

## **POLICE OFFICER CANDIDATE INFORMATION**

Thank you for inquiring about employment opportunities as a Police Officer with the Brookfield Police Department. The following pages contain information regarding salary, benefits, qualifications and the hiring process. If you have questions, please contact the Personnel Officer at 116 W. Brooks, Brookfield, Missouri 64628 or call 660-258-3385.

### **BENEFITS:**

LAGERS retirement system.  
Major medical insurance  
Dental insurance  
One week paid vacation after first year,  
two weeks per year after two years,  
three weeks after 5 years,  
three weeks maximum  
Eleven (11) paid holidays  
Sick leave at the rate of 8 hours per month

### **FURNISHED EQUIPMENT:**

Weapons / Ammunition  
Duty leather  
Uniforms  
Vehicles  
Radios  
Emergency equipment (lights and siren)

**THE BROOKFIELD POLICE DEPARTMENT IS AN EQUAL OPPORTUNITY EMPLOYER**

## **APPLICANT** **QUALIFICATIONS**

- \* Must be 21 years of age
- \* Must be a United States Citizen
- \* Must live within the 50 miles of Brookfield, Missouri by the end of 6 month probation period
- \* Must have a high school diploma or GED equivalent
- \* Must have at least 20/40 uncorrected vision or corrected to 20/20, with normal color vision
- \* Must hold a current Missouri Peace Officers License
- \* Must have valid Missouri driver's license
- \* Must have been honorably discharged from the United States Armed Forces, if applicable
- \* May not have felony convictions or misdemeanor convictions directly resulting from felony charges
- \* May not have excessive city ordinance or misdemeanor violation convictions or outstanding warrants
- \* May not have ever been convicted of domestic violence or an assault in connection with a domestic situation
- \* May not have an excessive traffic conviction history
- \* Must be drug free with no past pattern of drug abuse and pass drug screening test

**APPLICANTS**  
**REQUIRED DOCUMENTS**

**BIRTH CERTIFICATE:**

A certified copy of your birth certificate can be obtained from the Bureau of Vital Statistics in your state of birth, state capital.

**EDUCATION:**

A certified copy of your High School Diploma or General Education Development Certificate (G.E.D.) can be obtained by contacting the Board of Education in the city where your high school is located or where you obtained your G.E.D. If you are a college graduate, please submit a certified copy of your degree and transcript. If you did not complete a degree but have 60 or more credit hours, please submit a certified copy of your transcript.

**PHOTOGRAPH:**

Please submit a current (less than 1 year) color photograph of yourself for use in the background stage of the hiring process. You will be asked for the photograph at that stage.

**DD214:**

Please submit a Certificate of Release or Discharge from Active Duty.

**VALID IDENTITY DOCUMENT:**

This document can be an original state drivers license, state photo I.D. card, Certificate of Naturalization or Citizenship, etc.

**SOCIAL SECURITY CARD:**

You must submit a valid social security card.

**MISSOURI PEACE OFFICER CERTIFICATION:**

A copy of your Missouri Peace Officer License

**VALID MISSOURI DRIVERS LICENSE:**

A copy of your Missouri Drivers License

## **PROCESSING** **PROCEDURE**

### **RESUME / APPLICATION REVIEW:**

The applicant's resume and application will be reviewed for proper qualification, certifications, etc. Those successful applicants will be contacted for the Oral Examination or Interview.

### **ORAL EXAMINATION / INTERVIEW:**

A series of questions will be asked by a panel of three individuals to assess skills in dealing with people, problem solving, communications, initiative and stress tolerance. The applicants that most nearly match the qualifications of a successful Police Officer will progress to the next step in the qualification process.

### **WRITTEN EXAMINATION:**

The next step for the applicant for Police Officer is to take a written examination. The applicant must successfully pass a written test, failure to do so is an automatic disqualification.

### **BACKGROUND INVESTIGATION:**

The background investigation is the fourth step in the process and will cover pertinent facts about the applicant's character, work history, credit history, and any criminal or traffic record.

### **PHYSICAL EXAMINATION:**

Applicants will undergo a complete medical and eye examination and drug screen given by a licensed physician (after job offer has been made).

## **AUTHORIZATION FOR RELEASE OF INFORMATION**

**TO WHOM IT MAY CONCERN:** I am an applicant for a position with the Brookfield Police Department. The department needs to thoroughly investigate my employment background and personal history to evaluate my qualifications to hold the position for which I applied. It is in the public's interest that all relevant information concerning my personal and employment history be disclosed to the above department.

I hereby authorize any representative of the Brookfield Police Department bearing this release to obtain any information in your files pertaining to my employment records and I hereby direct you to release such information upon request of the bearer. I do hereby authorize a review of and full disclosure of all records, or any part thereof, concerning myself, by and to any duly authorized agent of the Brookfield Police Department, whether said records are of public, private, or confidential nature. The intent of this authorization is to provide full and free access to the background and history of my personal life, for the specific purpose or pursuing a background investigation that may provide pertinent data for the Brookfield Police Department to consider in determining my suitability for employment in that department. It is my specific intent to provide access to personnel information, however personal or confidential it may appear to be.

I consent to your release of any and all public and private information that you may have concerning me, my work record, my background and reputation, my military service records, educational records, my financial status, my criminal history record, including any arrest records, any information contained in investigatory files, efficiency ratings, complaints or grievances filed by or against me, the records or recollections of attorneys at law, or 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, attendance records, polygraph examinations, and any internal affairs investigations and discipline, including any files which are deemed to be confidential, and/or sealed.

I hereby release you, your organization, and all others from liability or damages that may result from furnishing the information requested, including any liability or damage pursuant to any state or federal laws. I hereby release you, as the custodian of such records including officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. I direct you to release such information upon request of the duly accredited representative of the Brookfield Police Department regardless of any agreement I may have made with you previously to the contrary. The law enforcement organization requesting the information pursuant to this release will discontinue processing my application if you refuse to disclose the information requested.

For and in consideration of the Brookfield Police Department's acceptance and processing of my application for employment, I agree to hold you, your agents and  
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employees harmless from any and all claims and liability associated with my application or employment or in any way connected with the decision whether or not to employ me

with the Brookfield Police Department. I understand that should information of a serious criminal nature surface as a result of this investigation, such information may be turned over to the proper authorities.

I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access and to disclosure of records, and I waive those rights with the understanding that information furnished will be used by the Brookfield Police Department in conjunction with employment procedures.

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

This waiver is valid for a period of 6 months from the date of my signature.

Should there be any questions as to the validity of this release, you may contact me at the address listed on this form.

I agree to pay any and all charges or fees concerning this request and can be billed for such charges at the address listed on this form.

I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request.

**Applicant's Name** \_\_\_\_\_

**Current Address** \_\_\_\_\_

\_\_\_\_\_

**Telephone** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_

**Social Security Number** \_\_\_\_\_

\_\_\_\_\_

**Applicant's Signature**

**Date**

Subscribed and sworn to before me the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Commissioned in \_\_\_\_\_, County, Missouri

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