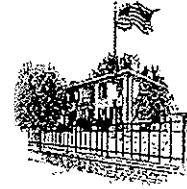


# City of New Castle, Indiana



## Police Department Application

Department Use	Received	Date
	Returned	Date

NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_  
(Last, first, middle)

RESIDENCE: \_\_\_\_\_  
(Street or Rural Route) (Apartment Number)

BUSINESS ADDRESS: \_\_\_\_\_

\_\_\_\_\_ City County State Zip

### An Equal Opportunity / Affirmative Action Employer

#### NOTICE:

Applications will not be considered until complete in every respect and any misrepresentation of facts will disqualify the applicant.

This form must be filled out in ink in the handwriting of the applicant.

Answer all questions. If the question does not apply, state: none or does not apply.

Any further information you may wish to add may be placed on the reverse side of this page with proper identifying reference marks.

*In the event you change your address after filing this application, mail notification of your new address immediately.*

Do not make inquiry regarding status of your application, as you will receive appropriate information concerning your application routinely and in due time.

**MAIL OR BRING COMPLETED APPLICATION TO  
New Castle Police Department • 227 N. Main St. • New Castle, IN 47362**

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The New Castle Police Department is an equal opportunity employer and does not discriminate in hiring or employment practices on the basis of race, color, sex, religion, creed, national origin, ancestry, handicap, as defined by law or political affiliation. No question on this application is intended to secure information to be used for such discrimination.

This application must be filled out by the applicant only. Print in ink or type neatly, accurately and thoroughly. Attach supplements if necessary. All information will be regarded as confidential. This application will be given every consideration, but its receipt does not imply that the applicant will be employed.

Because of the sensitive and important position of a Law Enforcement Officer, the New Castle Police Department must select individuals who possess the best physical, mental, moral and emotional character for the performance of Law Enforcement duties.

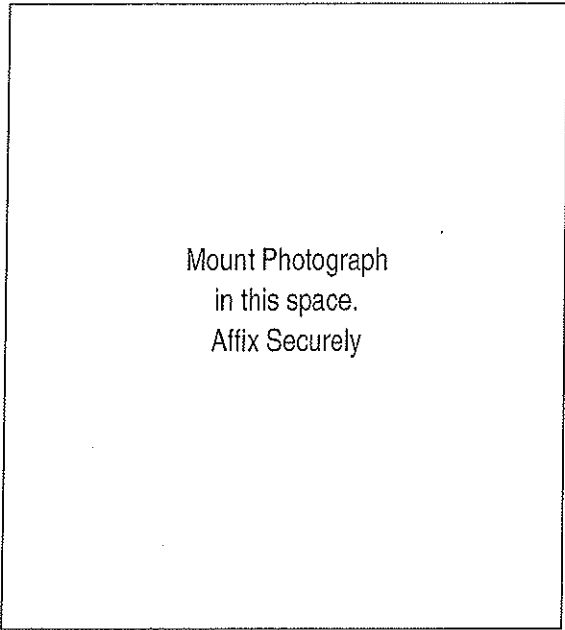
In order to best ascertain who those individuals are, it is necessary to gather as much information as possible about each applicant which may have a bearing on his/her ability to perform. Several questions in this application are designed to give the Department a complete background on each applicant. No question on this application is intended to secure information to be used for unlawful discrimination.

Do not misstate or omit material since information made herein is subject to verification to determine your qualifications for employment.

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Items needed to complete the application should be affixed to this page. They are:

- 1) Birth Certificate,
- 2) High School transcript (in case of GED diploma, be sure transcript notes issuance of diploma), most high schools will insist on mailing transcript direct to prospective employer (this is acceptable),
- 3) Transcript showing courses of study and grades obtained from any college or university attended,
- 4) Proof of honorable discharge from any military service.
- 5) Photograph: front view, head and shoulders, 2-1/2 inches square, taken in the past 6 months.



Mount Photograph  
in this space.  
Affix Securely

## **POLICY STATEMENT ON BACKGROUND INVESTIGATIONS**

It is the policy of the New Castle Police Department to recruit qualified individuals that will make the best Law Enforcement Officers for all segments of the community and surrounding communities. In pursuing this goal, a background investigation of each applicant is conducted with respect to factors that may have bearing upon the applicant's job performance or tend to measure job capability as a member of the New Castle Police Department.

Members of the New Castle Police Department are public servants and must present a good image of the Department to the public. Law Enforcement Officers must be of high integrity and character. Law Enforcement Officers work long hours with their peers, and as a result, they should possess personal habits which make them compatible with other members of the Department. A Law Enforcement Officer's job often involved critical and dangerous situations and they should not be prone to external pressures that would affect their ability to perform the job.

Accordingly, the following items and circumstances surrounding such items are reviewed:

- 1 Contents and completeness of employment application.
- 2 Driver's responsibility (copy of driving summary is furnished by the Indiana BMV.
- 3 Former Employment.
- 4 Financial condition.
- 5 Criminal record of applicant to policy statement on employment of ex-offenders.
- 6 References.
- 7 Personal history and character of applicant.

A negative finding on any one of these factors shall not be an automatic reason for rejection of an applicant. Instead, the circumstances underlying such matters will be considered as they relate to the applicant's ability to perform the job of a law enforcement officer. Although it is impossible to state all relevant and material factors to a background investigation and to the applicant's being a qualified Law Enforcement Officer, in each case the department will consider whether the applicant's background, as set forth above, will have a hearing on the applicant's job capability. The date and the circumstances surrounding any negative finding in the background investigation, the requirements of the position, as well as the applicant's other qualifications, will be considered.

The background investigation phase of the hiring process shall be based upon objective, factual findings and any required subjective determination shall be in accordance with the aforementioned policy and conducted in such a manner so as not to discriminate on the basis of race, creed, color, national origin, sex or age. The background investigation phase shall be reviewed periodically so that it does not result in unintended discriminatory selection of applicants.

## **POLICY STATEMENT OF EMPLOYMENT OF EX-OFFENDERS**

Consideration of employment of ex-offenders will be given without regard to race, creed, color, national origin, sex or age. The term ex-offender as used herein, refers to anyone convicted of any criminal statute or military offense while in the service.

### **Felony Convictions**

Any individual convicted of a felony shall be ineligible for appointment as a Law Enforcement Officer. A felony is, defined by Indiana Law as, any offense for which a person may receive one (1) year or more of confinement in a state or federal institution.

### **Evaluation**

With respect to all other criminal convictions which are not felonies, in each case the Department will consider whether the prior criminal conviction or military offense conviction of the applicant will have a bearing on the applicant's job performance or tend to measure job capability. The date and nature of the offense, the requirements of the position for which considered, as well as the applicant's other qualifications, will be considered.

### **Confidentiality**

As a matter of policy, every effort will be made to keep the applicant/employee's criminal record confidential. During the selection and placement process, it will be necessary to inform the appropriate persons participating in the selection process of the applicant's record.



**I. Initial Requirement Data**

- A. Are you a U.S. Citizen?  Social Security Number \_\_\_\_\_
- B. Your age \_\_\_\_\_ Date of Birth: (Mo/Day/Yr) \_\_\_\_\_
- C. Your height (without shoes) Feet \_\_\_\_\_ Inches \_\_\_\_\_
- D. Your weight (stripped) Pounds \_\_\_\_\_
- E. Are you a regular graduate of an accredited high school?  If no, have you been issued an equivalency diploma from an accredited high school?
- F. Do you currently possess a valid automobile driving license?   
 License Number \_\_\_\_\_ State \_\_\_\_\_  
 Is your license restricted?  If yes, for what reason? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Number of years driving experience? \_\_\_\_\_

**II. Family Data**

A. Marital Status: Married \_\_\_\_\_ Single \_\_\_\_\_ Widowed \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_

B. Dependents

Name	Age	Relationship

C. Full Name	Where Born	Present Address (if living)
Father		
Mother (Maiden name)		
Wife (Maiden name)		

D. Is spouse employed?  If yes, what is the annual salary? \_\_\_\_\_

### III. Educational Data

A. High School(s) Attended:

Name of School	From	To	Grade Completed

B. College or University:

Name of School	From	To	Grade Completed	Major	Degree

C. Do you read, write or speak any foreign language?  \_\_\_\_\_  
 If so, what and to what degree? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

D. Can you operate a typewriter?  Touch \_\_\_\_\_ WPM \_\_\_\_\_  
 Write Shorthand?  WPM \_\_\_\_\_ Do you have a radio license? \_\_\_\_\_  
 Type of license? \_\_\_\_\_ Years of experience? \_\_\_\_\_  
 Operate a dark room?  List other skills you feel appropriate: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_





## V. Military History and Status

### A. Military History

Organization	Dates of Service		Rank or Grade	Reason for Leaving Service
	From	To		

B. Military citations or other awards received: \_\_\_\_\_

C. Are you now a member of Organized Reserves?  If so, rank \_\_\_\_\_

Give name and location of unit to which assigned: \_\_\_\_\_

D. What is your present Selective Service Classification? \_\_\_\_\_

## VI. Physical Status

A. Have you visited or received treatment from a physician or other practitioner during the past three years?  If so, explain and give reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Family Doctor: \_\_\_\_\_ Address: \_\_\_\_\_

B. Are you, to the best of your knowledge, of sound health and physically fit in every respect?

C. Have you had any serious illnesses, injuries or operations in the past 10 years?  If so, describe and give dates: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

D. Have you any physical defects?  Describe Fully: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

E. Have you had any history of mental illness or nervous breakdown?  Describe Fully and give dates: \_\_\_\_\_

\_\_\_\_\_

**VII. Miscellaneous**

A. Residences in Last Five Years (Other than Present):

Street	City	State

B. List past or present memberships in all clubs or organizations. (Political, fraternal, social, etc.)

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C. With what church are you affiliated? \_\_\_\_\_

D. Can you operate a motorcycle?  Boat?  Type: \_\_\_\_\_

Airplane?  Type: \_\_\_\_\_ Pilot's License Number: \_\_\_\_\_

E. Do you own a home?  If yes, how much is current mortgage indebtedness? \_\_\_\_\_

F. What is the amount of your indebtedness, other than home? \_\_\_\_\_

G. Are you a proprietor or part owner of any business or firm?  If yes, describe nature of business:

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H. What special skills have you developed through hobbies, education, occupation, or other special interests? \_\_\_\_\_

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I. Indicate experience, training you have had or special ability in which you, in your opinion, will qualify you for the position for which you have made this application. Describe fully the positions that you have held that required executive ability, the exercise of authority, and ability to lead men: \_\_\_\_\_

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J. Vehicle Accident and Arrest Record:

1. List vehicle accidents in which you have been involved as a driver. Give date(s) and location(s).

Date	Location	What Happened

2. Have you ever been arrested or received a ticket for a traffic offense?  If yes, describe below:

Date	Location	Charge	Fine or Sentence

3. Have you ever been arrested for a criminal offense?  If yes, describe below:

Date	Location	Charge	Disposition of Case

# City of New Castle, Indiana



## Application Certification and Signature

**APPLICANT:** Please read carefully before signing. If you have any questions regarding the following statement or any questions contained in this application, please ask them of an employment interviewer before signing.

I certify that the information contained in this application is correct and complete to the best of my knowledge. I agree to inform the department of any additional information relating to questions raised on the application which occur subsequent to my completion of the application. I realize that misrepresentation of facts or the failure to update any information relating to the questions on the application may be cause for rejection of this application or dismissal after employment. Final employment is contingent upon satisfactory completion of all pre-employment procedures including interview, examinations, verification of all relevant information, physical examination, drug testing and any applicable statutory provisions. I acknowledge that I have read the above statement and fully understand the same.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF INDIANA )

)SS

COUNTY OF HENRY )

Subscribed and sworn to before me, a Notary Public, in and for said County and State

This \_\_\_\_\_ day of, \_\_\_\_\_ year of \_\_\_\_\_.

My Commission Expires:

\_\_\_\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Printed

\_\_\_\_\_  
County of Residence