



Department of
Public Safety

General Order No. 22
Enclosure No. 1

Application For Employment

Emmett Charter Township is an equal opportunity employer and shall consider all qualified candidates for all positions without regard to race, color, sex, religion, national origin, age, height, weight, marital status, disability which is unrelated to an individuals ability to perform the duties of a particular job, or any other protected category.

IMPORTANT NOTICE TO A PUBLIC SAFETY APPLICANTS: If you are interested in employment as a Full-Time Public Safety Officer for Emmett Charter Township, you must be qualified per the Michigan Commission on Law Enforcement Standards (MCOLES) BEFORE employment. Your application must be accompanied by:

1. MCOLES certificate if you are already a certified police Officer
2. MFFTC Fire fighter I and II certificates & LARA Michigan valid Medical First Responder MFR Certification or equivalent
3. A completed Supplemental questionnaire for Sworn Officers.

Part-time (Police and (or) Firefighters: You MUST have MCOLES Certification or be certifiable in the State of Michigan for part time POLICE. Firefighter I and II Certification or equivalent with a valid minimal MFR required for FIREFIGHTERS

ALL APPLICANTS: Careful and thoughtful completion of this application is an important step in your consideration of individuals for employment. Please complete the entire application. Print in ink. Ask for an extra piece of paper if you need to clarify any responses. Your application must also specify the position for which you are applying. Stating that you will do "ANYTHING" is indefinite and may result in your application not being accepted by the employer. Your application will be considered for sixty (60) days.

YOU MUST ANSWER ALL QUESTIONS COMPLETELY. FAILURE TO DO SO WILL RESULT IN REJECTION OF YOUR APPLICATION AND YOU WILL NOT BE CONSIDERED FOR EMPLOYMENT.

Position Applied For:

Full Time Certified Public Safety Officer Position (Police/Fire/EMS)

Part Time Certified Public Safety Officer Position (Police Officer)

Fire Fighter Public Safety Officer Position (Firefighter/MFR)

Non-Certified (Reserve) Public Safety Officer Position

Today's Date: _____ Time: _____ Am Pm

Name: _____
Last First Middle

Address: _____
Street City State Zip Code Length of Time Living There

Previous Address: _____
Street City State Zip Code Length of Time Living There

Telephone Number: _____ Social Security No. _____

Driver's License No. _____ State: _____

If applying only for part-time, what days and hours are you available?
Circle All That Apply: Hours:
 Mon Tue Wed Thu Fri Sat Sun _____

Are you a relative to any Emmett Charter Township elected official or employee? Yes No

If Yes: _____
Name Relationship

Are you under 18 years of age ? (If yes, attach work permit) Yes No

Are you currently working ? Yes No

Are you on lay-off ? Yes No

EDUCATION

	High School	Vocational/Technical	College	Graduate School
School Name City, State				
Did you Graduate (If not, credit hours completed)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Degree/Certificate				
Major/Minor				

Describe any specialized training, apprenticeships, internships, skills, licenses, certificates, and other extra-curricular activities that pertain to the position(s) for which you are applying.

List professional, trade, business group memberships and offices held and volunteer work. (excluding groups the name and character of which indicate race, color, sex, religion, national origin, age, height, weight, marital status, disability which is unrelated to an individuals ability to perform the duties of a particular job, or any other protected class)

PUBLIC SAFETY TRAINING

Check all that apply

LAW ENFORCEMENT - Certification REQUIRED

- I am/was employed as a law enforcement officer and possess a valid MCOLES certification. (Attached)
- I am a pre-service academy graduate eligible for MCOLES certification.
- I am currently enrolled as a Law Enforcement pre-service academy student. Graduation Date: _____
- I am/was employed as a law enforcement officer in another state and I am eligible for certification in Michigan.

FIRE FIGHTING & EMS - Certification REQUIRED

- I am/was employed as a fire fighter and possess a valid MFFTC Fire Fighter I certification. (Attached)
- I am/was employed as a fire fighter and possess a valid MFFTC Fire Fighter II certification. (Attached)
- I am a pre-service academy graduate eligible for MFFTC Fire Fighter I certification.
- I am a pre-service academy graduate eligible for MFFTC Fire Fighter II certification.
- I am currently enrolled as a Fire Fighter pre-service academy student. Graduation Date: _____ with (Circle One) FFI - FFII
- I am/was employed as a fire fighter in another state and I am eligible for certification in Michigan.
- I am currently enrolled as a Medical First Responder (MFR) or above student. Graduation Date: _____ Level: _____
- I currently possess a valid medical license in Michigan from LARA at the following level (Circle) MFR EMT EMT-Paramedic

EMPLOYMENT HISTORY

Employer	Dates		Work Performed
	From	To	
Address & Telephone			
	Hourly Rate/Salary		
Job Title	Start	Final	
Supervisor			
Reason for leaving			

Employer	Dates		Work Performed
	From	To	
Address & Telephone			
	Hourly Rate/Salary		
Job Title	Start	Final	
Supervisor			
Reason for leaving			

Employer	Dates		Work Performed
	From	To	
Address & Telephone			
	Hourly Rate/Salary		
Job Title	Start	Final	
Supervisor			
Reason for leaving			

Employer	Dates		Work Performed
	From	To	
Address & Telephone			
	Hourly Rate/Salary		
Job Title	Start	Final	
Supervisor			
Reason for leaving			

Employer	Dates		Work Performed
	From	To	
Address & Telephone			
	Hourly Rate/Salary		
Job Title	Start	Final	
Supervisor			
Reason for leaving			

AGREEMENT AND UNDERSTANDING

PLEASE READ CAREFULLY

1. **CERTIFICATION OF TRUTHFULNESS** - I certify that the information on this application are truthful, made without evasion, and is complete and correct to the best of my knowledge. I understand that falsification, misrepresentation or omission of any information submitted in connection with my application or interview, whether in this document or not, may result in rejection of my application or, if hired, in dismissal, regardless of when discovered.

Signature _____ Date _____

2. **AUTHORIZATION FOR EMPLOYMENT/EDUCATIONAL INFORMATION** – I authorize the references listed in the Application for Employment, and any prior employer, educational institution, or any other persons or organizations to give Emmett Charter Township any and all information, or any other pertinent information, they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing any lawful information to Emmett Charter Township. I waive written notice from my current employer and from any of my former employers regarding the disclosure of disciplinary reports, letters of reprimand, or other notices of disciplinary action contained in my personnel records. This waiver is made pursuant to the Bullard-Plawecki Employee Right-to-Know Act.

Signature _____ Date _____

3. **AUTHORIZATION TO OBTAIN INFORMATION** - I authorize the references and current and former employers and their agents listed in this application to give you any and all information concerning my current and previous employment and any pertinent information they may have (even if more than four (4) years old) and release all parties from any liability for any damages that may result from furnishing same to you.

Signature _____ Date _____

4. **EMPLOYMENT AT WILL** – If I am hired, in consideration of my employment, I agree to abide by the rules and policies of Emmett Charter Township including any change made from time-to time, and agree that, subject to the provisions of any written agreement to the contrary, my employment and compensation can be terminated with or without cause, and with or without notice, at any time, at the option of either Emmett Charter Township or myself. I understand that no manager or other representative of Emmett Charter Township other than the Township Supervisor, has any authority to enter into any agreement for employment for any specific or indefinite period of time, or to make any agreement contrary to the foregoing. Any such agreement made by the Township Supervisor must be made in writing to be effective.

Signature _____ Date _____

5. **PHYSICAL EXAMINATION, DRUG AND ALCOHOL TESTING** – I agree that if a job offer is made to me I will, before commencing employment, take a physical examination and authorize Emmett Charter Township or its designated representative(s) to withdraw specimen(s) of my blood, urine or hair for chemical analysis. One purpose of this analysis is to determine or exclude the presence of alcohol, drugs or other substances. I understand that decisions concerning my employment will be made as a result of these tests. I further authorize any physicians or entity conducting such testing to release the results of such testing to Emmett Charter Township.

Signature _____ Date _____

6. **NEED FOR ACCOMMODATION** – If I am a person with a disability who requires an accommodation to perform the job, I must notify Emmett Charter Township of that need within 182 days after I knew or reasonability should have known that an accommodation was needed. Failure to do so will preclude me from making a claim that Emmett Charter Township has not accommodated me as required by law.

Signature _____ Date _____

7. **LIMITATION ON RESPONSE** - I understand that due to the requirement of off duty call back that would require a mobilization of personnel in emergencies, I will be required to live within a ten (10) minute response radius of the township limits of Emmett Charter Township. Further, based on a conditional offer of employment and your acceptance of that offer, I will abide by this requirement within 6 months of my first day of work.

Signature _____ Date _____

8. **PSYCHOLOGICAL/PHYSICAL TESTING** – If offered employment, I agree to submit to any psychological or physical testing which may be necessary to determine my ability to perform the job for which I am being considered. I further authorize any physician or entity conducting such medical examination to release the results of such examination to Emmett Charter Township.

Signature _____

9. **DRIVING RECORD CHECK** – If applying for a position that requires driving an Emmett Township vehicle, I authorize Emmett Charter Township and its agents the authority to make investigations and inquiries of my driving record.

Signature _____ Date _____

AGREEMENT AND UNDERANDING CONTINUED

10. FRINGE BENEFITS – In accepting employment with Emmett Charter Township, I agree to accept all fringe benefits when eligible as provided now or in the future. I understand that it is my responsibility to provide documentation for verification of eligibility for fringe benefits as well as information regarding mailing address, telephone numbers or contact arrangements, withholding exemptions and dependent information. Emmett Charter Township shall rely on the most recent information for all purposes.

Signature _____ Date _____

11. CRIMINAL RECORDS CHECK – I agree to execute an authorization for Emmett Charter Township to secure criminal conviction history from the appropriate law enforcement agency should Emmett Charter Township determine it is necessary to do so.

Signature _____ Date _____

12. AUTHORIZATION TO WORK – If I am selected for hire, I will be offered employment provided I verify that I am authorized to work as required by the Immigration Reform and Control Act of 1986.

Signature _____ Date _____

13. CONSIDERATION OF EMPLOYMENT – I understand that my application will be considered pursuant to the Emmett Charter Township’s normal procedures for a period of sixty (60) days. If I am still interested in employment thereafter, I must reapply.

Signature _____ Date _____

14. PROTECTED DISABILITY – I also understand that if I have a protected disability that affects my ability to do the job I seek, I may ask Emmett Charter Township to attempt to make a reasonable accommodation for it. I must make my request in writing to the Township Supervisor as soon as possible after the date I know that accommodation is needed.

Signature _____ Date _____

15. LIMITATIONS TO LITIGATION – I agree that any lawsuit against the Township arising out of my employment or termination of employment, including but not limited to, claims arising under the State or Federal Civil Rights statutes, must be filed within one year of the event giving rise to the claims or be forever barred. I waive any limitations period to the contrary.

Signature _____ Date _____

I HAVE READ, UNDERSTAND AND AGREE TO THE TERMS OF EACH OF THE ABOVE FIFTEEN (15) INDIVIDUAL STATEMENTS, AS INDICATED ABOVE.

Signature _____ **Date** _____



Emmett Charter Township Department of Public Safety

SUPPLEMENTAL QUESTIONNAIRE FOR SWORN OFFICERS

Name (print): _____

The following knowledge, skills and abilities are minimum qualifications for this position. You must possess all of them in order to qualify for further consideration as a sworn Public Safety Officer candidate. Please indicate your knowledge, skills and abilities by marking Yes or No below.

Yes	No		Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Read and interpret complex technical documents written in English, such as diagrams, manuals, and textbooks?	<input type="checkbox"/>	<input type="checkbox"/>	Willing and able to travel locally and out-of-state?
<input type="checkbox"/>	<input type="checkbox"/>	Write clearly, concisely, and legibly, using correct English grammar and spelling.	<input type="checkbox"/>	<input type="checkbox"/>	Willing to attend meetings and classes while off duty?
<input type="checkbox"/>	<input type="checkbox"/>	Willing to work: <ul style="list-style-type: none"> · Irregular hours, days and shifts; · Overtime; · On-call; · 24-hour shifts; · Any location. 	The following constitute some of the essential functions of the position of Public Safety Officer. Are you both willing and able to:		
<input type="checkbox"/>	<input type="checkbox"/>	Willing to carry a firearm?	<input type="checkbox"/>	<input type="checkbox"/>	Pull the trigger of a firearm with either hand;
<input type="checkbox"/>	<input type="checkbox"/>	Willing to use approved weapons, including (but not limited to) firearms and batons, if justified by laws, policies and procedures?	<input type="checkbox"/>	<input type="checkbox"/>	Apply sufficient force to an individual to restrain or subdue that individual;
<input type="checkbox"/>	<input type="checkbox"/>	Willing to comply with Department grooming standards and to wear a uniform?	<input type="checkbox"/>	<input type="checkbox"/>	Squat and crouch;
<input type="checkbox"/>	<input type="checkbox"/>	Willing and capable, both physically and mentally, to work under adverse conditions, such as fumes, gases, noise, dust, odors, darkness, smoke, crowds, dampness, confined spaces, alone for long periods of time, heights; and severely decomposed, burnt, or dismembered bodies?	<input type="checkbox"/>	<input type="checkbox"/>	Crawl, walk, run and stand;
<input type="checkbox"/>	<input type="checkbox"/>	Willing to enforce all laws, policies, and procedures?	<input type="checkbox"/>	<input type="checkbox"/>	See long and short distances during daylight and darkness, and in dark and smoky environments;
<input type="checkbox"/>	<input type="checkbox"/>	Willing to take the life of another, if justified by laws, policies, and procedures?	<input type="checkbox"/>	<input type="checkbox"/>	Hear radio transmissions, long range conversations and other communications when obscured by background noise;
<input type="checkbox"/>	<input type="checkbox"/>	Willing to train other employees?	<input type="checkbox"/>	<input type="checkbox"/>	Speak on radio and loudspeaker;
<input type="checkbox"/>	<input type="checkbox"/>	Willing to perform routine work to completion?	<input type="checkbox"/>	<input type="checkbox"/>	Smell odors;
			<input type="checkbox"/>	<input type="checkbox"/>	Freely use both hands and arms;
			<input type="checkbox"/>	<input type="checkbox"/>	Drive a motor vehicle under both normal and emergency conditions;
			<input type="checkbox"/>	<input type="checkbox"/>	Exercise the required physical capabilities while wearing a uniform and equipment weighing up to 60 pounds or more;
			<input type="checkbox"/>	<input type="checkbox"/>	Speak with a wide variety of people, using tact, self-restraint, judgment and strategy?

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Is there any illegal drug, narcotic or controlled substance that you have ingested, inhaled, or injected into your body within the past 2 years?
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been convicted of a crime of violence including, but not limited to, battery or domestic violence?
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been convicted of a crime that is equivalent to a felony as defined by Michigan statute?
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been found guilty of a civil offense involving dishonesty or breach of trust, including, but not limited to, fraud or misappropriation?

CERTIFICATION

I certify that the above information is true and correct and that I have not deliberately falsified or omitted any information from this supplemental application. I also understand that if I am selected to continue in the selection process, I will be required to participate in the full selection process, which I hereby agree to. I further understand that I will be required to submit proof of age, U.S. citizenship, or my application for citizenship, and my legal right to work in the United States prior to being appointed to a sworn position.

Signature of Applicant: _____

Date: _____