

SOUTH BEND POLICE DEPARTMENT

701 West Sample St., South Bend, Indiana 46601

(574) 235-9224



APPLICATION



SOUTH BEND POLICE DEPARTMENT

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Each of the below criteria must be met and proper documents attached to properly process your application.

A. BASIC ELIGIBILITY REQUIREMENTS

1. Must be a United States citizen.
2. Must be at least 21 years of age, but not yet 36 years of age when appointed as a police officer.
3. Must be a high school graduate, as evidenced by a transcript issued by an accredited high school. An achievement test certificate from an accredited high school or State Board of education is acceptable.
4. Must possess a valid unrestricted driver's license.
5. Must be willing, if appointed, to reside within St. Joseph County or an adjoining county in Indiana.

B. COPIES OF THE FOLLOWING DOCUMENTS ARE REQUIRED

1. DD 214 (Armed Services Discharge)
2. High school diploma or GED diploma.
3. High school transcripts.
4. College transcripts
5. Birth certificate.
6. Valid driver's license.

C. SELECTION PROCESS

1. Physical agility test.
2. Written examination.
3. Personal interview
4. Oral Interview Board
5. Background investigation.
6. Polygraph examination.
7. MMPI and Psychological Examination.
8. Pension (PERF) Physical Examination.

D. FACTORS THAT INCREASE EMPLOYMENT CONSIDERATION:

1. Police related occupations:
 - a. Military
 - b. Other Departments
2. Education
 - a. college degree
 - b. education beyond high school
3. College internships
4. Volunteer community service.
5. Honorably discharged war veteran.
6. Mother or father who as a member of a police or fire department, died in the line of duty.

E. FACTORS THAT RESULT IN AUTOMATIC REJECTION:

1. Domestic violence conviction.
2. Drug selling.
3. Hard drug use in last 10 years.
4. Felony conviction.
5. Dishonorable discharge from military.
6. Driving while intoxicated conviction in past 5 years.

F. FACTORS THAT DECREASE EMPLOYMENT CONSIDERATION:

1. Involvement in criminal activity.
2. Misdemeanor conviction.
3. Documented evidence of domestic violence.
4. Military rejection or early discharge for reason/concern.
5. Marijuana use beyond experimental usage.
6. Poor driving and accident record.
7. Illegal acts.
8. Past job problems or firings.



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INSTRUCTIONS

1. Read each item carefully.
2. This form must be clearly printed or typed in ink.
3. All items must be completed, and necessary documentation submitted with application.
4. The completed form must be returned to the South Bend Police Department Training Bureau prior to the designated deadline.
5. Applications received after the designated deadline will not be processed and will be returned to the applicant.

APPLICATION INFORMATION

1. All applicants will participate in the Written Examination. All applicants receiving a passing score will then participate in the Physical Agility Test.
2. All applicants passing the Agility Test will be placed on an eligibility list for a period of one year.
3. Applicants will no longer be allowed to update or extend the time of the eligibility list. If an applicant is still interested, the applicant must re-apply during a time in which applications are being accepted.
4. As vacancies occur, we will select a reasonable number of applicants from the eligibility list, consistent with our City's Equal Employment Opportunity Guidelines, to advance to the Oral Interview Board, Personal Interview, Background Investigations, and Polygraph Investigation. After satisfactory completion of testing, we will select which candidates to present the conditional offer of employment. Those candidates given the conditional offer of employment will then participate in the Psychological Examination and the Physical Examination.
5. If an applicant does re-apply after one (1) year, all testing must be repeated.



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Basic Essential Functions for Police Officers

1. Monitor radio and communication devices to receive assignments and calls.
2. Maintain awareness of activities in assigned areas.
3. Effectively communicate, verbally and written, in the English language.
4. Assist citizens with problems.
5. Patrol on foot or by driving a vehicle, responding to assigned calls and searching for suspicious activity or situations.
6. Respond to calls by driving, walking or running to a specific location.
7. Refer persons to appropriate social service agencies when situations warrant.
8. Assess situations, determine need for assistance of other officers or agencies, and take appropriate action.
9. Provide emergency aid to injured people and move people away from danger, include carrying unconscious people.
10. Investigate accidents and reports of crimes. Gather evidence, record observations and statements of witnesses, victims and suspects. Direct removal of vehicles involved in accidents and maintain orderly flow of other traffic, both vehicular and pedestrian.
11. Search crime scenes and take prescribed actions to preserve and protect evidence. Record findings and observations.
12. Pursue and apprehend suspects. Use only necessary force to apprehend and arrest suspects. Advise suspects of rights, and transport suspects to detention area.
13. Use appropriate means and weapons to restrain people from physically striking and injuring other people.
14. Drive a vehicle safely at high speed when an emergency warrants.
15. Stop drivers of vehicles when traffic violations are observed. Advise drivers of safe driving practices. Verify license and registration data. Issue citations or make arrests as warranted.
16. Take appropriate action to protect life and property.
17. Maintain visibility in the community. Meet and talk with people. Visit local businesses. Provide information and make presentations to neighborhoods, civic organizations and schools.
18. Testify in court and prepare for such testimony by reviewing reports and notes. Meet with attorneys and obtain appropriate evidence.
19. Maintain physical fitness, uniforms, equipment and weapons.
20. Perform related duties as assigned.
21. Participate in training on law enforcement procedures: including firearms, court procedures, criminal justice, emergency medical aid and related subjects.



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Environmental Factors for Police Officers

The essential functions for police officers are performed in and affected by the following environmental factors.

A police officer must. . .

1

Operate both as a member of a team and independently, at incidents of uncertain duration.

2

Face exposure to infectious agents, such as hepatitis B or HIV.

3

Perform complex tasks during life threatening emergencies.

4

Work for long periods of time, requiring sustained physical activity and intense concentration.

5

Face life or death decisions during emergency conditions.

6

Tolerate exposure to grotesque sights and smells associated with major trauma.

7

Make rapid transitions from rest to near maximal exertion without a warm-up period.

8

Use firearms, self-defense equipment and body armor.

9

Be able to physically protect herself/himself and others.

10

Be able to communicate with people effectively.



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Physical Fitness Test Information

There are five (5) *fitness components* that will be measured in one day as a battery of tests.

Fitness Components

1. Vertical Jump. This measures leg power. Consists of measuring how high a person jumps from a stationary position.
2. One Minute Sit Ups. This measures abdominal (or trunk) muscular endurance. While lying on his/her back, the student will be given one (1) minute to do as many bent leg situps as possible.
3. 300 Meter Run. This measures aerobic power, or the ability to perform an intense burst of effort for a short time period or distance. This component consists of running 300 meters as fast as possible (considered a *sprint* run).
4. Maximum Push Ups. This measures muscular endurance of the upper body. This component consists of doing as many push ups as possible until muscular failure.
5. 1.5 Mile Run. This measures aerobic power or cardiovascular endurance (stamina over time). To complete this component, you must run/walk as fast as possible to cover a distance equal to a mile and one half.

Each component is scored separately and the standard must be met on each and every one. Testing will be conducted in the order reflected in the following chart, top to bottom.

TEST	STANDARD
Vertical Jump	16 inches
One Minute Sit Up	29
300 Meter Run	71 seconds
Maximum Push Up	25
1.5 Mile Run	16 minutes 28 seconds (16:28")
Pistol Trigger Pull	10 seconds 6 Pulls

A Doctor's statement must be provided, at your cost, indicating you are fit and able to participate in the *physical testing*. Do not obtain this statement until advised to do so by the police training office.

Protocol for Vertical Jump

7

Purpose

This is a measure of jumping or explosive power.

Equipment

Vertical measuring apparatus fixed to a smooth wall, and some means to mark extension when jumping (e.g. chalk dust, velcro, etc.)

Procedure

1. Participant stands with one side toward the wall, feet together, and reaches up as high as possible to mark his/her standard reach.
2. Participant jumps as high as possible and marks the highest point of the jump. Participant must jump from both feet in a stationary stance. Arms may be pumped and thrust upward.
3. Score is total inches, to the nearest 1/2 inch, above the standard reach mark.
4. The best of three trials is the recorded score.

Protocol for 1 Minute Sit-ups

Purpose

This measures abdominal muscular endurance.

Equipment

Flat solid surface.

Procedure

1. The participant starts by lying on his/her back, knees bent, heels flat on the floor, with the fingers laced and behind the head. Avoid pulling on the head with the hands. The buttocks must remain on the floor with no thrusting of the hips.
2. A partner holds the feet down firmly.
3. The participant then performs as many correct sit ups as possible in 1 minute.
4. In the up position, the subject should touch elbows to knees and then return until the shoulder blades touch the floor. Any resting must be done in the up position.
5. Breathing should be done as normal as possible, making sure the participant does not hold his/her breath as in the Valsalva maneuver.
6. Score is total number of correct sit ups.

Protocol for 300 Meter Run

Purpose

This is a measure of anaerobic power.

Equipment

400 meter running track/440 yard running track, or any measured 300 meter flat surface with sufficient distance to slow to a stop.

Procedure

1. Warm up and stretching should precede testing.
2. Participant runs 300 meters at maximum level of effort. Time used to complete distance is recorded.
3. Participant should walk for 3-5 minutes immediately following test to cool down. This is an important safety practice.

Protocol for 1 Maximum Pushups

Purpose

This measures muscular endurance of the upper body (anterior deltoid, pectoralis major, triceps).

Equipment

Flat solid surface.

Procedure

1. The hands are placed shoulder width apart, with fingers pointing forward. Some part of the hands must lie within a vertical line drawn from the outside edge of the shoulders to the floor. The administrator places one fist on the floor below the participants chest (sternum).
2. Starting from the up position (arms fully extended with elbows locked, both hands and both feet only touching the floor), the participant must keep the back straight at all times and lower the body to the floor until the chest (sternum) touches the administrator's fist. The participant then returns to the up position with the elbows fully locked. This is one repetition.
3. Resting is permitted only in the up position. The back must remain straight during resting.
4. When the participant elects to stop or cannot continue (failure), the total number of correct pushups is recorded as the score. There is no time limit.

Protocol for 1.5 Mile Run

Purpose

The 1.5 mile run is a measure of aerobic power (cardiovascular endurance). The objective in the 1.5 mile run is to cover the distance as fast as possible.

Equipment

1. Stop watch
2. Indoor/outdoor track or other suitable *flat* running area measured to 1.5 miles.
3. Testing forms to record data.

Procedure

1. Participants should not eat a heavy meal or smoke for a least 2 - 3 hours prior to the test.
2. Participants should warm up and stretch thoroughly prior to running.
3. The participant runs 1.5 miles as fast as possible.
Participants should not physically touch one another during the run, unless it is to render first aid.
4. Finish times should be called out and recorded.
5. Upon completion of the run, participants should cool down by walking for 5 minutes to prevent venous pooling (i.e. pooling of the blood in the lower extremities which reduces the return of blood to the heart and may cause cardiac arrhythmia.).

Protocol for Pistol Trigger Pull

Purpose

To insure the applicant's potential ability to properly fire a handgun.

Equipment

1. A South Bend Police Department .40 cal Sig Sauer P229 Pistol.
2. A designated 4" circle to place the muzzle of the pistol through.

Test: Applicant is required to use a 2 hand grip on the pistol, point the muzzle into the 4" circle hole and dry fire the weapon 6 times in the double action mode without the muzzle touching the edges of the circle. The applicant has 10 seconds to complete dry firing the weapon 6 times.

* No Live Ammunition will be fired*

* Weapon will be empty and void of any magazine
and pointed in a designated safe direction at all times.*



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NAME _____
last first middle

any other name by which you have been known -- include maiden names

HOME ADDRESS (street address is required)

city state zip

PRESENT EMPLOYER _____

EMPLOYER'S ADDRESS _____

Home Telephone () _____ Business Telephone () _____

Cell Phone () _____ E-Mail Address _____



Have you ever applied for a position with the South Bend Police Department in the past?

Yes _____ No _____

If so, when? _____

Have you ever been in a physical confrontation with a relative or live-in companion?

Yes _____ No _____ If yes, list date and circumstances

Photo must be attached,
or application will not be processed.

<p>MOUNT PHOTOGRAPH IN THIS SPACE</p> <p>(affix securely)</p>

Photograph to be front view,
head and shoulders, approx-
imately 2 1/4 inches square, or
no larger than post card size,
taken within the past six
months.



DATE

APPLICANT'S SIGNATURE

List all of your residence addresses for the past ten (10) years (present first):

Street and Number	City, State, Zip Code	Dates	
		From	To
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Military History and Status

ORGANIZATION	DATES OF SERVICE		RANK OR GRADE	REASON FOR LEAVING SERVICE
	from	to		
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Military citations or other service awards received _____

Are you now a member of a Military Reserve Unit? yes no

If yes, rank: _____

Give name and location of unit to which you are assigned: _____



SOUTH BEND POLICE DEPARTMENT

SUBVERSIVE ORGANIZATION MEMBERSHIP

____ yes ____ no

A. Are you now or have you ever been a member of any organization, association, movement, group, or combination of persons which advocates the overthrow of our Constitutional form of government, or which has adopted the policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States by unconstitutional means?

____ yes ____ no

B. Are you now or have you ever been affiliated or associated with any organization of the type described above as an agent, official, or employee?

____ yes ____ no

C. Are you now associated with, or have you ever associated with, any individuals (including relatives) who you know or have reason to believe are or have been members of any of the organizations identified above?

____ yes ____ no

D. Have you ever been engaged in any of the following activities of any organization of the type described above: contribution(s) to, attendance of, or participation in any organization, social, or other activity of said organization, or of any projects sponsored by them: the sale, gift, or distribution of any written, printed or other matter, prepared, reproduced, or published by them or any of their agents or instrumentalities?

If you answered YES to any of the above questions, describe the circumstances completely.

EMPLOYMENT HISTORY (continued from PREVIOUS PAGE).

Employer		Address		zip	phone
Supervisor's full Name & Title		phone & ext. #	Salary START		Salary FINISH
Reason for leaving					
Describe in detail the work you did:					
Dates worked: From: To:					
Employer		Address		zip	phone
Supervisor's full Name & Title		phone & ext. #	Salary START		Salary FINISH
Reason for leaving					
Describe in detail the work you did:					
Dates worked: From: To:					
Employer		Address		zip	phone
Supervisor's full Name & Title		phone & ext. #	Salary START		Salary FINISH
Reason for leaving					
Describe in detail the work you did:					
Dates worked: From: To:					
Employer		Address		zip	phone
Supervisor's full Name & Title		phone & ext. #	Salary START		Salary FINISH
Reason for leaving					
Describe in detail the work you did:					
Dates worked: From: To:					
Employer		Address		zip	phone
Supervisor's full Name & Title		phone & ext. #	Salary START		Salary FINISH
Reason for leaving					
Describe in detail the work you did:					
Dates worked: From: To:					

Have you ever been discharged or forced to resign from any position of employment? yes no

If yes, explain fully: _____

May we refer to your previous employer(s)? yes no

If no, explain fully: _____

REFERENCES:

List reliable persons, other than relatives and/or past employers, who know you well enough to supply us with information about you. They must have known you for at least a year. No police officers are to be used as references.

Name	Address	zip	phone
Business/ Occupation		phone	
Name	Address	zip	phone
Business/ Occupation		phone	
Name	Address	zip	phone
Business/ Occupation		phone	
Name	Address	zip	phone
Business/ Occupation		phone	
Name	Address	zip	phone
Business/ Occupation		phone	

EDUCATION (attach transcripts).

High School

Graduation date: _____ month _____ year

Extra curricular activities: _____

College or Technical School (attach transcripts).

Areas of Special Study

Graduation date: _____ month _____ year Degree _____

Extra curricular activities: _____

Other Education or Training: In this section, list any vocational or technical training that you have received or any apprenticeship programs you may have been a part of.

School/Location	Type of Training	Dates	
		From	To
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List any special skills, training, experiences, etc., that you have acquired, including languages other than English spoken and degree of proficiency: _____

Were you ever suspended or expelled from high school or any other school? yes no

Explain: _____

VEHICLE ACCIDENT AND ARREST RECORD		
List vehicle accidents in which you have been involved as a driver.		
Date	LOCATION	What happened?

Have you ever been arrested or received a ticket for a traffic offense? yes <input type="checkbox"/> no <input type="checkbox"/> If yes, describe below.			
Date	LOCATION	CHARGE	SENTENCE

Have you ever been arrested for a criminal offense? yes <input type="checkbox"/> no <input type="checkbox"/> If yes, describe below.			
Date	LOCATION	CHARGE	SENTENCE

Have you ever been involved with illegal drugs? yes no

If yes, state all types of drugs you have ever used. You must estimate number of times used between the first time and last time used.

The facts set forth in my application for employment with the South Bend Police Department are true and complete. I understand that false statements or failure to complete this application as required, shall be considered sufficient cause for elimination from further consideration for employment.

Date _____ _____
(SIGNATURE OF APPLICANT)

CHECK APPLICATION CAREFULLY!
BE CERTAIN ALL ITEMS ARE COMPLETE BEFORE RETURNING APPLICATION FOR PROCESSING.



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GENERAL AUTHORIZATION FOR RELEASE AND WAIVER

I hereby authorize any and all schools, physicians, hospitals, Armed Services, current and all previous employers, law enforcement agencies, or any other person or organization or agency to furnish the SOUTH BEND POLICE DEPARTMENT or its designated agent(s), any and all information, opinions, or documents which may be requested; to allow the visual inspection and copy of all reports, photographs, or other documents.

I hereby waive any objection to the release of said information and grant to the SOUTH BEND POLICE DEPARTMENT or its said agent(s) any right I may have to said information. Further I hereby release all of the above, the City of South Bend and its said agent(s) from all liability for any damage whatsoever arising therefrom.

I also authorize investigation of all statements made in my application for employment. I understand that in the event of my employment with the City of South Bend, I shall be subject to dismissal if any of the information I have given in this application is false, or if I have failed to give any material information herein requested.

WITNESS

APPLICANT'S SIGNATURE

Physical Fitness Test - Waiver

During the course of the agility test, I understand that there is a possibility that I may be injured. I hereby release the South Bend Police Department, their principals, agents and employees, from any and all liability connected with this agility test and waive any rights I may have against the City of South Bend, their agents and employees connected herewith.

I also agree to provide a doctor's statement, at my cost, indicating that I am able to take the agility test.

WITNESS

APPLICANT'S SIGNATURE

Subscribed and sworn to before me, a Notary Public, this _____ day of _____, 20____

SEAL

My Commission expires

Notary Public
Resident of _____ County



Back Page of APPLICATION.

There is no information for you to enter on this page.



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APPLICATION SIGN UP SHEET

date

Please Print All Information.

PLACE: South Bend Police Department
701 W. Sample St.

name		
last	first	middle
date of birth	home phone	business phone
maiden name	AKA	
home address <small>(street address required)</small>	City	State
Soc. Sec. #	Driver's License #	State
Present Employer		
Business Address	City	State
Application received on:	Application returned on:	
Signature of Applicant		
Cell Phone #	E-Mail Address:	

NOTE: All information must be truthful and all documents must be attached & application completed neatly if it is to be processed.