

Carroll Police Department



Employment Application

Applicant Name _____

Deadline to Return Application: January 31, 2025

Mail or deliver to:
Carroll Police Department
112 E. 5th St.
Carroll, IA 51401
police@cityofcarroll.com

*****IMPORTANT*****

Incomplete application, failure to follow instructions and/or provide documentation will automatically disqualify applicant from further consideration in application process.

Read these instructions carefully before proceeding.

Failure to follow instructions will result in disqualification!

IT IS ESSENTIAL THAT ALL INFORMATION BE CORRECT AND COMPLETE!

Your application will be used as a basis for a background investigation that will determine your qualifications for a position with the Carroll Police Department.

GENERAL REQUIREMENTS

To be a police officer in the [State of Iowa](#), a person must be certified by the [Iowa Law Enforcement Academy](#) (ILEA). The Iowa Legislature has given ILEA authority "to set standards for the law enforcement service" in the State of Iowa. If a person cannot or will not meet these standards, they cannot be certified. Local jurisdictions may use stricter criteria than ILEA to select police officer candidates. A detailed explanation for the minimum standards for Iowa law enforcement officers can be found in the "Code of Iowa," Chapters [80B](#) & [400](#), plus the "Iowa Law Enforcement Academy's Administrative Rules." Some of the criteria for Carroll police officers are as follows:

All applicants must:

- Be able to perform the essential functions of the job with or without reasonable accommodations.
- Have reached the age of 21 years by the established date of the written examination.
- All Carroll full-time officers will become members of the Municipal Fire and Police Retirement System of Iowa. Mandatory retirement age is 65. (See [Chapter 411](#), Code of Iowa)

- Be a graduate of an accredited high school, or possess an equivalency certificate (GED).
- Be a citizen of the United States and a resident of the State of Iowa or intends to become a resident upon being employed. (The Chief of Police will establish reasonable maximum distances outside of the corporate city limits in which police officers must live).
- Is not by reason of conscience or belief opposed to the use of force when appropriate or necessary to fulfill his/her duties.
- Be able to speak, read, and write the English language.
- Not be addicted to alcohol or drugs. The City of Carroll has a vital interest in maintaining safe, healthful, and efficient working conditions for its employees. Being under the influence of a drug or alcohol poses serious safety and health risks, not only to the user, but to all those who work with or come into contact with the user. The possession, use, or sale of an illegal drug or alcohol in the workplace poses unacceptable risks to the safe, healthful, and efficient operations.
- Be of good moral character. (This implies that the conduct or character of any applicant must be such that his/her job performance as a police officer would not be impeded in any manner.)
- Not have been convicted of a felony or a crime involving moral turpitude. Moral turpitude is defined as "an act of baseness, vileness, or depravity in the private and social duties that a person owes to another person, or to society in general, contrary to the accepted and customary rule of right and duty between person and person." It might include "justice, honesty, or good morals." It might include "income tax evasion, perjury, assault, theft, indecent exposure, sex crimes, conspiracy to commit a crime, domestic abuse, stalking, illegal drug sales, or any offense in which a weapon was used in the commission of the crime."
- Must have a valid Iowa driver's or chauffeur's license at the time of employment.
- Be able to pass a physical fitness test including push-ups, sit ups, and a 1.5 mile run. Minimums are on page 5.
- Following hire, officers of the Carroll Police Department may not smoke or use any other tobacco product while on or off duty. This is a condition of employment.

Application Instructions:

The ability to follow directions and complete paperwork properly is an important responsibility of a police officer.

1. Your application should be printed/typed legibly in ink.
2. Answer ALL questions completely. If a question does not apply to you, enter "N/A" in the space provided.
3. Avoid errors by reading the directions carefully before making entries on the form. Be sure your information is correct and in sequence before you begin.
4. YOU are responsible for obtaining COMPLETE and VALID addresses (including zip codes). You are also responsible for providing valid phone numbers where requested.
5. If there is insufficient space on the form, attach extra sheets. Be sure to reference the relevant section and question on any supplemental pages or attachments.
6. If you have any questions concerning this form, please contact the police department at 712-792-3536.
7. The attached "Authorization for Release of Information" form must be completed and signed.
8. **Copies of the following documents shall be included with your application if applicable:**
 - Photocopy of your driver's license**
 - High school transcript and diploma**
 - College transcripts/diplomas (if applicable)**
 - DD214 (military discharge form if applicable)**
 - Naturalization papers (if applicable)**
9. Your failure to properly complete your application may result in the rejection of the application.

Be sure to return your application by the date indicated on the cover page.

Selection Process

- Physical Agility Test (minimums on page 5) **FEBRUARY 8, 2025**
- Written Exam
- Interview with Field Training Officers
- Civil Service Interview
- Certification by Civil Service Commission
- Interviews with Chief & staff
- Conditional Job Offer
- Background Questionnaire Packet
- Background Investigation
- Polygraph Examination
- Psychological Screening
- Medical (Physical) Exam
- Final Job Offer (when position is available)
- Uniform Fitting
- Academy (16 weeks)
- Field Training Program (11 weeks)
- Probationary period (1-year post certification)

Benefits / Work Conditions

- Attractive Salary Range (\$28.28– \$37.21 per hour effective 07/01/2024 with potential of \$5,000 hiring bonus)
- Up to \$5,000 hiring bonus for certified officers
- Shift differential pay
- Paid vacation
- Holiday Bonus Pay
- Uniforms
- Paid Training
- Health, Vision, Dental & Life Insurance
- Retirement plan (MFPRSI)
- FREE membership to Carroll Recreation Center
- 3 Personal Days
- Sick Leave
- Family Care Leave
- Emergency Leave
- Funeral Leave

Police work is a 24-hour-a-day, 365-day-a-year occupation. Officers work nights, weekends and holidays. Currently, Carroll officers are on fixed shifts with rotating days off. Schedules may vary with the needs of the city and department, and officers will be placed on a schedule that best suits the operational needs of the department.

Iowa Law Enforcement
Physical Agility Standards

Minimal physical fitness performance requirements chart.					
Males			Age		
Test	20-29	30-39	40-49	50-59	60 +
1 Minute Sit-up	38	35	29	24	19
1 Minute Push-up	29	24	18	13	10
1.5 Mile Run	12:51	13:36	14:29	15:26	16:43
Females			Age		
Test	20-29	30-39	40-49	50-59	60 +
1 Minute Sit-up	32	25	20	14	6
1 Minute Push-up	15	11	9	* 12	* 5
1.5 Mile Run	15:26	15:57	16:58	17:54	18:44

* Females in excess of 49 years of age may do pushups on their knees.

Carroll Police Department Application for Employment

Date: _____ Position Applying For: PATROL OFFICER

Last Name: _____ First Name: _____ Middle: _____

Date of Birth: _____ Place of Birth: _____

Social Security Number: _____ Driver's License # & State _____

Alias/maiden or other names used: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email address: _____

U.S. Citizen? ___ Yes ___ No

Current Address: _____ City _____ State _____ Zip _____

CONTACTS WITH LAW ENFORCEMENT

List all Traffic Citations regardless whether or not you were convicted:

<i>Charge</i>	<i>Agency</i>	<i>City</i>	<i>State</i>	<i>Disposition</i>	<i>Date</i>

List ALL arrests including juvenile arrests regardless of whether or not you were convicted:

<i>Charge</i>	<i>Agency</i>	<i>City</i>	<i>State</i>	<i>Disposition</i>	<i>Date</i>

Explain any other times you have been detained or questioned by police other than traffic violations:

List ALL law enforcement agencies with whom you have applied (City, County, State, Federal):

<i>Agency Name</i>	<i>City/State</i>	<i>Date of Application</i>	<i>Position</i>	<i>Status</i>

MILITARY SERVICE

Have you ever been in the military or National Guard? ___yes ___no Type of Discharge: _____

Branch _____ Enlisted Date: _____ Discharge Date: _____ Rank _____

EDUCATION

High School Name _____ **Location (City/State)** _____

Dates Attended: _____ Did you graduate? ___yes ___no Year _____

Colleges and Trade Schools

Name of School	Location	Dates Attended	Total Hours	Degree Earned

EMPLOYMENT

Start with your current employer and list all employers since you began working. It is your responsibility to provide valid phone numbers and complete addresses for each employer.

Employer Name: _____ Phone Number: _____

Start Date: _____ End Date: _____ Supervisor's Name: _____

Position held and duties: _____

Employer's address _____ City _____ State _____ Zip _____

Salary: _____ Reason for leaving: _____

Employer Name: _____ Phone Number: _____

Start Date: _____ End Date: _____ Supervisor's Name: _____

Position held and duties: _____

Employer's address _____ City _____ State _____ Zip _____

Salary: _____ Reason for leaving: _____

Employer Name: _____ Phone Number: _____

Start Date: _____ End Date: _____ Supervisor's Name: _____

Position held and duties: _____

Employer's address _____ City _____ State _____ Zip _____

Salary: _____ Reason for leaving: _____

Employer Name: _____ Phone Number: _____

Start Date: _____ End Date: _____ Supervisor's Name: _____

Position held and duties: _____

Employer's address _____ City _____ State _____ Zip _____

Salary: _____ Reason for leaving: _____

Employer Name: _____ Phone Number: _____

Start Date: _____ End Date: _____ Supervisor's Name: _____

Position held and duties: _____

Employer's address _____ City _____ State _____ Zip _____

Salary: _____ Reason for leaving: _____

RESIDENCE HISTORY

List all locations where you have actually lived, regardless of period of time for the past ten (10) years beginning with your current address:

<i>From</i>	<i>To</i>	<i>Address</i>	<i>City / State</i>	<i>Zip</i>	<i>Landlord Name & Phone #</i>

REFERENCES

List character references that personally know you. Do not list employers or supervisors. Do not list people that do not regularly interact with you.

<i>Name</i>	<i>Years Known</i>	<i>Address</i>	<i>City, State, Zip</i>	<i>Phone Numbers</i>

Are there any incidents in your life not mentioned herein which may reflect upon your suitability to perform the duties of the position you are applying for? ___yes ___no

Explain:

Have you used and/or are you addicted to any unlawful drug or controlled substance?

Yes _____ No _____

If yes, note the circumstances and degree of dependency.

Do you presently chew tobacco or smoke cigarettes or use tobacco of any kind? Yes _____ No _____

If yes, would you be willing to give up this habit(s) as a condition of continued employment?

If it became necessary in the course of your duties to use force or take a human life, would you have any reluctance to do so because of religious or other beliefs? Yes _____ No _____

If yes, please explain.

Are you currently under contract to another city/employer? Yes _____ No _____

If yes, what steps will be necessary to obtain a release from this contract?

Do you have uncorrected vision less than (worse than) 20/100 in either eye? Yes _____ No _____

Included with this application is an "Authorization to Release Information". Do you hereby consent to our using this form, in either original or photo copied form? Is this form complete and accurate?

Yes _____ No _____

Have you been totally honest and forthcoming in this application? ___yes ___no

Did you read and follow the instruction pages at the beginning of this application? ___yes ___no

I _____ attest that all statements and information provided in this application are true and correct. I understand that any deliberate omissions or false statements will result in the rejection of my application.

Signed _____ Date: _____

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I, _____, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the Carroll Police Department, whether the said records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of records of educational institutions; financial or credit institutions, including record of loans, the records of commercial or retail credit agencies (including credit reports and/or ratings); and other financial statements of records whenever filed; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the U.S. Veteran’s Administration; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me and the recollections of attorneys at law, or of other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had an interest.

I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the City of Carroll. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information. I further release the City of Carroll from any and all liability which may be incurred as a result of collecting such information.

I hereby swear and affirm that each statement and all information in or supplementing this application (personal and physical evaluation) is complete, true and accurately recorded to the best of my knowledge. I UNDERSTAND THAT PROVIDING FALSE OR MISLEADING INFORMATION ON THIS QUESTIONNAIRE IS GROUNDS FOR EXCLUSION FROM THE SELECTION PROCESS OR DISCHARGE IF DISCOVERED SUBSEQUENT TO EMPLOYMENT.

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

I have read and fully understand the contents of this “authorization for release of personal information”.

SIGNATURE OF APPLICANT

DATE