



# Forest View Police Department

7000 46th Street, Forest View, Illinois 60402

Tx: 708-788-0318

Fax: 708-788-2136

[www.forestview-il.org](http://www.forestview-il.org)

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## Village of Forest View Police Department

Lateral (full-time, part-time)

Entry Level Police Officer

Application Packet

First and foremost, the Forest View Police Department wants to thank you for your interest in joining our team. Enclosed you will find information regarding our Lateral / Entry Level hiring process as well as the necessary documents which must be completed and submitted in order to be considered for employment. *Please review these documents carefully.*

Additional application packets can be found at: Forest View Police Department and Village of Forest View Website shown above.

### REQUIRED DOCUMENTS:

- Application for Employment (pages 2-7)
  - Authorization for Disclosure of Social Networking Information
  - Employment Release of Information
  - Police Officer Employment Agreement
  - Police Officer Application Certification and Penalty Acknowledgement
- Resume
- PTB ID Number or other qualifying certification ID type and number (if out of state)
- Photocopy of Driver's License and Social Security
- Certified Transcripts for Credit Hours obtained from an accredited educational institution
  - Proof of completion of highest level of education

### TO SUBMIT

Once completed, completed application and required documents, must be turned in either in-person or by certified mail to the Village of Forest View Chief of Police.

No electronic submissions will be allowed. Applications are accepted year-round. For more information, please call 708-788-0318.

# **JOB APPLICATION**

Forest View Police Department is an equal-opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a department representative.

Please fill out all of the sections below:

Date of Application: \_\_\_\_\_

## **Applicant Information**

Applicant Name: \_\_\_\_\_ D.O. B: \_\_\_\_\_

Address: \_\_\_\_\_

City State Zip Code

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

## **Driving History**

Do you possess a valid Driver's License? Yes / No

License Number: \_\_\_\_\_ State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

As a driver, have you ever been involved in a traffic accident? Yes / No

If Yes, please explain: date, location, nature of accident:

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Have you ever been refused a driver's or chauffeur's license by any state? Yes / No

Has your license ever been suspended, revoked, or placed on probation? Yes / No

## **Employment Position**

Position(s) applying for: \_\_\_\_\_

How did you hear about this position? \_\_\_\_\_

What days are you available to work? \_\_\_\_\_

What hours or shifts are you available to work? \_\_\_\_\_

Are you available to work overtime? \_\_\_\_\_

What date are you available to start? \_\_\_\_\_

Do you have reliable transportation? \_\_\_\_\_

If Lateral (Salary desired): \_\_\_\_\_

**Personal Information**

Do you have any friends, relatives, or acquaintances working for Forest View Police Department? Yes No  
If yes, state name & relationship. \_\_\_\_\_

Are you a U.S. citizen? Yes No

Will you consent to a mandatory controlled substance test? Yes No

Do you have any condition(s) which would require job accommodations? Yes No

If yes, please describe the accommodations required below.

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a criminal offense (felony or misdemeanor)? Yes No

If yes, please state the nature of the crime(s), when and where convicted, and the disposition of the case:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)*

**Job Skills/Qualifications**

As of today, do you obtain the following?

State-certified Law Enforcement Officer: Yes / No **PTB ID Number:** \_\_\_\_\_ or  
Other Identifier (if out of state): \_\_\_\_\_

State-certified Corrections Officer: Yes / No

Associate's Degree: Yes / No

Bachelor's Degree: Yes / No

Please list below the skills and qualifications you possess for the position for which you are applying:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(Note: Forest View Police Department complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.)*

**Education and Training**

**High School:** \_\_\_\_\_ Location (City, State): \_\_\_\_\_

Year Graduated: \_\_\_\_\_ Degree Earned \_\_\_\_\_

**College/University:** \_\_\_\_\_ Location (City, State): \_\_\_\_\_

Year Graduated: \_\_\_\_\_ Degree Earned: \_\_\_\_\_

**Vocational School:** \_\_\_\_\_ Location (City, State): \_\_\_\_\_

Year Graduated: \_\_\_\_\_ Degree Earned: \_\_\_\_\_

**Specialized Training:** \_\_\_\_\_ Location (City, State): \_\_\_\_\_

Year Graduated: \_\_\_\_\_ Degree Earned: \_\_\_\_\_

**Military:**

Are you a member of the Armed Services? \_\_\_\_\_

What branch of the military did you serve? \_\_\_\_\_

What was your military rank when discharged? \_\_\_\_\_

What type of discharge honorable or dishonorable? (If dishonorable please explain)

\_\_\_\_\_  
\_\_\_\_\_

What years did you in the military? \_\_\_\_\_

What military skills do you possess that would be an asset for this position?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Previous Employment: List your previous 10 years of employment**

Employer Name: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Employer Telephone: \_\_\_\_\_  
Dates Employed: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
City State Zip Code

Employer Name: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Employer Telephone: \_\_\_\_\_  
Dates Employed: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
City State Zip Code

Employer Name: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Employer Telephone: \_\_\_\_\_  
Dates Employed: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
City State Zip Code

Employer Name: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Employer Telephone: \_\_\_\_\_  
Dates Employed: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
City State Zip Code

Employer Name: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Employer Telephone: \_\_\_\_\_  
Dates Employed: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
City State Zip Code

Employer Name: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Employer Telephone: \_\_\_\_\_  
Dates Employed: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
City State Zip Code

## References

Please list below three references that are familiar with your work history and experience. Do not list relatives, friends or personal references.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Years Known: \_\_\_\_\_ Relationship to you: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Years Known: \_\_\_\_\_ Relationship to you: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Years Known: \_\_\_\_\_ Relationship to you: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

## FAMILY PROFILE

List every member of your family who is still living. Include father, mother, brothers and sisters.

1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

3. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

4. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

5. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

6. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

7. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

8. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

**Anti-Discrimination Clause**

The Village of Forest View does not tolerate unlawful discrimination or harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state, or local laws. No question on this application is used to limit or exclude an applicant from employment consideration. Harassment of our employees is strictly prohibited, whether it is committed by a manager, coworker, subordinate, or non-employee (such as a vendor or resident). Examples of prohibited harassment include but are not limited to, unwelcome physical contact, comments, jokes or epithets, threats, insults, name-calling, offensive gestures, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. The Village takes all complaints of harassment seriously, and each will be investigated promptly and thoroughly. The Village of Forest View does not discriminate in hiring, training, compensation, benefits, promotion, transfer, demotion, layoff, discipline, or discharge because of any individuals race, color, creed, ancestry, religion, sex, sexual orientation, national origin, mental or physical disability, age, military status or any other status protected by law. It is our policy to employ, promote and transfer those individuals who possess the required skills, education, experience, and qualifications for each position.

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

# Authorization for Disclosure of Social Networking Information

I, \_\_\_\_\_ give my permission for the Forest View Police Department Recruiting Division to have access to my personal social networking accounts. If my accounts are set to "private" I will log into the account in the presence of the Recruiting Officer and allow him or her to review the contents of the account(s). Access to the accounts(s) must be granted immediately upon request.

I understand that the information present on my personal social networking account(s) is part of my background investigation. Any information that is racist, sexist, or would bring discredit upon my candidacy for the position that I am applying for, may disqualify me from further consideration with Forest View Police Department.

I understand that refusal to allow the Forest View Police Department Recruiting Division access to my personal social networking account(s) will disqualify me from further consideration for employment with the Police Department.

By signing this document, I am agreeing to provide the Forest View Police Department with immediate access to my personal social networking accounts.

- I do not have a social networking account
- I authorize the Forest View Police Department access to my social networking accounts(s)
- I do not authorize the Police Department access to my social networking account(s)

\_\_\_\_\_  
Candidate Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Recruiting Officer Signature

\_\_\_\_\_  
Date

Social Networking Account Name \_\_\_\_\_

Additional Social Networking Account Names \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## Employment Release of Information

I, the undersigned, am a Forest View, Illinois Police Department candidate and, hereby; give permission to the Village of Forest View, its officers, agents, and employees to obtain, copy and examine any and all of my personal Credit, Education, and Employment history or records as maintained by any recording agencies, schools, and business I, the undersigned, hereby release any and all agencies from complaints arising from the release of this information to the Village of Forest View Police Department.

Candidate Name: \_\_\_\_\_

Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

\_\_\_\_\_  
Candidate Signature Date

Subscribed and sworn to before me the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
Notary Public in and for the said County of \_\_\_\_\_, State of \_\_\_\_\_

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



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## Village of Forest View

POLICE OFFICER

EMPLOYMENT AGREEMENT

I, \_\_\_\_\_, in advance of my appointment, and as partial consideration for my appointment as a Police Officer with the Village of Forest View, do hereby acknowledge that in the event I resign the Village's employ and that such resignation occurs within a three (3) year period from my date of hire, I will reimburse to the Village all costs associated with training and education which are not reimbursed through other agencies and any related costs for uniforms according to the following scale. I further agree that should it become necessary for the Village Forest View to have its attorney enforce this agreement, I will reimburse the Village of Forest View for any and all reasonable attorney's fees and costs incurred by the Village in the enforcement of this agreement.

Length of Employment	% of Reimbursement
0-1 Years	100 %
1-2 Years	50 %
2-3 Years	25 %

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



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## Village of Forest View

### POLICE OFFICER APPLICATION CERTIFICATION AND PENALTY

I hereby declare that all statements and information provided to the Forest View Police Department in this Application or any form thereof, as well as any other statements and information provided for my pre-employment background investigation or any other phase of my pre-employment screening, are true and complete to the best of my knowledge and belief.

I understand that any misstatement of material fact, willful omission of material fact, or willful deception, will be cause for disqualification and rejection as a candidate for employment, without appeal. I further understand that these aforementioned misstatements, omissions, or deceptions are also grounds for termination after employment, without notice and without any right of appeal.

\_\_\_\_\_  
Signature of Applicant Date

\_\_\_\_\_  
Applicant Name (please print)

Subscribed and sworn to before me the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
Notary Public in and for the said County of \_\_\_\_\_,  
State of \_\_\_\_\_.

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Notary Public