



MARION POLICE DEPARTMENT
CONTENTS OF APPLICATION PACKET

1. Notice of important dates (cover sheet)
2. Outline of position (Informational only)
3. City of Marion Employment Application (Must be completed and returned)*
4. Certificate of Good Moral Character—three (3) required (Must be returned)*
5. Military Service Points Application
6. Disclosure to Applicant (Must be returned)*
7. Waiver for Work/Personnel Records (Must be returned)*
8. MBI Employment Disclosure Form (Must be returned)*
9. Merit Board Agreement Form (Must be returned)*
10. Agility Evaluation Release Form (Must be returned)*
11. Medical Examiner's Certificate (Must be returned)*
12. Voluntary Self-Identification Data Form
13. Agility Evaluation Standards Information (Informational only)

Items marked “must be returned” must be returned with the completed application packet to the Marion Police Department 1001 W. Deyoung Street Marion, IL 62959 by October 22, 2021.

NOTICE

Applications must be returned to the **CITY OF MARION POLICE DEPARTMENT** on or before:

5:00 P.M., Friday, October 22, 2021

Any packet received without **ALL** required materials / forms being completed will be rejected from consideration.

TESTING DATE AND TIMES

The Physical Agility Evaluation will be administered on:

**SATURDAY, November 6, 2021 at 8:00 AM
Marion High School Health Education Center
1700 Wildcat Drive
Marion, Illinois**

NOTE: It is recommended that you wear appropriate clothing for these activities.

The Written Exam will be administered immediately following on:

**SATURDAY, November 6, 2021 at 9:00 AM
Marion High School Health Education Center
1700 Wildcat Drive
Marion, Illinois**

*This exam is pass/fail. You must pass (70% or higher test score) to proceed further with the application process. You will be told immediately of your written test results.

BE ADVISED THAT THE MARION POLICE DEPARTMENT POLICE MERIT BOARD WILL BE ADMINISTERING THESE TESTS TO ESTABLISH A LIST OF POTENTIALLY QUALIFIED APPLICANTS.

OUTLINE OF POLICE OFFICER POSITION

The Fire and Police Merit Commission of the City of Marion is compiling a current eligibility list for the position of entry level Patrol officer, from which future hires may be made.

Below is an outline of the various points that you should know about the position with the City of Marion Police Department.

Please read the items carefully so there will be no misunderstanding of what the chosen candidate should expect and what will be expected of that candidate.

Residency: Patrolmen are required to live within 20 miles of Marion City Hall. Requirements to be met within 18 months of hire date.

Shifts: Patrolmen currently work four ten (10) hour shifts.

Salary, sick days, vacation days: Competitive salary range (2021) \$51,105- \$56,740; 12 paid holidays per year; longevity pay; advancement opportunities – Detective, K9, Narcotics, ERT; yearly uniform clothing allowance; family health, dental, and vision insurance; educational bonuses for Associate and Bachelor degrees; vacation days (up to 21 per year), sick leave accrual of 12 hours per month.

REQUIREMENTS

1. Applicants must be 21 years of age, but under 35 years of age.
2. Applicants must possess a minimum of a H.S. diploma or GED. (must provide proof)
3. Applicants must be a U.S. citizen.
4. Applicants must be of good moral character and good physical condition. Must have a valid IL Driver's license and not have been convicted of a felony, class A or class B misdemeanor.

PROCEDURE

1. All testing is mandatory. Applicants will be required to provide driver's license for admittance to any part of the procedure. Applicants shall further be required to sign in at all testing procedures. Failure to attend any part of the procedure shall result in the disqualification of the applicant.
2. Written examination. The written test will be given to all applicants and is pass/fail with a minimal score of 70 % needed to pass and proceed.
3. Physical agility evaluation.
4. Oral examination. Given to all applicants who have completed all previous procedures.
5. Fully completed application packets must be turned in to the Marion Police Department by date published. Failure to do so will disqualify applicants from consideration.
6. Thorough background investigation will be conducted on all applicants. Applicants shall be required to sign documents authorizing release of all background information to the Police and Fire Commissioners. This information shall be held in a strictly confidential capacity.
7. When returning your application packet, please include the following:
 - A. Copy of birth certificate.
 - B. Copy of military service discharge (if applicable).
 - C. Copy of DD form #214 (if applicable).
 - D. Copy of high school diploma or G.E.D. certificate.
 - E. Copy of official college degree(s) and college transcripts.
 - F. Proof of previous law enforcement experience and certificates.
 - G. All signed waivers and release forms. **MANDATORY**
 - H. Original medical release – completed and signed by physician.
 - I. Any additional information you may feel is beneficial in consideration, as well as resumes.

**NOTE: None of the above will be returned to you. Please submit copies.*

8. All applicants listed on eligibility list will be subject to medical examination and in-depth physiological examination.

9. Incomplete applications will be rejected and will disqualify candidates from testing.

10. Applicants who achieve minimum standards on ALL tests and evaluations will be put on a registry listing in alphabetical order. An appointment committee will then determine which successful applicant will be issued an offer of employment.

11. A thorough psychological exam and polygraph will be given prior to actual employment.

FIRE AND POLICE MERIT COMMISSIONERS



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



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

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 _____



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

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:



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

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?

Multiple horizontal lines for writing the response to the first question.

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

Multiple horizontal lines for writing the response to the second question.



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

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 _____



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

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.

Position applied for: ENTRY LEVEL POLICE OFFICER

Recruitment Date: OPEN

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)

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 _____

CERTIFICATE OF GOOD MORAL CHARACTER

To: Board of City of Marion Police and Fire Commissioners

I, _____, of _____,
(Printed Name) *(Complete Address)*

_____, do certify that I do not hold any elected or
(Telephone)
appointed position in municipal, county, or state government, nor in any
branch of the United States Government.

I have known Mr./Ms. _____ for the
past three (3) years and he/she is a person of good moral character, or correct
and orderly deportment, of temperate, industrious habits, and in my opinion,
is qualified in all respects of the position of Police Officer.

Additional comments:

I ___ am ___ am not related to the applicant.

I further certify that I am willing that this Certificate of Good Moral
Character be made public.

Signature

CERTIFICATE OF GOOD MORAL CHARACTER

To: Board of City of Marion Police and Fire Commissioners

I, _____, of _____,
(Printed Name) *(Complete Address)*

_____, do certify that I do not hold any elected or
(Telephone)
appointed position in municipal, county, or state government, nor in any
branch of the United States Government.

I have known Mr./Ms. _____ for the
past three (3) years and he/she is a person of good moral character, or correct
and orderly deportment, of temperate, industrious habits, and in my opinion,
is qualified in all respects of the position of Police Officer.

Additional comments:

I ___ am ___ am not related to the applicant.

I further certify that I am willing that this Certificate of Good Moral
Character be made public.

Signature

MILITARY SERVICE POINTS

To: City of Marion Police and Fire Commissioners

Commissioners:

I, _____, do hereby state that:

_____ I desire to use my military service points toward the examination for police officer with the City of Marion.

_____ I was not in the service.

_____ I do not wish to use my service points.

Date: _____

Applicant

Note: If you desire to use military service points, you must furnish us with a copy of your service discharge and DD Form #214.

DISCLOSURE TO APPLICANT

The City of Marion, Il. may obtain a consumer report (commonly known as a credit report) for employment purposes.

The Fair Credit Reporting Act provides:

A person (e. g., City) may not procure a consumer report, or cause a consumer report to be procured, for employment purposes with respect to any consumer unless:

- A. A clear and conspicuous disclosure has been made in writing to the consumer at any time before the report is procured or caused to be procured, in a document that consists solely of the disclosure, that a consumer report may be obtained for employment purpose; and
- B. The consumer has authorized the procurement of the report by that person.

AUTHORIZATION

I, the undersigned, hereby authorize in writing the procurement of a consumer report by the City of Marion, Il.

DATED: _____

SIGNATURE

WAIVER FOR WORK/PERSONNEL RECORDS

DATE: _____

TO WHOM IT MAY CONCERN:

I respectfully request that you forward to the Marion Police and Fire Commissioners any and all information that you may have concerning me, my work record or my reputation.

Please give any information that may appear in my personnel file. This information is to be used to determine my qualifications and fitness for the position I am seeking with the Marion Police Department.

I hereby release you and/or your employer from any liability and damage of any nature as a result of furnishing the information requested.

Signature _____

MBI EMPLOYMENT DISCLOSURE & RELEASE OF PERSONAL HISTORY FORM

In connection with your application for employment, we may procure a consumer report on you as part of the process of considering your candidacy as an employee. In the event that information from the report is utilized in whole or in part in making an adverse decision with regard to your potential employment, before making the adverse decision, we will provide you with an address to obtain copy of the consumer/credit report and a description in writing of your rights under the law.

Please be advised that we may also obtain an investigative report including information as to your character, general reputation, personal characteristics, credit history, criminal history and mode of living. This information may be obtained by contacting your previous employers, local and/or state law enforcement authorities or reference supplied by you. Please be advised that you have the right to request in writing, within a reasonable amount of time, that we make a disclosure of the nature and scope of the information requested. Such disclosure will be made to you within five days of the date on which we receive the request from you within five days of the time the report was first requested.

I, _____ with the intention of binding myself, my heirs, executors, administrators, and assigns, release and discharge Midwest Backgrounds, Inc. ("M.B.I."), its officer, officials, employees and agents and all persons, companies or agencies retained by M.B.I. to perform the investigation of my personal history from all claims, demands, actions, judgments and executions which I ever had, or now have, or may have, or which my heirs, executors, administrators, or assigns may have, or claim to have against M.B.I., its officer, officials, employees and agents, and all persons, companies, or agencies retained by M.B.I. to perform the investigation of my personal history arising out of the performance of any and all personal history investigation.

M.B.I. is also hereby authorized to make any review, inquiry or investigation into my personal, professional, residential, past employment including worker's compensation filings, credit and/or criminal history (hereinafter referred to as "personal history") through any agency, company or person that may retain information regarding such categories. The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. You will find these rights summarized on the attached supplement sheet to the document.

I hereby release all law enforcement agencies, department of labor aka. Worker's compensation agencies, employers, landlords, and their officials, employees or representatives, from any and all liability for any injury or damage that may result from furnishing any personal history to M.B.I.

I do hereby authorize and request all local, state and/or federal law enforcement agencies, prior employers, prior landlords or property manager, credit bureaus, and any other agency or person that may have information relating to my character, general reputation, personal characteristics, worker's compensation claim filings, driving record and mode of living, to release any and all requested information for my personal, professional, employment, residential and/or criminal history to M.B.I. upon M.B.I.'s request. I hereby release and hold harmless all aforementioned parties from any cause of action or liability that may arise for any personal injury or damage that may result from furnishing the same to M.B.I.

PLEASE WRITE LEGIBLY

APPLICANTS PRINTED NAME _____

Last Name First Name Middle

OTHER NAMES KNOWN BY _____

DATE OF BIRTH _____ SOCIAL SECURITY NUMBER _____

APPLICANTS ADDRESS _____

CITY _____ STATE _____ ZIP _____

DRIVER'S LICENSE NUMBER _____ STATE ISSUED _____

By initialing, I understand that the following information is for the exclusive use of M.B.I. to acquire my accurate personal history, and by no means will an employment decision be based on this information.

_____ Initials

(Circle One) MALE FEMALE Race _____

By my signature below, I hereby authorize Midwest Backgrounds, Inc. to obtain my personal history I hereby state that I have read this document in detail and clearly understand the terms and rights that I have granted to M.B.I. for the collection and release of the aforementioned information.

SIGNATURE OF APPLICANT _____ DATE _____

Give copy with Summary of Rights to applicant. Retain copy for your files

AGREEMENT

To: Board of Police & Fire Commissioners City of Marion, Illinois

I hereby agree to abide by all rules and regulations of the Board of Police and Fire Commissioners for the City of Marion, IL during and after taking the examination, and during any probationary period which might be applicable as a regular member of the Marion Police Department.

Dated this _____ day of _____, 20_____.

Signature_____.

AGILITY EVALUATION

RELEASE OF ALL LIABILITIES

I hereby release and discharge the City of Marion, a municipal corporation, its officers, servants, agents and employees of, and from any and all claims, demands and liabilities to me and on account of any and all injuries, losses and damages to my person that may have been caused by, or may at any time arise, as the result of a certain Police Department, Examination Agility Evaluation, conducted by the Board of Police and Fire Commissioners of said City of Marion, the intention hereof being to completely, absolutely, and finally release said City of Marion and its officers, servants, agents and employees of and from any and all liability, arising wholly or partially from the cause aforesaid.

Dated at Marion, Illinois this _____ day of _____, 20_____.

Signature of Examinee

Signature of Witness

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: _____

Voluntary Self-Identification Data

We consider all applicants for positions without regard to race, religion, national origin, sex, citizenship, age, mental or physical disability, or sexual preference. In order to comply with applicable requirements for Federal government recordkeeping and reporting, and to ensure that the City of Marion meets EEOC legal requirements, the following information is being included in the Application for Employment for the City of Marion. Completion of this form is strictly voluntary. This information will not affect the hiring process in any way, nor will there be any negative personnel decision if the applicant does not fill out this form. This form will not be kept with your personnel file. Should you have questions about the information contained in this form, you may contact the Human Resource Office, located in City Hall. Thank you for your cooperation.

Sex Male Female

Race Caucasian
 Hispanic
 African American
 Native American (American Indian)
 Asian
 Hawaiian/Pacific Islander
 Other
 Two or More Races (please specify)

Veteran's status

veteran
 veteran, disabled

Other disability status:

What Are the Standards?

- The actual performance requirement for each test is based upon norms for a national population sample.
- The applicant must pass every test.
- The required performance to pass each test is based upon age (decade) and sex. While the absolute performance is different for the eight categories, the relative level of effort is identical for each age and sex group. All recruits are being required to meet the same percentile range in terms of their respective age/sex group. The performance requirement is that level of physical performance that approximates the 40th percentile for each age and sex group.

POWER CHART

TEST	MALE				FEMALE			
	20-29	30-39	40-49	50-59	20-29	30-39	40-49	50-59
Sit and 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 Ratio	.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