



CITY OF MISHAWAKA NOTICE TO CANDIDATES



The following documents must be submitted with your application. Copies are sufficient with the application; however, you will be asked to provide the original documents later in the process.

1. Birth certificate
2. Valid driver's license

The following documents will also be required as you advance through the process:

1. Accredited high school diploma
2. High school & college transcripts
3. DD Form 214 (for those having served in the Armed Forces)

You are hereby advised that should you fail to meet/pass any of the following requirements, your application will not be processed further.

1. Police Department Written Examination
2. Physical Agility Test
3. Criminal History Check
4. Oral Interview
5. Background Investigation
6. Polygraph Examination

Should an applicant successfully meet the above requirements and be offered a position with the Mishawaka Police Department, he/she must successfully pass the following tests for appointment to the department:

1. Psychological evaluation
2. Doctor's physical exam/vision requirements
3. Drug test

Each applicant who fails to meet the minimum requirements will be informed in writing of such result as soon as practical.

FOR QUESTIONS OR FURTHER INFORMATION, PLEASE CONTACT:

Human Resources Department
100 Lincolnway West
Mishawaka, Indiana 46544
(574) 258-1615

REQUIREMENTS FOR MISHAWAKA POLICE DEPARTMENT APPLICANTS

A. RESIDENCY

1. Must be a United States citizen
2. You must have adequate means of transportation into the jurisdiction served by the member's department; and
3. You must maintain telephone service to communicate with the department

B. AGE

1. Applicant must meet the age requirements established by Indiana Law.

C. DRIVER'S LICENSE AND RECORD OF GOOD DRIVING

1. Each applicant must have a valid driver's license, a good driving record (i.e. no convictions that might affect your ability to drive a high-performance vehicle) and be insurable.

D. PHYSICAL CONDITION RELATED TO POLICE PERFORMANCE

1. Able to perform all the essential physical requirements of a law enforcement officer.
2. Pass the Mishawaka Police Department physical agility test to demonstrate your ability to perform certain job-related physical activities.
3. Psychological Evaluation once an offer of employment has been made
4. Pass the minimum physical fitness standard as adopted by the Indiana Law Enforcement Academy

E. ACADEMIC ABILITIES

1. Accredited High School diploma or GED.
2. Ability to read and write the English language.
3. Ability to read and understand Police Department manuals.
4. Ability to read, understand, interpret and apply the Indiana Criminal Code
5. Effective interpersonal and communication skills
6. A general understanding of mathematics.
7. Mechanical aptitude and manual dexterity sufficient to use the police radio, vehicles, equipment, fingerprint kit, weapons and other tools related to the position.
8. Applicant will be required to take a written test of basic skills and perform at a minimum level set by the Mishawaka Police Department.

F. PERSONAL ATTRIBUTES

1. Self-motivation
2. Reliability
3. Ability to accept supervision and follow rules
4. Ability to work with others as a team

G. PASSAGE OF THE FOLLOWING:

- | | |
|-----------------------------|-----------------------------|
| 1. Written Test | 5. Polygraph Examination |
| 2. Physical Agility Test | 6. Psychological Evaluation |
| 3. Background Investigation | 7. Physical Exam |
| 4. Oral Interview | |

H. CHARACTER AND BACKGROUND

Because of the highly sensitive nature of police work, applicants may be rejected if the background investigation reveals: current or recent drug use or any drug dealing, domestic violence arrests or convictions (historical or current), felony convictions or convictions for certain misdemeanor offenses which would adversely affect the person's credibility as a law enforcement officer, acts of dishonesty or theft, employment history of dishonesty, tardiness or absenteeism, inability to deal effectively with the public or fellow workers, or other factors (i.e. protective orders whether historical or current) that would indicate an individual is not fit to perform the duties of a law enforcement officer.

If you are offered contingent employment, you will have a physical examination to determine if you meet the physical requirements for acceptance by the Pension Board, which is a requirement for being appointed as a sworn law enforcement officer.

**YOU MUST ANSWER ALL QUESTIONS COMPLETELY AND
TRUTHFULLY OR YOUR APPLICATION WILL BE REJECTED**

MISHAWAKA POLICE DEPARTMENT APPLICANT TESTING PROCEDURES

Individuals who desire appointment to the Mishawaka Police Department shall submit an application to the City of Mishawaka Human Resources Department.

100 Lincolnway West
Mishawaka, Indiana 46544
574-258-1615

- All qualified applicants will receive an email advising them of the date, time, place and other details about the written test and physical agility test.
- The written test will be administered by Human Resources and Police personnel. Following the written test, the physical agility test will be administered. The physical agility test shall conform with and be graded according to standards for police officers set by the Indiana Law Enforcement Academy (ILEA). Applicants are given the results of the agility test at its completion.
- Within two (2) weeks after written test results are received by the Human Resources Department, all applicants will be notified what scores they received and whether they passed or failed. Applicants who failed can retest at the next available testing date. The Human Resources Department will eliminate the name of any candidate whose police records check discloses a disqualifying factor, or who fails to meet the minimum requirements to become a police officer in the State of Indiana.
- Each application will be reviewed carefully along with test results. Reviewing officers will determine the order in which applicants proceed to the next phase of the process. Those selected will be sent notice via email, advising them of the details about an oral interview.
- After an oral interview, the interview board will rank all the applicants and select those to advance to the next phase of the process, a thorough background investigation.
- Thorough background investigations will be conducted by a certified background investigator on each applicant selected. The background investigation will include, but will not be limited to:
 - Criminal History
 - Driving Record
 - Financial History
 - Interviews with listed references
 - Interviews with past employers
 - Interviews with family members
 - Personal Interview with background investigator
- If there are no disqualifying factors revealed in the background investigation, selected applicants will be offered employment prior to a polygraph test.
- The polygraph test will be coordinated through the Mishawaka Police Department and administered by a qualified polygraph operator.
- After passing the polygraph examination, the applicant or applicants will be scheduled for a psychological evaluation prescribed by Indiana statute.
- After passing the psychological evaluation, the applicant will be scheduled for the physical examination prescribed by Indiana statute and the pre-employment drug testing required by the City of Mishawaka.

- Using all the test results and other information available, the Chief of Police shall recommend applicant(s) to the Pension Board to fill the vacancies on the police department. The Pension Board shall meet to review the recommended applicant(s) who have passed all of the required tests and examinations. Those applicant(s) will be invited to attend the local Police Pension Board meeting for an explanation of the Police Pension Fund.
- After an applicant has been approved by the Pension Board, the applicant's medical records and other necessary documentation shall be delivered to the Indiana Public Retirement System for review and action.
- After an applicant has been approved by the Pension Board and INPRS, the Chief of Police will report such approvals to the Mayor and the Human Resources Department for consideration of hiring the applicant as a police recruit.
- Once a police recruit has completed the requirements of the Indiana Law Enforcement Academy, the recruit will be presented to the Mishawaka Board of Public Works and Safety, be administered the Policeman's Oath, and shall become a probationary Mishawaka Police Officer on the date designated by the Board.
- Additional vacancies in the police department will be filled from the current pool of eligible candidates or applicants who are currently employed as law enforcement officers with other agencies. If a candidate did not get hired during the current test cycle, he/she must notify Human Resources of their intent to be considered for a future test cycle. The physical agility and background tests must be retaken each test cycle. The written aptitude test is valid for 2 years (if passed).
- Applicants who are currently certified, or eligible to be certified, as police officers in the State of Indiana will be exempt from taking the written and physical tests for one year after graduation from the Indiana Law Enforcement Academy.

MISHAWAKA POLICE DEPARTMENT

WRITTEN TEST

The Mishawaka Police Department administers:

The National Police Officer Selection Test (POST)

The National Police Officer Selection Test (POST) is an entry-level basic skills test that helps law enforcement agencies select the most qualified applicants by ensuring that candidates possess the basic cognitive skills necessary to successfully perform the job. The POST is a valid, job-related test designed specifically for law enforcement use, which measures these basic skills: Arithmetic, Reading Comprehension, Grammar and Incident Report Writing.

Prior to the test, qualified applicants will receive an invitation email from the Human Resources Department informing the applicant of the various aspects of the testing process.

Tips on a successful written test:

1. Answer every question on the test.
2. Take your time.
3. Listen carefully to all instructions.
4. Get a good night's rest the night before the test.
5. Visit the Study Guide and Practice test link at <https://www.applytoserve.com/study>

REMEMBER: Notify the Human Resources Department of any address or telephone number changes after you submit an application.

MISHAWAKA POLICE DEPARTMENT

PHYSICAL FITNESS ASSESSMENT TEST

The Physical Fitness Assessment Test is comprised of six (6) fitness components. Each component will be measured on testing day and will be scored as: **Pass or Fail**

1. Vertical Jump

- a. The vertical jump measures leg power and measures how high a person can jump from a stationary position.
- b. Candidates must be able to jump vertically a **minimum of sixteen (16) inches**.

2. Push-Ups

- a. Push-ups measure muscular endurance of the upper body.
- b. Candidates must be able to perform **twenty-five (25) strict push-ups** (no time limit).

3. Sit-Ups

- a. Sit-Ups measure abdominal or core endurance.
- b. Candidates must be able to perform **twenty-nine (29) strict sit-ups in 1 minute**.

4. 300 Meter Run

- a. The 300 meter run measures aerobic power, or the ability to perform an intense burst of effort for a short period of time or distance.
- b. Candidates must be able to **run 300 meters in seventy-one (71) seconds or less**.

5. 1.5 Mile Run

- a. The 1.5 mile run measures cardiovascular endurance over an extended period of time.
- b. Candidates must be able to **run one and one half miles (1.5) in sixteen minutes and twenty eight seconds (16:28)**.



City of Mishawaka

Application for Employment

As legally required, the City makes equal employment opportunities available to all without regard to race, sex, age, color, religion, national origin, disability, citizenship status, military status, genetic information, or any other category protected under federal, state, or local law. This policy applies to applicants and employees and to all aspects of employment including hiring, promotion, demotion, pay or other forms of compensation, and termination of employment. Further, irrespective of whether sexual orientation or transgender status are legally protected statuses, the City does not tolerate discrimination on the basis of sexual orientation or transgender status.

ALL ENTRIES MUST BE CLEAR AND LEGIBLE

PERSONAL INFORMATION										
LAST NAME			FIRST NAME			M.I.		MAIDEN NAME		
STREET ADDRESS					CITY			STATE	ZIP	
HOME PHONE (xxx) xxx-xxxx			CELL PHONE (xxx) xxx-xxxx			EMAIL				
DATE OF BIRTH	DRIVERS LICENSE NUMBER		STATE	SOCIAL SECURITY NUMBER			PLACE OF BIRTH		U.S. CITIZEN? [] YES [] NO	
ARE YOU CURRENTLY CERTIFIED AS A LAW ENFORCEMENT OFFICER IN THE STATE OF INDIANA? [] YES [] NO					PSID #:		ACADEMY CLASS #:			
DID YOUR MOTHER OR FATHER DIE IN THE LINE OF DUTY WHILE SERVING AS A FIREFIGHTER OR MUNICIPAL/COUNTY POLICE OFFICER?								[] YES [] NO		
DATE AVAILABLE FOR WORK:		ARE YOU PRESENTLY EMPLOYED? [] YES [] NO			MAY WE CONTACT YOUR PRESENT EMPLOYER? [] YES [] NO					
HAVE YOU PREVIOUSLY APPLIED TO THE MISHAWAKA POLICE DEPARTMENT? [] YES [] NO			DATE(S):							
POLICE DEPARTMENTS WHERE YOU HAVE APPLIED:										
HAVE YOU PREVIOUSLY BEEN EMPLOYED BY THE CITY OF MISHAWAKA? [] YES [] NO			FROM DATE:		TO DATE:		DEPARTMENT			
DO YOU HAVE RELATIVES WORKING FOR THE CITY OF MISHAWAKA? [] YES [] NO			NAME			DEPARTMENT		RELATIONSHIP		
MILITARY SERVICE INFORMATION (if applicable)										
DATE FROM	DATE TO	BRANCH OF SERVICE			RANK OR GRADE		TYPE OF DISCHARGE (ATTACH DD-214)			
DATE FROM	DATE TO	BRANCH OF SERVICE			RANK OR GRADE		TYPE OF DISCHARGE (ATTACH DD-214)			
ARE YOU A MEMBER OF THE ACTIVE RESERVES? [] YES [] NO										
RESIDENTIAL HISTORY (Last 10 years; use additional sheet if necessary)										
DATE FROM	STREET ADDRESS									
DATE TO	CITY			STATE		ZIP	PHONE (xxx) xxx-xxxx			
DATE FROM	STREET ADDRESS									
DATE TO	CITY			STATE		ZIP	PHONE (xxx) xxx-xxxx			
DATE FROM	STREET ADDRESS									
DATE TO	CITY			STATE		ZIP	PHONE (xxx) xxx-xxxx			
DATE FROM	STREET ADDRESS									
DATE TO	CITY			STATE		ZIP	PHONE (xxx) xxx-xxxx			
DATE FROM	STREET ADDRESS									
DATE TO	CITY			STATE		ZIP	PHONE (xxx) xxx-xxxx			

EDUCATION					
HIGH SCHOOL	NAME	PHONE NUMBER	GRAD DATE (m/y)	<input type="checkbox"/>	DIPLOMA
				<input type="checkbox"/>	GED
STREET ADDRESS		CITY	STATE	ZIP	
HIGH SCHOOL	NAME	PHONE NUMBER	GRAD DATE (m/y)	<input type="checkbox"/>	DIPLOMA
				<input type="checkbox"/>	GED
STREET ADDRESS		CITY	STATE	ZIP	
COLLEGE / UNIVERSITY	NAME		COMPLETED	GRAD DATE	
			1 2 3 4 5		
STREET ADDRESS		CITY	STATE	ZIP	
AREA OF STUDY			DEGREE		
COLLEGE / UNIVERSITY	NAME		COMPLETED	GRAD DATE	
			1 2 3 4 5		
STREET ADDRESS		CITY	STATE	ZIP	
AREA OF STUDY			DEGREE		
OTHER EDUCATION AND TRAINING <i>(Vocational/Technical/Academy Training, Law Enforcement Certifications, etc.)</i>					
SCHOOL / LOCATION			DATE FROM	DATE TO	
TYPE OF TRAINING					
SCHOOL / LOCATION			DATE FROM	DATE TO	
TYPE OF TRAINING					
SCHOOL / LOCATION			DATE FROM	DATE TO	
TYPE OF TRAINING					
LIST ANY SPECIAL SKILLS, TRAINING, EXPERIENCES, ETC. INCLUDING LANGUAGES SPOKEN (OTHER THAN ENGLISH) AND DEGREE OF PROFICIENCY					
LIST ANY PREVIOUS LAW ENFORCEMENT EXPERIENCE (OTHER THAN EMPLOYMENT – E.G. SPECIAL OPERATIONS, VOLUNTEER, MILITARY, ETC.)					
REFERENCES <i>(Business or Professional who are not related to you)</i>					
NAME			PHONE (xxx) xxx-xxxx		
STREET ADDRESS		CITY	STATE	ZIP	
BUSINESS / OCCUPATION					
NAME			PHONE (xxx) xxx-xxxx		
STREET ADDRESS		CITY	STATE	ZIP	
BUSINESS / OCCUPATION					
NAME			PHONE (xxx) xxx-xxxx		
STREET ADDRESS		CITY	STATE	ZIP	
BUSINESS / OCCUPATION					

EMPLOYMENT EXPERIENCE (Last 10 years starting with the most recent first)

EMPLOYER NAME				PHONE (xxx) xxx-xxxx			
STREET ADDRESS			CITY		STATE	ZIP	
JOB TITLE			SUPERVISOR		PHONE (xxx) xxx-xxxx		
FROM	TO	WORK PERFORMED					
STARTING WAGE	FINAL WAGE						
REASON FOR LEAVING (required)							
EMPLOYER NAME				PHONE (xxx) xxx-xxxx			
STREET ADDRESS			CITY		STATE	ZIP	
JOB TITLE			SUPERVISOR		PHONE (xxx) xxx-xxxx		
FROM	TO	WORK PERFORMED					
STARTING WAGE	FINAL WAGE						
REASON FOR LEAVING (required)							
EMPLOYER NAME				PHONE (xxx) xxx-xxxx			
STREET ADDRESS			CITY		STATE	ZIP	
JOB TITLE			SUPERVISOR		PHONE (xxx) xxx-xxxx		
FROM	TO	WORK PERFORMED					
STARTING WAGE	FINAL WAGE						
REASON FOR LEAVING (required)							
EMPLOYER NAME				PHONE (xxx) xxx-xxxx			
STREET ADDRESS			CITY		STATE	ZIP	
JOB TITLE			SUPERVISOR		PHONE (xxx) xxx-xxxx		
FROM	TO	WORK PERFORMED					
STARTING WAGE	FINAL WAGE						
REASON FOR LEAVING (required)							
EMPLOYER NAME				PHONE (xxx) xxx-xxxx			
STREET ADDRESS			CITY		STATE	ZIP	
JOB TITLE			SUPERVISOR		PHONE (xxx) xxx-xxxx		
FROM	TO	WORK PERFORMED					
STARTING WAGE	FINAL WAGE						
REASON FOR LEAVING (required)							
EMPLOYER NAME				PHONE (xxx) xxx-xxxx			
STREET ADDRESS			CITY		STATE	ZIP	
JOB TITLE			SUPERVISOR		PHONE (xxx) xxx-xxxx		
FROM	TO	WORK PERFORMED					
STARTING WAGE	FINAL WAGE						
REASON FOR LEAVING (required)							

VEHICLE ACCIDENT RECORD *(List the vehicle accidents in which you have been a driver)*

DATE	LOCATION	DESCRIBE WHAT HAPPENED

TRAFFIC OFFENSE RECORD *(List the traffic offenses for which you have been arrested or received a ticket)*

DATE	LOCATION	CHARGE	DISPOSITION

CRIMINAL OFFENSE RECORD *(List the criminal offenses for which you have been arrested, cited or detained)*

DATE	LOCATION	CHARGE	DISPOSITION

ARE YOU CURRENTLY THE SUBJECT OF OR PARTY TO ANY CRIMINAL INVESTIGATION INCLUDING DOMESTIC VIOLENCE? YES
 NO

DO YOU CURRENTLY OR HAVE YOU EVER HAD A PROTECTIVE ORDER AGAINST YOU? YES
 NO

IF YES TO ANY ABOVE, PLEASE EXPLAIN:

DRUG HISTORY INVOLVEMENT

WITH REGARD TO ILLEGAL DRUGS, HAVE YOU EVER: BOUGHT YES NO USED YES NO
 SOLD YES NO MANUFACTURED YES NO

IF YES TO ANY ABOVE, PLEASE EXPLAIN:

MISCELLANEOUS

LIST ANY HOBBIES, LEISURE ACTIVITIES AND SPECIAL INTERESTS YOU HAVE:

LIST ANY CLUBS AND/OR COMMUNITY ORGANIZATIONS YOU CURRENTLY BELONG TO OR HAVE BELONGED TO IN THE PAST 10 YEARS:

PHYSICAL WAIVER AND AUTHORIZATION

I understand that as an applicant to the Mishawaka Police Department, I will be required to demonstrate my ability to meet certain departmental standards by performance of certain physical activities, and that I will be given specific instructions in the manner in which these tasks are to be performed. I understand that some of these tasks may consist of the following:

- Vertical Jump
- One Minute Sit-ups
- 300 Meter Run
- Maximum Pushups
- 1.5 Mile Run

I am fully aware and understand that during the course of this physical agility test, I may be injured. If I am in fact injured during the testing, I agree to release and discharge the City of Mishawaka, its agents, employees, and officers from any and all liability connected with these activities and waive any rights I may have against the City of Mishawaka, and its agents and employees in connection therewith.

I also agree to indemnify and forever hold harmless the City of Mishawaka, its agents, employees and officers against and from any cause of action in law or equity which hereafter may be instituted against the City of Mishawaka, or the Mishawaka Police Department by myself or by any other person for the purpose of enforcing a claim for damages on account of personal injury, property damage, mental or conscious suffering, arising out of my participation in any or all of the test as required under the Mishawaka Police Department hiring procedures, Indiana State Laws, or otherwise.

I am aware of the physical effort which this test involves, and I am physically capable of participating in this test. I further understand and agree that should I fail to complete this test, I will be ineligible to participate further in the application process.

In case of emergency, I authorize you to contact:

EMERGENCY CONTACT INFORMATION			
LAST NAME		FIRST NAME	
STREET ADDRESS		CITY	STATE ZIP
HOME PHONE (xxx) xxx-xxxx	CELL PHONE (xxx) xxx-xxxx	HOSPITAL PREFERENCE	

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize a background check, credit check, and motor vehicle check as well as investigation of all statements contained in this application as may be necessary in arriving at an employment decision. I understand that this application is not intended to be a contract of employment.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of the City.

I understand that if I am offered employment with the City, it may be necessary to undergo a physical exam and/or drug test. Employment will be contingent on the results of these tests.

I authorize any physician to determine my ability to perform the duties of a job for which I am being considered prior to employment, or in the future, during my employment with the City.

RECORDS AND REFERENCE CHECK
GENERAL WAIVER AND AUTHORIZATION FOR RELEASE

I hereby authorize any and all schools, physicians, hospitals, Armed Services, employers, law enforcement agencies, credit information agencies, or any other person or organization or agency to furnish to the Mishawaka Police Department, or its designated agent(s) any and all current and/or past information, opinions, reason for leaving, documents and records which may be requested; and 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 Mishawaka Police Department, or its designated agent(s), any right I may have to said information.

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 Mishawaka, 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.

APPLICANT SIGNATURE (DO NOT SIGN UNTIL YOU ARE IN THE PRESENCE OF A NOTARY PUBLIC)	
DATE	APPLICANT SIGNATURE

NOTARY PUBLIC	
State of Indiana County of _____	
Before me, the undersigned, a Notary Public, for _____ County, State of Indiana, personally appeared the above subject, _____ and acknowledged the execution of the foregoing instrument this _____ day of _____, _____.	
_____ Notary Public Resident of _____ County	
My Commission Expires: _____	

Resumes and applications may be submitted via email, fax, regular mail, in person, or online to:

Mail: Human Resources
City of Mishawaka
100 Lincolnway West
Mishawaka, Indiana 46544
Fax: (574) 254-0197
Email: humanresources@mishawaka.in.gov



VOLUNTARY AFFIRMATIVE ACTION SURVEY

TO BE COMPLETED BY APPLICANT – TO BE FILED SEPARATELY FROM APPLICATION
City of Mishawaka, located in Indiana / An Equal Opportunity Employer

As legally required, the City makes equal employment opportunities available to all without regard to race, sex, age, color, religion, national origin, disability, citizenship status, military status, genetic information, or any other category protected under federal, state, or local law. This policy applies to applicants and employees and to all aspects of employment including hiring, promotion, demotion, pay or other forms of compensation, and termination of employment. Further, irrespective of whether sexual orientation or transgender status are legally protected statuses, the City does not tolerate discrimination on the basis of sexual orientation or transgender status.

Completion Of Information Below Is Voluntary

Please be advised that your survey is considered confidential information and it is NOT a part of your official application for employment. Inclusion or exclusion of any data will NOT affect any employment decision.

In an effort to comply with government requirements regarding recordkeeping, reporting, and other legal obligations, we ask that you complete this application data survey. *Thank you for your cooperation.*

PERSONAL INFORMATION

Date: _____

Applicant's Name: _____

Address: _____ City, State, Zip: _____

Position Applied For: _____

REFERRAL SOURCE

Check All That Apply

- Advertisement
- Relative
- School
- City Employee
- Walk-In
- Private Employment Agency
- Government Employment Agency
- Other

Name of Source (if applicable)

GOVERNMENT REQUESTED INFORMATION

Male Female

Check One Of The Following Race / Ethnic Groups

- Asian
- Black or African American
- Caucasian / White
- Hispanic or Latino
- Native American or Alaskan Native
- Native Hawaiian or Other Pacific Islander
- Two or More Races

Check All That Apply

- Veteran
- Disabled Veteran
- Vietnam Era Veteran
- Disabled Individual