | FEMALE AGE | FEMALE AGE | FEMALE AGE | FEMALE AGE |
|------------------------------|-----------|-----------|-----------|-----------|------------|------------|------------|------------|
| TEST: One Minute Sit Up Test | 20-29     | 30-39     | 40-49     | 50-59     | 20-29      | 30-39      | 40-49      | 50-59      |
| 1-14-91                      | 37        | 34        | 28        | 23        | 31         | 24         | 18         | 13         |
| <b>12-15-22</b>              | <b>33</b> | <b>30</b> | <b>24</b> | <b>19</b> | <b>24</b>  | <b>20</b>  | <b>14</b>  | <b>10</b>  |

3. ONE 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.

|                   | MALE AGE   | MALE AGE   | MALE AGE   | MALE AGE   | FEMALE AGE | FEMALE AGE | FEMALE AGE | FEMALE AGE |
|-------------------|------------|------------|------------|------------|------------|------------|------------|------------|
| TEST: Bench Press | 20-29      | 30-39      | 40-49      | 50-59      | 20-29      | 30-39      | 40-49      | 50-59      |
| 1-14-91           | 98%        | 87%        | 79%        | 70%        | 58%        | 52%        | 49%        | 43%        |
| <b>12-15-22</b>   | <b>88%</b> | <b>78%</b> | <b>72%</b> | <b>63%</b> | <b>51%</b> | <b>47%</b> | <b>43%</b> | <b>39%</b> |

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.

|                    | MALE AGE     | MALE AGE     | MALE AGE     | MALE AGE     | FEMALE AGE   | FEMALE AGE   | FEMALE AGE   | FEMALE AGE   |
|--------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| TEST: 1.5 Mile Run | 20-29        | 30-39        | 40-49        | 50-59        | 20-29        | 30-39        | 40-49        | 50-59        |
| 1-14-91            | 13:46        | 14:31        | 15:24        | 16:21        | 16:21        | 16:52        | 17:53        | 18:44        |
| <b>12-15-22</b>    | <b>14:00</b> | <b>14:34</b> | <b>15:24</b> | <b>16:58</b> | <b>16:46</b> | <b>17:38</b> | <b>18:37</b> | <b>20:44</b> |