

Pound Police Department

Chief of Police: Tony R. Baker

P.O. Box 880 Pound, Virginia 24279

Phone: (276) 298-6068 Fax: (276) 796-7289

Emergency Call 911

To: Police Applicants,

Thank you for considering Pound Police Department for employment. We are very proud of our police department and think it is one of the finest in Southwest Virginia. The following information is being supplied to give you a better understanding of our department, police work in general and to help process your application.

Please read all the attached information and if you meet the requirements for the position you are applying for, and do not fall into the category of automatic rejection, please complete the following documents; the Pre-Employment Standards Form (PPD-3), the Authorization for Release of Information Form (PPD-4) and the Town of Pound Police Department Application. Complete a separate application for each position applied for. **Do not send resumes or copies of certificates; these are not necessary during the initial application period.**

Your application is the first step in the hiring process. The quality of your application is important (neatness, clarity, legibility, and accuracy), as is your ability to follow directions given to you. The ability to accurately, neatly and completely file paperwork is an essential part of the job for which you are applying. Your application is and will be part of your interview. All applicants will be kept on file for six months.

You must follow these directions exactly: Failure to do so will result in the rejection of your application.

1. Be sure to date the application in the upper right hand corner of the first page.
2. Be sure to answer all questions truthfully and with N/A when not applicable, leave no question blank.
3. Be sure to indicate all of the types of employment you will accept (full time, part time, temporary).
4. Be sure to have the Authorization for Release of Information (PPD-4) notarized.
5. Be sure to indicate your days and hours available, if part time.
6. Be sure to list any difficulties you might have in meeting work schedules.
7. Please do not list Pound Police personnel in the references section.
8. Be sure to sign the application.
9. If you have held more jobs than space allow, use the Supplemental Experience Form (PPD-6) that is attached. Include all jobs that you have held.
10. Be sure to sign and have notarized where applicable, as failure to do so may result in the delay of the processing of your application.
11. Remember, honesty and integrity is a part of the job for which you are applying. Be certain to give complete and accurate answers to all questions.
12. Complete a separate application for each position applied for.
13. Do not send resumes or copies of certificates; they are not necessary during the initial application period.
14. When sealing the envelope, use tape or the metal clasp. Do not glue seal the envelope.
15. Only return the application for employment with the following forms: PPD-3, PPD-4, PPD-5, and PPD-6.
16. Return all documents at the same time in the sealed envelope (provided) as instructed above and address it to: Chief of Police: Tony R. Baker.

Thank you for your interest in Pound Police Department and good luck.

Sincerely,

Tony R. Baker
Chief of Police

Pound Police Department

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Requirements for ALL Applicants

1. Must be over 18 years of age.
2. Must be able to pass written entrance examination (if conducted). Training or experience in the law enforcement field **may or may not** be required for candidates taking the test.
3. Ability to pass statutory training requirements set forth by the Commonwealth of Virginia (attached).
4. Ability to cope with a variety of situations, firmly, courteously, tactfully & with the respect to the rights of citizens.
5. Ability to analyze situations quickly and objectively and act under a variety of circumstances.
6. Ability to express oneself clearly and concisely.
7. Ability to function normally when placed under temporary or prolonged stress.
8. Ability to control anger when insulted or threatened.
9. Ability to read with good comprehension.
10. Ability to pass an oral review panel if a panel is available.
11. Ability and willingness to comply with the Pound Police Department grooming standards.
12. Must be willing and able to perform essential job functions.
13. Ability to pass required interview with the Chief of Police or designee.
14. Ability to successfully undergo an extensive background investigation.

Requirements of Police Officer Applicants

1. Pass physical examination performed by licensed physician.
2. Ability to operate a motor vehicle in a safe manner and demonstrate such skills in the basic police academy and/or in an emergency situation.
3. Ability to apply principles of investigation and interrogation and applicable laws and ordinances.
4. Ability to develop skills with and to demonstrate the use of firearms.

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Minimum Entrance Standards

Definition of Work

This is a position that involves police work, which protects life and property through the enforcement of laws and ordinances and the investigation of crimes. Work is performed on an assigned shift under general guidance of a Supervisor, Senior Officer, or left to work alone on a shift. Assignments are difficult in nature and are carried out according to department rules, regulations and procedures. An employee must frequently use independent discretion and judgment as direct supervision is often not available. Work requires regular exposure to uncontrolled and/or unpredictable conditions and frequent exercise of moderate to immoderate physical effort.

Examples of Work

Patrols the town on foot, or in a car, to prevent and discover the commission of crime and to enforce traffic and parking regulations; answer calls and complaints, taking the necessary police actions, and enforces all Federal, State and local laws and ordinances. Responds to calls and complaints involving automobile accidents, robberies, and other misdemeanors and felonies. At the scene of crimes or accidents-administers first aid, conducts preliminary investigations, gathers evidence, locates witnesses and makes arrests when necessary. Investigates crimes, interrogates witnesses and suspects, and testifies in court. Issue warnings and citations of traffic violations. Answer inquiries from the public, provides information and direction to motorists. Prepares reports in regard to crimes, accidents and various other matters. Performs other related work as required.

Necessary Special Requirements

Set forth by the Commonwealth of Virginia as follows: 15.1-131.8 – Minimum qualifications; Waiver:

- A. The Chief of Police and all police officers of any county, city or town, all deputy sheriffs in this Commonwealth and all law enforcement officers as defined in Section 9-169 who enter upon the duties of such officer after July 1, 1988, are required to meet the following minimum qualifications for office. Such person shall (i) be a citizen of the United States, (ii) be required to undergo a background investigation including a fingerprint based criminal history records inquiry to the Central Criminal Records Exchange (iii) have a high school education or have passed the General Education Development exam, (iv) possess a valid Virginia driver's license, if required by the duties of the office to operate a motor vehicle, and (v) undergo a physical examination conducted under the supervision of a licensed physician.
- B. Upon request of a Sheriff or Chief of Police, or the Director or Chief Executive of any agency or department employing law enforcement officers, as defined in Section 9-169, the Department of Criminal Justice Services is hereby authorized to waive the requirements for qualification as set out in Subsection A of this section for good cause shown. (1982, c. 442; 1988, c. 396).

Desirable Preparation for Work

Associate degree in police science or related field or a successful experience involving considerable public contact.

Note: The Town of Pound Police Department is an equal opportunity/affirmative-action employer, & complies with the American Disability Act.

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Background Investigation Criteria

A. Automatic Rejection Criteria (Non-Traffic)

1. A felony conviction.
2. Use of cocaine, crank, hashish, speed, LSD, crack, heroin, PCP, or any other hallucinogen Drugs.

B. Automatic Rejection Criteria (Traffic)

1. DUI/DUID (Driving Under Influence)
2. Hit & Run.
3. Reckless driving-to wit; drag racing.
4. Attempting to elude police.
5. Felony involving the operation of a motor vehicle.

C. Examples of criteria that MAY be grounds for rejection; but not limited to the following:

1. Suspended/Revoked driver's license within the past four years.
2. Two or more traffic violations within the past four years (any not listed is automatic rejections criteria).
3. Termination from past employments due to delinquency or misconduct.
4. Misdemeanor arrests or convictions.
5. Bad credit history.

Taken into consideration when determining outcome of these criteria is when an incident occurred, how often, cause of violation, or reason for action taken against you, seriousness of conduct, and the circumstances.

Name: _____

Date: _____

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Application for Employment

AN EQUAL OPPORTUNITY EMPLOYER

All statements made by applicants for employment on this application form will be checked for accuracy. We offer equal employment opportunities to all persons.



PERSONAL INFORMATION

Name (Print): _____ Social Security #: _____

Present Address: _____ Best Contact #: _____

_____ Emergency Phone #: _____

City State Zip

If at present address less than one year, please give previous address: _____

Are you over the age of 18? Yes No If no, employment is subject to verification that you are of minimum legal age.

Are you prevented from lawfully becoming employed in this Country because of Visa or Immigration status? Yes No

Can you produce documented proof of your eligibility for employment in the United States? Yes No

(Either driver's license and Social Security card, birth certificate or Immigration and Naturalization Service Documents)

EDUCATION	Name & Address of School	Circle Last Year Completed	Graduated?	Subjects Studied & Degree(s) Received
<i>Elementary School</i>		5 6 7 8	<input type="radio"/> Yes <input type="radio"/> No	
<i>High School</i>		9 10 11 12	<input type="radio"/> Yes <input type="radio"/> No	
<i>College</i>		1 2 3 4	<input type="radio"/> Yes <input type="radio"/> No	
<i>Trade, Business or Correspondence School</i>		1 2 3 4	<input type="radio"/> Yes <input type="radio"/> No	

Subjects of special study or research work: _____

Position(s) applied for _____ How soon could you report to work? _____

Type of employment seeking: Full Time Part Time Temporary Rate of pay expected: _____

What days and hours, if part time? Sun Mon Tue Wed Thu Fri Sat Hours: _____

Do you have any reason to believe that you would have difficulty meeting this department's work schedule? Yes No If yes, explain: _____.

Have you ever applied for a job with us before? Yes No Have you worked for us before? _____

Have you ever been bonded? _____ Have you been refused a bond? _____

If so, state reason & date: _____

Have you ever served in the U.S. Armed Forces? ___ If yes, what branch? _____

Date entered: _____ Date discharged: _____

Have you ever been convicted of a violation of the law except a minor traffic violation? _____
 If so, state date, court, and place where offense occurred? _____

Have you ever been discharged or requested to resign from a position? _____
 Are you employed now? _____ If yes, may we contact your present employer? _____
 Have you ever held a position of trust (handling money or confidential material)? _____
 Why do you desire to make a change? _____

PRIOR WORK RECORD (*Start with most recent and present employer and complete in full*)		
Name & Address of most recent employer:		Telephone #: () _____ - _____
Immediate Supervisor (Name & Position):	Date Hired:	Starting Pay Rate:
Job Titles & Duties:	Date Left:	Last Pay Rate:
Reason for Leaving:		May we contact this employer? <input type="radio"/> Yes <input type="radio"/> No
Name & Address of Employer:		Telephone #: () _____ - _____
Immediate Supervisor (Name & Position):	Date Hired:	Starting Pay Rate:
Job Titles & Duties:	Date Left:	Last Pay Rate:
Reason for Leaving:		May we contact this employer? <input type="radio"/> Yes <input type="radio"/> No
Name & Address of Employer:		Telephone #: () _____ - _____
Immediate Supervisor (Name & Position):	Date Hired:	Starting Pay Rate:
Job Titles & Duties:	Date Left:	Last Pay Rate:
Reason for Leaving:		May we contact this employer? <input type="radio"/> Yes <input type="radio"/> No

Please provide any additional information such as special skills, training, management experience, equipment operation, or qualifications you feel will be helpful to us in considering your application: _____

REFERENCES-LIST THREE (Do not list Relatives, Neighbors, or Former Employers)		
<i>Name</i>	<i>Address</i>	<i>Phone</i>

NEIGHBORS-LIST THREE (Do not list Relatives, References, or Former Employers)		
<i>Name</i>	<i>Address</i>	<i>Phone</i>

JOB APPLICANT'S AGREEMENT & CERTIFICATION

"I certify that the information given by me in this application is true in all respect, and I agree that if the information given is found to be false in any way, it shall be considered sufficient cause for denial of employment or discharge. I authorize the use of any information on/in this application to verify my statement, and I authorize past employers, all references, and neighbors, and any other person to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages on account of having furnished such information."

"I understand that nothing contained in the employment application or in the granting of an interview is intended to create an employment contract between the company and myself for either employment or for the providing of any benefits. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the company unless made in writing. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that this company retains the same right."

"I agree to submit to a physical examination whenever requested, and I understand my becoming employed and/or continued employment are subject to the results of any physical examination related to my job duties in accordance with company policies and procedures. I understand that if employed, policies and rules which are issued are not conditions of employment and that the employer may revise policies or procedures in whole or in part, and at any time."

"I understand that this application will be kept on file for _____ days from the date completed, after which time I would have to reapply in accordance with established company procedures."

Signature of Applicant: _____ Date: _____
(Sign before Notary only)

Address: _____

Date of Birth: _____
Social Security Number: _____

Commonwealth of Virginia, County/City/Town of _____

On this day _____ personally appeared before me and acknowledged his/her signature to the above statement.

My commission expires on the _____ Day of _____ 20 _____

Notary Public _____ Date _____

Release of this information subject to this authorization is not in conflict with the Fair Credit Reporting Act, Public Law 91-508 nor Virginia Statutes relating to the Privacy Protection Act.

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Supplementary Experience Form

Position Applied For: _____

PPD-6

Applicant's Name: _____ **Social Security Number:** _____

Employer Name & Address: _____ Phone: _____

Immediate Supervisor (Name & Position): _____ Date Hired: _____ Date Left: _____

Your name if different from present: _____ Applicant's Job Titles & Duties: _____

Start Pay Rate: _____ Last Pay Rate: _____ (Full Time: ___ or Part Time: ___) Hours/Week: _____

Number of Employees Supervised: _____ Equipment Used: _____

Reason for Leaving: _____

Did you give a notice to this Employer? ___ If so, how much of a notice did you give? _____

Employer Name & Address: _____ Phone: _____

Immediate Supervisor (Name & Position): _____ Date Hired: _____ Date Left: _____

Your name if different from present: _____ Applicant's Job Titles & Duties: _____

Start Pay Rate: _____ Last Pay Rate: _____ (Full Time: ___ or Part Time: ___) Hours/Week: _____

Number of Employees Supervised: _____ Equipment Used: _____

Reason for Leaving: _____

Did you give a notice to this Employer? ___ If so, how much of a notice did you give? _____

Employer Name & Address: _____ Phone: _____

Immediate Supervisor (Name & Position): _____ Date Hired: _____ Date Left: _____

Your name if different from present: _____ Applicant's Job Titles & Duties: _____

Start Pay Rate: _____ Last Pay Rate: _____ (Full Time: ___ or Part Time: ___) Hours/Week: _____

Number of Employees Supervised: _____ Equipment Used: _____

Reason for Leaving: _____

Did you give a notice to this Employer? ___ If so, how much of a notice did you give? _____

Employer Name & Address: _____ Phone: _____

Immediate Supervisor (Name & Position): _____ Date Hired: _____ Date Left: _____

Your name if different from present: _____ Applicant's Job Titles & Duties: _____

Start Pay Rate: _____ Last Pay Rate: _____ (Full Time: ___ or Part Time: ___) Hours/Week: _____

Number of Employees Supervised: _____ Equipment Used: _____

Reason for Leaving: _____

Did you give a notice to this Employer? ___ If so, how much of a notice did you give? _____

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Previous Addresses

Position Applied For: _____

Applicant's Name: _____ **Social Security Number:** _____

Please list **ALL** previous addresses since your 18th birthday. Include physical addresses, not just P.O. Boxes. Include addresses that were temporary, such as: while away for college, etc. Do not fail to report **EVERY** place you have lived since your 18th birthday. Use a separate sheet, if needed.

↓ PHYSICAL ADDRESS & CORRESPONDING MAILING ADDRESS ↓	
Time Frame: (___ / ___) to (___ / ___) Ex. Mth/Year _____ / _____ (House # or Apartment # and Street) _____ (City, State, Zip)	___ (Check if same) _____ _____ _____
Time Frame: (___ / ___) to (___ / ___) Ex. Mth/Year _____ / _____ (House # or Apartment # and Street) _____ (City, State, Zip)	___ (Check if same) _____ _____ _____
Time Frame: (___ / ___) to (___ / ___) Ex. Mth/Year _____ / _____ (House # or Apartment # and Street) _____ (City, State, Zip)	___ (Check if same) _____ _____ _____
Time Frame: (___ / ___) to (___ / ___) Ex. Mth/Year _____ / _____ (House # or Apartment # and Street) _____ (City, State, Zip)	___ (Check if same) _____ _____ _____
Time Frame: (___ / ___) to (___ / ___) Ex. Mth/Year _____ / _____ (House # or Apartment # and Street) _____ (City, State, Zip)	___ (Check if same) _____ _____ _____
Time Frame: (___ / ___) to (___ / ___) Ex. Mth/Year _____ / _____ (House # or Apartment # and Street) _____ (City, State, Zip)	___ (Check if same) _____ _____ _____
Time Frame: (___ / ___) to (___ / ___) Ex. Mth/Year _____ / _____ (House # or Apartment # and Street) _____ (City, State, Zip)	___ (Check if same) _____ _____ _____

↓ PHYSICAL ADDRESS & CORRESPONDING MAILING ADDRESS ↓	
Time Frame: (___ / ___) to (___ / ___) Ex. Mth/Year _____ / ____ (House # or Apartment # and Street) _____ (City, State, Zip)	___ (Check if same) _____ _____ _____
Time Frame: (___ / ___) to (___ / ___) Ex. Mth/Year _____ / ____ (House # or Apartment # and Street) _____ (City, State, Zip)	___ (Check if same) _____ _____ _____
Time Frame: (___ / ___) to (___ / ___) Ex. Mth/Year _____ / ____ (House # or Apartment # and Street) _____ (City, State, Zip)	___ (Check if same) _____ _____ _____
Time Frame: (___ / ___) to (___ / ___) Ex. Mth/Year _____ / ____ (House # or Apartment # and Street) _____ (City, State, Zip)	___ (Check if same) _____ _____ _____
Time Frame: (___ / ___) to (___ / ___) Ex. Mth/Year _____ / ____ (House # or Apartment # and Street) _____ (City, State, Zip)	___ (Check if same) _____ _____ _____
Time Frame: (___ / ___) to (___ / ___) Ex. Mth/Year _____ / ____ (House # or Apartment # and Street) _____ (City, State, Zip)	___ (Check if same) _____ _____ _____
Time Frame: (___ / ___) to (___ / ___) Ex. Mth/Year _____ / ____ (House # or Apartment # and Street) _____ (City, State, Zip)	___ (Check if same) _____ _____ _____

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Pre-Employment Standards Form

Position Applied For: _____

I, _____, do hereby affirm that responses to the below are true and accurate:

- A. 18 YEARS OF AGE OR OLDER. _____ (YES) or _____ (NO)
- B. HIGH SCHOOL GRADUATE or GED. _____ (YES) or _____ (NO)
- C. U.S. CITIZEN. _____ (YES) or _____ (NO)
- D. WILL UNDERGO BACKGROUND CHECK. _____ (YES) or _____ (NO)
WILL UNDERGO FINGERPRINT CHECK. _____ (YES) or _____ (NO)
- E. POSSESS VALID VA DRIVER'S LICENSE. _____ (YES) or _____ (NO)
- F. WILL UNDERGO EXAMINATION BY DOCTOR. _____ (YES) or _____ (NO)
- G. HAVE BEEN CONVICTED OF A FELONY. _____ (YES) or _____ (NO)
- H. HAVE BEEN CONVICTED OF A MISDEMEANOR ON FEDERAL, STATE, OR LOCAL LEVEL RELATING TO:
1. FORCE. _____ (YES) or _____ (NO)
 2. VIOLENCE. _____ (YES) or _____ (NO)
 3. THEFT. _____ (YES) or _____ (NO)
 4. DISHONESTY. _____ (YES) or _____ (NO)
 5. GAMBLING. _____ (YES) or _____ (NO)
 6. ALCOHOL/DRUGS. _____ (YES) or _____ (NO)
- I. DUI CONVICTION (DRIVING UNDER INFLUENCE). _____ (YES) or _____ (NO)
- J. FELONY CONVICTION WITH MOTOR VEHICLE. _____ (YES) or _____ (NO)
- K. HIT & RUN CONVICTION. _____ (YES) or _____ (NO)

CERTIFICATIONS

- A. I AM A CURRENT VA CERTIFIED POLICE OFFICER. _____ (YES) or _____ (NO)
- B. I AM EMD CERTIFIED. _____ (YES) or _____ (NO)
- C. I AM CPR CERTIFIED. _____ (YES) or _____ (NO)
- D. I AM EVOC CERTIFIED. _____ (YES) or _____ (NO)
- E. I AM INTOXIMETER CERTIFIED. _____ (YES) or _____ (NO)
- F. I AM ASP CERTIFIED. _____ (YES) or _____ (NO)
- G. I AM O/C CERTIFIED. (PEPPER SPRAY) _____ (YES) or _____ (NO)
- H. I AM A GENERAL INSTRUCTOR. _____ (YES) or _____ (NO)

_____/_____
Signature Date

_____/_____
(Witness Signature) Date

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Authorization for Release of Information Form

Position Applied For: _____

TO: Any doctor, hospital, medical association, U.S. Armed Forces, Maritime Services, Veteran's Administration, or

Any academic Dean, Registrar, Principal, Guidance Counselor, other authorized person at a school, college, business, trade or high school, or

Any past or present employer, Credit Bureau or Retail Merchants Association, bank financial institutions or any other credit extending agency, or any State, Federal, County, Town agency or Municipality

I, _____ Address _____

Have applied for employment with the Pound Police Department. I am aware that my entire background is to be investigated. I hereby authorize and request the release of any and all information you have concerning me (including a transcript of any academic records) to the Pound Police Department or its agent upon presentation of this release of copy hereof.

I am further aware that this investigation may not begin or be concluded for an undetermined amount of time after the execution of this document and I authorize this document to be recognized as valid until such time as my background investigation has been completed.

Armed Force Service of Serial Number, if any _____

Veterans Administration Claim Number, if any _____

Social Security Number _____

Signature _____

(Sign before Notary only)

Commonwealth of Virginia, County/City/Town of _____

This day _____ personally appeared before me and acknowledged his/her signature to the above statement.

My commission expires on the _____ Day of _____ 20 _____

Notary Public _____

Release of this information subject to this authorization is not in conflict with the Fair Credit Reporting Act, Public Law 91-508 nor Virginia Statutes relating to the Privacy Protection Act.