

#### 2501 WOODLAND ROAD | AMBRIDGE, PA 15003

# HARMONY TOWNSHIP POLICE OFFICER APPLICATION

Upon your request we are providing an application for the position of Harmony Township Police Officer, recently advertised in the Beaver County Times. This is a full-time position.

Applications must be completed in total and delivered to and received by the Township Manager's Office, 2501 Woodland Road, Ambridge, PA15003 on or before 3:30pm on Friday August 9<sup>th</sup>, 2024.

Applications must be completed in total and all information requested must be provided at the time of submission.

- 1) A copy of your High School Diploma or equivalent.
- 2) A copy of your current Pennsylvania Municipal Police Officers Education & Training Commission card or certification of completion of your Act 120 training.
- 3) For identification purposes, submit a copy of your valid operator's license.
- 4) All other information as requested.

The date and location of the physical agility test is to be determined. All applicants will be notified of the time, date and location of the test.

If you pass the physical agility test, you are eligible to take the written exam.

The date and location of the written examination has yet to be determined. All applicants passing the physical agility test will be notified of the time, date and location of the written exam.

Other mandatory components of the exam are an oral examination, a background check, a post offer psychological examination.

Thank you for your interest in Harmony Township.

Patrolmen Civil Service August 01, 2024.

#### **APPLICANT'S RELEASE**

### PHYSICAL AGILITY TEST

As an applicant for the Harmony Township Civil Service Examination for part time police officer, I understand that I will be required to undergo a Physical Agility Test consisting of the following:

#### 300 METER RUN

Cover the required distance of 300 meters within 67.0 seconds.

#### SIT-UPS

With legs bent at a 90-degree angle, heels on the mat or ground, fingers interlocked behind the head, lift the body, touch elbows to knees, and return to the starting position, shoulders touching the mat or ground, 30 times within one (1) minute. Feet may be together or apart and may be held by another. Fingers must stay interlocked behind the head throughout the event. The back cannot be arched and the buttocks cannot be lifted from the mat.

#### PUSH-UPS

From a front supported position, hands and feet (toes), lower body as a unit with shoulders, hips and legs in the same plane, lowering the body by bending the elbows until the upper arms are parallel to the ground and return to a front supported position by straightening the arms, 15 times within one (1) minute. Rest is permitted in the up position.

#### 1.5 MILE RUN

Cover a measured distance of 1.5 miles on an assigned course within a sixteen (16) minute time frame.

I have read and understand the requirements of the Physical Agility Test set forth above and knowing this, I believe myself to be in good health and physically fit to participate in this test. I represent that to the best of my knowledge and belief I have no physical condition that would likely cause physical injury, disability, or illness as a result of attempting to perform the elements of the test as described above. In consideration of processing my application, and intending to be legally bound, I hereby release, indemnify and hold harmless Harmony Township, the Harmony Township Civil Service Commission and their members, and the owners, custodians, directors and employees of the property on which the test is given from all claims, demands and suits which may arise or result from any injury or illness which is caused by or results from taking or attempting to take the test as set forth above.

(Signatur	e)
(Typed/P	rinted Name)
	-

Event Required Time
300 Meter Run 67.0 Seconds
30 Sit-Ups 1 Minute
15 Push-Ups 1 minute
1.5 Mile Run 16 Minutes

## **300 METER RUN**

Cover the required distance of 300 meters within 67.0 seconds.

## SIT-UPS

With legs bent at a 90-degree angle, heels on the mat or ground, fingers interlocked behind the head, lift the body, touch elbows to knees, and return to the starting position, shoulders touching the mat or ground, 30 times within one (1) minute. Feet may be together or apart and may be held by another. Fingers must stay interlocked behind the head throughout the event. The back cannot be arched and the buttocks cannot be lifted from the mat.

## **PUSH-UPS**

From a front supported position, hands and feet (toes), lower body as a unit with shoulders, hips and legs in the same plane, lowering the body by bending the elbows until the upper arms are parallel to the ground and return to a front supported position by straightening the arms, 15 times within one (1) minute. Rest is permitted in the up position.

## 1.5 MILE RUN

Cover a measured distance of 1.5 miles on an assigned course within a sixteen (16) minute time frame.

## Authorization to Release Information

Name: Date of Birth: Social Security:
I respectfully request and authorize you to furnish the Harmony Township Police Department with any and all information that you may have concerning my work record, school record, military record, reputation, financial and credit status.
Please include any and all medical, physical and mental records or reports, including all information of a confidential or privileged nature, and Photostats of same, if requested.
I hereby release you, your organization or others from any liability or damages that may result from furnishing the above- requested information.
Signature Date

## Police Officer Application

## Harmony Township Police Department

General Instructions: This application consists of several sections; a questionnaire, a general waiver, and Essentials of a Police Officer. Every one of these sections must be completed in order for Harmony Township to accept this application as complete. Print or type an answer to every question. If a particular question does not apply to you, so state with an N/A. If space available is insufficient, use the reverse side and proceed with the number of the referenced block. Do not misstate or omit material facts since the statements that made herein are subject to verification to determine your qualifications for employment.

### Questionnaire

•				
First Name	Mic	idle Name	Last Nan	ne
·				
Prèsent street a	ddress	City	State	Zip
Home phone	:	Cell phone	em	ail address
<u> </u>				
Date of birth		Social Securit	y Number	
Residences: L	ist all of yo	ur previous add	resses for the	e past ten vears.
a				-
b	<u>.                                  </u>			
с,				
d				<del></del>
stepparents, Fos stepsisters. Inch relationship exis	iter parents, ide any oth	parent's in-lavers with whom	s, brothers, s	, parents, guardians, sisters, stepbrothers ar ided or with who a clo Phone number
-		Address		r none number
				,
		****		
				,
·	<u></u>			

	<del></del>			
Give the		information co	oncerning any vehicle	
			Issuing State	Expira
	ever been	charged with	or stopped by any lav	<u> </u>
Date	Viola	ation	Municipality	Were you charg
<del></del>				
	<del></del>			
	ver had y	our license su	spended or revoked?	Yes No _
			spended or revoked?	Yes No
Have you e  Criminal a  Have you e	and Civil ever been c	Offenses	r convicted of any su	
Have you e  Criminal a  Have you e  felony crim  If you state	and Civil ever been of inal offen Yes, state	Offenses charged with case? Yes_	r convicted of any su No nt of jurisdiction, mu	mmary, misdemean
Have you e  Criminal a  Have you e  felony crim  If you state	and Civil ever been control inal offen Yes, state f violation	Offenses charged with ouse? Yes eviolation, contained and the outco	r convicted of any su No No rt of jurisdiction, mu me.	mmary, misdemean
Have you e  Criminal a  Have you e  felony crim  If you state you, date or	and Civil ever been control inal offen Yes, state f violation	Offenses charged with case? Yes contained the outco	r convicted of any su No No rt of jurisdiction, mu me.	mmary, misdemean
Have you e  Criminal a  Have you e  felony crim  If you state you, date of a.  b.	and Civil ever been control inal offen Yes, state f violation	Offenses charged with case? Yes contained the outco	r convicted of any su No nt of jurisdiction, mu me.	mmary, misdemean
Have you e Criminal a Have you e felony crim If you state you, date of	and Civil ever been control inal offen Yes, state f violation	Offenses  charged with ouse?  Yes  violation, contained the outco	r convicted of any su No nt of jurisdiction, mu me.	mmary, misdemean
Have you e Criminal a Have you e felony crim If you state you, date or a. b. c. d. e.	ever been of vinal offen Yes, state f violation	Offenses charged with ouse? Yes eviolation, contained the outco	r convicted of any su No No urt of jurisdiction, mu me.	mmary, misdemean
Have you e Criminal a Have you e felony crim If you state you, date or a. b. c. d. e.	ever been coninal offen Yes, state f violation	Offenses  charged with of se? Yes  e violation, contained the outco	r convicted of any su No No mt of jurisdiction, mu me.	mmary, misdemean
Have you e  Criminal a  Have you e felony crim  If you state you, date of a. b. c. d. e.  Have you en Protections	ever been chinal offen Yes, state f violation  ver been the	Offenses charged with offense? Yes eviolation, contained the outco	r convicted of any su  No  rt of jurisdiction, mu me.	mmary, misdemean inicipality that charg ding but not limited If yes list below.
Have you e  Criminal a  Have you e  felony crim  If you state you, date of a. b. c. d. e.  Have you exprotections	ever been coninal offen Yes, state f violation  ver been the	Offenses charged with offense? Yes eviolation, contained the outco	r convicted of any su No  rt of jurisdiction, mu me.  a civil actions inclu No	mmary, misdemean inicipality that charg ding but not limited If yes list below.

Name	Dates Attended		Gra	duated
12. Education: College or Tr				
Name	Dates Attended	. ,	Grac	luated Y
13. Police Education:				
Name	Dates Attended		Gradu	rated Y
14. Employment:  Begin with your most recent job a time, temporary or seasonal employee.	loyment, and all periods	of unempi	oyment.	
Name and Address of Employer	Start Date	Termin	ation Date	Job
				<u> </u>
15. Military Status:				
5. Military Status:  Have you served in the Unite If yes, attach a copy of disch			Yes	No
Have you served in the Unite	arge or separation pa		Yes	
Have you served in the Unite If yes, attach a copy of disch.  Do you claim veteran's prefe While in the military service convicted for any crime grad-	arge or separation pa rence? were you ever		Yes	No
Have you served in the Unite If yes, attach a copy of disch Do you claim veteran's prefe While in the military service	arge or separation pa rence? were you ever			No
Have you served in the Unite If yes, attach a copy of disch.  Do you claim veteran's prefe While in the military service convicted for any crime grad-	arge or separation pa rence? were you ever ed as a misdeamnor, of United States Res	pers	Yes	_ No
Have you served in the Unite If yes, attach a copy of disch. Do you claim veteran's prefe While in the military service convicted for any crime gradefelony or greater offense?  Are you presently a member	arge or separation pa erence? were you ever ed as a misdeamnor, of United States Res wes complete the follo	erve or	YesYes	_ No

## 16. Character references:

List only character references that have definite knowledge of your qualifications for the position of a police officer. List five (5) character references. Do not list relatives, former employers, or persons living outside of the United States.

	Name	Address	Home Phone Cell Phone Years Known
	<u> </u>		
		· · · · · · · · · · · · · · · · · · ·	
17	your suitabil	lity to perform the duties whi	nentioned herein which may reflect upon ch you may be called upon to take or  If yes, give details:
18.	Have you ev YesNo	er applied for a position with If yes, give details.	any other governmental agencies?
	·		
İ			
1	,		
19.	Remarks:		
Ī			
L			
comple I under	ng statements te, and correct stand that this	and answers, and that the ent to the best of my knowledge	ns, omissions, or falsifications in the cries made by me above are true, and belief and am made in good faith. ted subject to the penalties of 18 Pa. otherities.
Signate	re of Applicar		
wignair	ar or whhitear	11.	
<del></del>	<u></u> -	_	
Date			

### **Notification Procedure Release**

In the processing procedure required for applicants, it may become necessary to contact the applicant in the event they are being given further consideration for the position of police officer with the Township of Harmony.

If conventional methods fail in attempting to contact the applicant a certified-registered letter will be sent to the applicants address listed on the application. Should the registered letter be returned indicating that it was unclaimed or undelivered the applicant will be eliminated from further processing and consideration.

It is the applicant's responsibility to notify the Harmony Township Police, in writing of the address change. By affixing your signature to this form the applicant acknowledges that they have read and understood the contents of this procedure.

Date:	Signature:	
I	ackground Investigation Authorization	
If necessary, I hereby investigation.	authorized the Township of Harmony to do a background	1
Date:	Signature:	

## ESSENTIAL DUTIES OF A POLICE OFFICER

- 1. Running for several hundred yards;
- 2. Climbing over obstacles;
- 3. Crawling;

Printed Name

- 4. Pushing motor vehicles;
- 5. Pulling or carrying accident, fire or crime victims;
- 6. Using physical force to apprehend and subdue arrestees;
- 7. Withstanding prolonged exposure, to extreme weather conditions;
- 8. Withstanding prolonged periods of standing and sitting;
- 9. Withstanding frequent exposure to stress-producing situations such as encountering persons injured or killed by accidents, crimes or suicide;
- 10. Dealing with domestic disputes;
- 11. Dealing with verbal and physical abuse of the officer, including taunts, insults, and threats to the officer, family members, or fellow police officers;
- 12. Communicating effectively with individuals suffering from trauma;
- 13. Operating a motor vehicle for long periods of time;
- 14. Using a firearm effectively;
- 15. Filling out written reports in a clear and concise manner.

Signature

I can fully perform all duties without reasonable accommodations.  I can fully perform all duties but only with the following reasonable accommodation  List needed accommodations	ns:
I can fully perform all duties but only with the following reasonable accommodations  List needed accommodations	ns:
I cannot fully perform all duties even with reasonable accommodations.	

Date