PEACE OFFICER RECRUITMENT

TORRINGTON POLICE DEPARTMENT
JOB APPLICATION PACKET

“To enhance the quality of life...”
THE MISSION OF THE TORRINGTON POLICE DEPARTMENT IS TWOFOLD:

To enhance the quality of life in the community by protecting life and property, maintaining order and providing a range of general and emergency services.

To enhance the quality of life in the work place through equitable treatment, job enrichment, and promotion of a sense of self worth in all employees.

DUTIES OF A TORRINGTON PEACE OFFICER:

- Identify criminal offenders and criminal activity, and where appropriate, apprehend offenders and participate in subsequent court proceedings.
- Reduce the opportunities for the commission of crime through prevention patrol and other measures.
- Aid people who are in danger of physical harm.
- Facilitate the movement of vehicular and pedestrian traffic.
- Identify problems that are potentially serious law enforcement and governmental problems.
- Record activity during tour of duty in the manner prescribed by proper authority.
- Assist citizens requesting assistance or information. Courteously explain any instance where jurisdiction does not lie with the police department and suggest other procedures to be followed.
- Be accountable for the receipt, transportation and securing of all evidence and property coming into custody.
- Answer questions asked by the general public, counsel juveniles and adults when necessary and refer them to persons or agencies where they can obtain further assistance.
- Preserve the peace at public gatherings, neighborhood disputes and family quarrels.
- Serve or deliver warrants, summonses, subpoenas and other official papers promptly and accurately when so directed by a superior officer.
- Confer with court prosecutors and testify in court.
- Accomplish other general duties as they are assigned or become necessary.
- Perform such other duties as assigned by supervisors.
- Cooperate with efforts of other law enforcement agencies.

Applicants must pass a physical fitness assessment. The assessment is the same test used for admittance to the Wyoming Law Enforcement Academy. The assessment consists of a 1 minute push-up test, 1 minute sit-up test and a 12 minute run. The Torrington Police Department requires all full-time peace officers to pass this test twice a year. Applicants must place at or above the 50th percentile. Information about the physical fitness assessment and instructional videos can be found online at www.wleacademy.com.

Applicants must also pass a written test administered by Wyoming Peace Officer Standards & Training before being considered for employment. POST offers the exam Monday through Friday at 9:00 a.m. or 2:00 p.m. The cost is $35.00 payable by cash only. No credit cards or debit cards accepted. The entry level exam takes about 2 hours. The exam tests your basic skills and is made up of math, spelling, grammar, writing skills, and punctuation. It is much like a high school proficiency exam. There are no study guides for this exam. Contact Wyoming POST to schedule a testing time.

1710 Pacific Avenue
Cheyenne, WY 82002
(307) 777-7718
FAX (307) 638-9706

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08/09
NOTICE TO ALL APPLICANTS

This packet must be completely filled out. Your answer to any particular question may not necessarily eliminate you from consideration. Failure to answer any questions will result in disqualification of this application. If a particular question does not apply to you, write “N/A” in the space provided. At the end of each section, additional space is given for explanation. Indicate the number of the question to which you are referring when giving any explanation. Any falsification or obvious omission on this form will result in disqualification of your application; or if discovered after employment, may be grounds for discharge. This application form must be printed or typed. Look over the form completely before beginning.

Legal Name: ___________________________________________  SSN# ____________________
(Last)    (First)    (Middle)

Current Address: ___________________________________________________________________________
(Street)               (City)      (State)  (Zip Code)

Home Phone: (_____)_____________  Cell Phone: (_____)____________  Work Phone: (_____)____________

Email Address: ____________________________________________________________________________

Date of Birth: ___/___/____   Height: ______  Weight: ______  Eye Color: ______  Hair Color: ______
Mo / Day / Year

Are you a U.S. Citizen? ______

List any aliases, nicknames, maiden name other than your present legal name:
________________________________________________________________________________________

MEDICAL DATA

Answer each question yes or no.
1. Have you ever been a patient in a mental hospital? ______
2. Have you ever been denied insurance or employment for medical reasons? ______
3. Have you ever been deferred from Military Service for medical, emotional or health reasons? ______
4. Have you ever been discharged from employment or military service for medical, emotional or health reasons? ______
5. Have you ever received or applied for any pension or compensation for disability or injury? ______
6. Are you presently under a Doctor’s care for any condition? ______
7. Do you have any disabilities that would affect your employment? ______
8. Explain any yes answers 1 thru 7 giving the name of the Doctor who treated you, dates and location:
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

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**VEHICLE OPERATION DATA**

Answer each question yes or no.

1. Do you hold a valid driver’s license? ______ If yes, what state? ______ License Number: ____________
2. Have you had a driver’s license from states other than above? ______ If yes list state and dates held in item 26.
3. Have you received a traffic citation any place? ______
   If yes, complete the following. If more space is needed use additional sheet(s) labeled “Vehicle Operation Data #3.”

<table>
<thead>
<tr>
<th>DATE</th>
<th>CHARGE</th>
<th>CITING AGENCY</th>
<th>DISPOSITION OR PENALTY</th>
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4. Has your driver’s license ever been suspended, revoked or restricted? ______ If yes explain below.
5. Have you ever been the driver of a vehicle involved in a motor vehicle crash, minor or major? ______
   If yes, explain below giving date, location and nature of crash.
6. Explanations for yes items 1 thru 5 of vehicle operation data:

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

**ARREST RECORD / COURT ACTIONS**

Answer each question yes or no.

1. Have you ever been convicted by any court of any crime? ______ If yes, complete the following:
   If more space is needed use additional sheet(s) labeled “Arrest Record / Court Actions #1.”

<table>
<thead>
<tr>
<th>DATE</th>
<th>LOCATION</th>
<th>CHARGE</th>
<th>DISPOSITION OR PENALTY</th>
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2. Are you currently a party to any civil court action? ______
3. Is there any criminal court action or investigation pending against you? ______
4. Have you ever applied for and been denied bond or had one revoked? ______
5. Have you ever sued anyone? ______
6. Explanations for yes items 1 thru 5 of arrest record/court actions:

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

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EXPOSURE TO ILLEGAL OR CONTROLLED SUBSTANCES

Answer each question yes or no.

Have you ever used Marijuana? ______  If yes, number of times: ______  If yes, during what period of time: ______

Have you ever used other controlled substances / narcotics without a doctor’s prescription? ______

If yes, indicate what type of controlled substance(s): _________________________________________________

What period of time___________ and circumstances surrounding each use: __________________________

________________________________________________________________________________________

EDUCATION

Last High School attended:__________________________________________________Dates:_____________________

Address:_____________________________________________________________________________________

Did you graduate from High School? Yes___  No___                 Do you have a GED certificate? Yes___  No___

College: ________________________________________________________ □ 1 yr. □ 2 yr. □ 3 yr. □ 4 yr.

Type of degree:_____________________________________________________________________________________

Address:  __________________________________________________________________________________________

_______________________________________________________________________________________________

List other job related courses or training (trade, vocational, armed forces, business). Give name and location of each school, dates attended, and subjects studied. Also list College courses to include number of semester or quarter hours taken which are specifically job related. Attach additional sheets if necessary labeled “Education / Job Related Courses.”

________________________________________________________________________________________

________________________________________________________________________________________

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________________________________________________________________________________________

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TORRINGTON, WYOMING

MILITARY SERVICE

1. Enter information for each enlistment, appointment or period of active duty:

<table>
<thead>
<tr>
<th>Date Entered</th>
<th>Date Separated</th>
<th>Type of Discharge</th>
<th>Branch of Service</th>
<th>Rank at Separation</th>
<th>Highest Rank Held</th>
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Military Service Number: ____________________

2. Were you rejected for military service, separated or discharged for any reason other than completion of normal term of service? ______ (yes/no)

3. Were you ever subject to military discipline? (Court martial, Article 15, etc.) ______ (yes/no)

4. Explain any yes answer in items 2 and 3: ______________________________________________________________
__________________________________________________________________________________________________

EMPLOYMENT INFORMATION

Have you ever been dismissed from Employment? _____ (yes/no)
If yes please explain:

Have you ever applied for or collected unemployment compensation? _____ (yes/no)
Have you ever applied for or collected workman’s compensation? _____ (yes/no)
Have you ever filed for bankruptcy? _____ (yes/no)
Have you ever applied for a position with any other law enforcement agency? _____ (yes/no)

If yes, what agencies: __________________________________________________________

Starting with the date you left High School, accurately account for all periods of employment and unemployment in date order, including your present employer. Include all seasonal, temporary, or part-time jobs you have held while furloughed or laid off from your permanent job.

Before filling out the next sheet in the packet make enough photo copies to cover your full employment history. There is a space in the lower right hand corner to indicate a page numbers.

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## Employment Information Continued

<table>
<thead>
<tr>
<th>Employer</th>
<th>Position held</th>
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<th>Address, City, State, Zip</th>
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<tr>
<th>Supervisor &amp; Phone number</th>
<th>May we contact? Yes / No</th>
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<th>Co-Worker &amp; Phone,</th>
<th>May we contact? Yes / No</th>
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<th>Starting Salary</th>
<th>Per</th>
<th>Last Salary</th>
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<tr>
<td>From Mo/Yr</td>
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<td>To Mo/Yr</td>
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| Tasks: | |
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| Reason for Leaving | |
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<th>Employer</th>
<th>Position held</th>
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| Tasks: | |
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| Reason for Leaving | |
|--------------------| |
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## Residences

Begin with the most recent past address and work back. List all since age 16. Please use complete addresses. Attach additional sheets if necessary labeled “Residences.”

<table>
<thead>
<tr>
<th>From Mo/Yr</th>
<th>To Mo/Yr</th>
<th>Street</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
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## References

List 5 persons over 23 years of age you have known for over 3 years and are not relatives or previous employers.

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Position</th>
<th>Phone Number</th>
<th>Years Known</th>
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Answer each question yes or no.

1. Are you willing to work long hours and accept calls beyond your shift hours? _____
2. Are you willing to work alone as a Peace Officer without readily available assistance from other law enforcement officers? _____
3. Are you now or have you ever been a member of any organization, corporation, company, partnership, association, trust, foundation, fund, club, society, committee, political party, or any group of persons, whether or not incorporated, which engages in or advocates, abets, assist in the overthrow, destruction or alteration of the Constitutional form of government of the United States or of the State of Wyoming, or any political subdivision of either of them, by revolution, force, violence or other unlawful means? _____
4. Are you willing to take an oath to support the Constitution of the United States and the Constitution of the State of Wyoming? _____ If no, explain below.
5. Are you willing to take a voice stress examination? _____
6. Explain answers 1 thru 5 if applicable:________________________________________________________
   _______________________________________________________________________________________

PERSONAL

Married _____  Single _____  Divorced _____

Spouse’s Name: __________________________________________ Age: _____

Children  1. __________________________________________ Age: _____
          2. __________________________________________ Age: _____

Mother’s Name, Address & Phone: _______________________________________________________________________
                                                                 _______________________________________________________________________

Father’s Name, Address & Phone: _______________________________________________________________________
                                                                 _______________________________________________________________________

Brother’s Name and Address: _______________________________________________________________________

Brother’s Name and Address: _______________________________________________________________________

Sister’s Name and Address: _______________________________________________________________________

Sister’s Name and Address: _______________________________________________________________________

PLEASEx PROVIDE A CURRENT SNAPSHOT OR PICTURE OF YOURSELF. IT DOES NOT NEED TO BE A FORMAL PICTURE.
THE PICTURE WILL NOT BE RETURNED.
With your completed application please submit the following typed and hand written information. Each statement needs to be a minimum of 75 words in length. The statements you provide will be used during your oral and integrity evaluations.

**Typed Response for the following:**

1. Everyone has a set of values to which they are committed. Please provide a statement of your values and their priority.
2. Please provide a statement describing your philosophy on the use of force in law enforcement.
3. Please provide a statement describing your ability to work with others.
4. Please provide a statement describing your faults and how you deal with them.
5. Please provide a statement describing your greatest accomplishment.

**Hand written response for the following:**

1. Please provide a statement describing what you feel the primary responsibilities of a police officer are.
2. Please provide a statement describing the differences between an officer’s on-duty and off-duty life.
3. Please provide a statement providing information on what type of manager you work with best.
4. Please provide a statement describing how you handle criticism.

**REQUIRED DOCUMENTATION**

You should be prepared to present the following documentation when requested:

1. Birth certificate
2. High School Diploma or GED certificate
3. Official High School transcripts
4. Any college diplomas with official transcripts
5. Selective Service Registration Form (SS Form 3A)
6. Form DD214, Separation or Release from the United States Armed Forces for each term of service
7. Valid Motor Vehicle Driver’s License
8. Social Security Card

It will be necessary for you to provide the original copies of the above listed documents when requested as well as photocopies of each. All copied documents should be on 8½”X 11” paper.

I hereby affirm that there are no intentional misrepresentations or falsifications in the forgoing statements and answers to questions. I am aware that should investigation through the FBI, other state, city and county law enforcement agencies, motor vehicle records, schools, hospitals, physicians, former employers, neighbors, etc disclose any such misrepresentations or falsifications, my application shall be rejected or, if already employed, my employment may be terminated.

Applicant’s Signature

Date

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