



CITY OF NORMAN

Employment Announcement

Human Resources Department
201 C. West Gray

P.O. Box 370
Norman, OK 73070

Phone: (405) 366-5482
Web: www.normanok.gov

JOB TITLE:	Police Officer (51 st Academy) 15 Positions	JOB CODE:	04
DEPARTMENT:	Police		
SALARY:	\$43,250 - \$46,779 Annually (DOE)		
STARTING DATE:	October 4, 2013		
JOB LOCATION:	201-B West Gray		
WORK PERIOD:	Any of three shifts		
REPORTS TO:	Police Lieutenant		

MINIMUM QUALIFICATIONS: Age: Applicant must be 21 years of age, and not over 45 years of age (unless prior member of the Oklahoma Police Pension and Retirement System). Education and Experience: High school diploma or equivalent plus sixty (60) college credit hours from an accredited college or university. The department will waive thirty (30) hours of the college requirement if you have three (3) years of active duty military service with nothing less than an honorable discharge; or two (2) years prior law enforcement experience. Applicant must have completed the required college hours by May 17, 2013. An official transcript from your college or university, verifying the number of credit hours you have obtained, Must be submitted prior to or at the oral interview. License and Certifications: Valid driver's license. Out-of-state applicants must obtain an Oklahoma Driver's license as required by Police Department, if selected. Knowledge: Must be able to learn law enforcement theory and practice in order to function as an effective police officer. Skills: Working and interacting with others. Performing strenuous physical activities for long periods of time. Controlling personal emotions and reactions. Communicating verbally and in writing. Performing effectively in stressful and emergency situations. Operating police vehicle and equipment. Mental and Physical Abilities: Ability to obtain CLEET certification. Perform work in emergency situations involving hazardous conditions and use discretion in taking action. Analyze complex and unknown situations, determine alternative strategies, and draw conclusions. Perform effectively during prolonged periods of stress. Physical ability to run after/apprehend suspects and strength and endurance to gain/sustain control over or move unruly suspects. Physical ability to climb, jump, crawl, or otherwise surmount physical obstacles, as well as run for various distances. Ability to lift and carry moderately heavy (25-50 lb.) to heavy (50-100 lb.) materials, supplies and equipment. Ability to maintain regular, predictable and punctual attendance. Additional Information: Selected applicants must pass extensive background investigation, physical ability test, polygraph, psychological test, physical examination, drug screen, and must be able to meet the requirements of the Oklahoma Police Pension and Retirement System.

DUTIES AND RESPONSIBILITIES: Essential Functions: Enforce state and federal laws, city ordinances, and traffic laws; operate a law enforcement vehicle; make arrests on criminal and traffic related offenses and obtain information for required reports; use a firearm proficiently; conduct criminal investigations; conduct vehicle accident investigations; communicate effectively both verbally and in writing; engage in law enforcement patrol functions; respond immediately to emotional, high stress, or physically taxing situations without warning; and perform related duties as required.

WORKING CONDITIONS: Exposed to unknown and dangerous conditions. Required to adhere to a high standard of personal appearance, morals, ethics, and conduct. Drives vehicles under dangerous and hazardous conditions. Exposed to inclement weather conditions. Exposed to potentially hazardous diseases and materials. May be required to work variations in hours of assignment, duration, and scheduling.

	3/29/13		3-29-13
Human Resources Director/Designee	(date)	Department Head/Designee	(date)
April 1, 2013 through May 17, 2013			3-29-13
RECRUITMENT PERIOD		Requesting Supervisor/Designee	(date)

EQUAL OPPORTUNITY EMPLOYER



APPLICATION FOR EMPLOYMENT

FOR OFFICE USE ONLY

The City of Norman
Human Resources Department
P.O. Box 370 201-C West Gray
Norman, OK 73070 Norman, OK 73069
(405) 366-5482
JOB LINE 366-5321
www.NormanOK.gov/HR/HR-Job-Postings

AN EQUAL OPPORTUNITY EMPLOYER

The City of Norman does not discriminate on the basis of race, color, religion, sex, national origin, age, marital or veteran status, political affiliation, disability, or any other legally protected status.

This is an application for employment and no employment contract is being offered. After a selection has been made, this application will not be considered for any other position. If you need assistance in completing this application form or in participating in the selection process, please inform a member of the Human Resources staff.

INSTRUCTIONS: Applications which are not complete will not be processed. No faxed applications will be accepted.

PERSONAL

1. Name _____ Date _____
LAST FIRST MIDDLE

2. Address _____
STREET ADDRESS CITY STATE ZIP

3. Mailing Address _____
IF DIFFERENT FROM STREET ADDRESS

4. E-Mail Address _____

5. Cell No. _____ Home No. _____ Msg/Work No. _____

6. Are you eighteen years of age or older? Yes No

7. Position desired _____ Dept/Division _____

Rate of expected pay \$ _____ per hour

8. Are you available to work Full-time Part-time

Specify days and hours if part-time: _____

9. Were you previously employed by us? Yes No

If yes, when? _____

10. Are you a U.S. Citizen? Yes No If no, do you have a legal right to work in the U.S.? _____

Explain: _____

11. Driver's License _____
STATE TYPE/CLASS OF LICENSE EXPIRATION DATE

12. Are you related to any City employee or any member of the City Council? Yes No

If yes, give name, department, and relationship: _____

13. Have you been convicted of a felony in the last 7 years or are you currently charged with the commission of a felony?

Yes No If yes, state what, when, and how: _____

14. What experience, training, or education do you have that would relate to this position?

If you are considered for the job, after the selection process, and you would need reasonable accommodation to perform the essential job functions, the City of Norman will explore these alternatives. (The City of Norman requires a pre-employment medical examination for some positions which will determine whether you can do the essential functions of the job without substantial risk to yourself and the public.)

EDUCATION RECORD

TYPE OF SCHOOL	NAME AND ADDRESS	How Many Years Attended	Graduated	COURSE/MAJOR
HIGH SCHOOL				
COLLEGE				
GRADUATE SCHOOL				
BUSINESS OR TRADE				
OTHER				

PERSONAL REFERENCES

Give name, occupation, address, and phone number of **THREE** references who are *not* related to you and are *not* current or previous employers.

Name	Occupation	Address	Phone Number

EMPLOYMENT HISTORY

List past 10 years of employment, beginning with your most recent/current employer. Account for all gaps in employment. Supplemental Employment History forms are available upon request.

EMPLOYER: _____ JOB TITLE: _____
ADDRESS: _____ SUPERVISOR: _____
CITY/STATE: _____ TELEPHONE: _____
STARTING DATE: _____ STARTING SALARY: _____
ENDING DATE: _____ ENDING SALARY: _____
AVG. # OF HOURS WORKED/WEEK: _____ MAY WE CONTACT EMPLOYER: YES NO
DUTIES RESPONSIBILITIES: _____

REASON FOR LEAVING: _____

EMPLOYER: _____ JOB TITLE: _____
ADDRESS: _____ SUPERVISOR: _____
CITY/STATE: _____ TELEPHONE: _____
STARTING DATE: _____ STARTING SALARY: _____
ENDING DATE: _____ ENDING SALARY: _____
AVG. # OF HOURS WORKED/WEEK: _____ MAY WE CONTACT EMPLOYER: YES NO
DUTIES RESPONSIBILITIES: _____

REASON FOR LEAVING: _____

EMPLOYER: _____ JOB TITLE: _____
ADDRESS: _____ SUPERVISOR: _____
CITY/STATE: _____ TELEPHONE: _____
STARTING DATE: _____ STARTING SALARY: _____
ENDING DATE: _____ ENDING SALARY: _____
AVG. # OF HOURS WORKED/WEEK: _____ MAY WE CONTACT EMPLOYER: YES NO
DUTIES RESPONSIBILITIES: _____

REASON FOR LEAVING: _____

EMPLOYER: _____ JOB TITLE: _____
ADDRESS: _____ SUPERVISOR: _____
CITY/STATE: _____ TELEPHONE: _____
STARTING DATE: _____ STARTING SALARY: _____
ENDING DATE: _____ ENDING SALARY: _____
AVG. # OF HOURS WORKED/WEEK: _____ MAY WE CONTACT EMPLOYER: YES NO
DUTIES RESPONSIBILITIES: _____

REASON FOR LEAVING: _____

READ CAREFULLY BEFORE SIGNING

I certify that facts given in this application are true and complete to the best of my knowledge. I hereby grant permission to the City of Norman to investigate any information included in the application, and I agree to submit to medical examination, if required. The City of Norman requires pre-employment drug screening and criminal record search for all position. I understand that this application is not a contract of employment. I hereby release the City of Norman and its agents from all liability in making any investigation or inquiry relative to any information contained in the application form. I understand that, if employed, false or misleading statements given in this application or interview(s) may result in discharge. If hired, I understand probationary and temporary employees have no rights to permanent employment and may be terminated without cause at the discretion of the City. I understand that I am required to abide by all rules and regulations of the City of Norman. *This application must be signed (handwritten or electronic) and dated for employment consideration.*

SIGNATURE OF APPLICANT

DATE

**CITY OF NORMAN
SUPPLEMENTAL QUESTIONNAIRE
POLICE OFFICER**

Name: _____ Date: _____

This questionnaire is a supplement to your application and will be used for further evaluation of your education, training, and experience as it relates to the POLICE OFFICER position for which you applied. FILL OUT THE QUESTIONNAIRE COMPLETELY EVEN IF THIS INFORMATION IS ON YOUR APPLICATION/RESUME!

1. Are you at least 21 years of age? ___ Yes ___ No
2. If you are over 45, are you or have you ever been a member of the Oklahoma Police Pension and Retirement System? ___ Yes ___ No
If yes, please list dates of membership. _____
3. Do you have at least 60 college credit hours from an **accredited** college or university?
___ Yes ___ No

If **Yes**, please list the colleges and/or universities you have attended and the semester hours or quarter hours you have completed. An **official** transcript from your college or university verifying the number of credit hours you have completed **MUST BE SUBMITTED WITH YOUR APPLICATION.**

<u>Name of College/University</u>	<u>Semester Hours</u>	<u>Quarter Hours</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

If **No**, will you have at least 60 college credit hours from an **accredited** college or university by **May 17, 2013**? Please list the college and/or university you are currently attending. An **official** transcript from your college or university verifying the number of credit hours you have completed **MUST BE SUBMITTED WITH YOUR APPLICATION.** An official letter from your college or university verifying the number of credit hours you are currently enrolled in must be submitted with your application, with an updated official transcript to follow by **May 17, 2013.**

<u>Name of College/University</u>	<u>Semester Hours</u>	<u>Quarter Hours</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

If **No**, do you have at least 30 college credit hours from an **accredited** college or university **AND** three years active duty military service with honorable discharge **OR** do you have at least 30 college credit hours from an **accredited** college or university **AND** two years prior law enforcement experience? ___Yes ___No

If **Yes**, please list the colleges and/or universities you have attended and the semester hours or quarter hours you have completed. An **official** transcript from your college or university verifying the number of credit hours you have completed **MUST BE SUBMITTED WITH YOUR APPLICATION.**

<u>Name of College/University</u>	<u>Semester Hours</u>	<u>Quarter Hours</u>
_____	_____	_____
_____	_____	_____

4. Do you have a valid driver's license? ___Yes ___No
State _____ License Number _____ Expiration Date _____

5. Have you ever been convicted of a felony or are you currently charged with the commission of a felony? ___Yes ___No

6. How did you find out about employment opportunities with the Norman Police Department?
Mark all that apply:

- ___ Newspaper _____
Name
- ___ Website _____
Name
- ___ College/University _____
Name
- ___ Military _____
Name
- ___ Flier or Poster at a business _____
Name
- ___ Church _____
Name
- ___ Social Media _____
Name
- ___ Other _____
Name

Police Officer Supplement

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I ACKNOWLEDGE THAT I HAVE RECEIVED A COPY OF THE EMPLOYMENT ANNOUNCEMENT AND THE TESTING AND HIRING PROCEDURES FOR POLICE OFFICER. I FURTHER ACKNOWLEDGE THAT THE INFORMATION I HAVE LISTED ABOVE IS TRUE, CORRECT, AND COMPLETE. I UNDERSTAND THAT ANY MISSTATEMENT OF MATERIAL FACTS WILL DISQUALIFY ME FROM PARTICIPATING IN THE SELECTION PROCESS FOR POLICE OFFICER.

Name

Date

CITY OF NORMAN

EQUAL EMPLOYMENT OPPORTUNITY SURVEY

(FOR STATISTICAL USE ONLY)

TO ALL APPLICANTS:

The following information will in no way affect decisions regarding you as an individual applicant. The hiring supervisor will not have access to this survey. This information will be used to find out how effective our recruiting efforts are in reaching all segments of the population and in the validation of our selection methods. This form will also be used for Federal Equal Employment Opportunity reporting. Please help us by completing this *voluntary* questionnaire.

INSTRUCTIONS: Please circle *only one* number for each question below.

A. SEX:

- 1. Male
- 2. Female

E. VETERAN:

- 1. No - Veteran
- 2. Yes - Veteran

B. AGE:

- 1. 19 or less years
- 2. 20-29 years
- 3. 30-39 years
- 4. 40-49 years
- 5. 50-59 years
- 6. 60-69 years
- 7. 70 or over

F. HOW DID YOU LEARN ABOUT THIS POSITION:

- 1. City of Norman Job Line
- 2. City of Norman Bulletin Board
- 3. City Employee
- 4. Newspaper (Name) _____
- 5. Placement Service (Name) _____
- 6. Employment Agency (Name) _____
- 7. Other (Specify) _____

C. RACE:

- 1. American Indian
- 2. Black
- 3. Asian Pacific Islander
- 4. Hispanic
- 5. White

G. JOB CODE (as indicated on job announcement)

- 1. Official/Admin
- 2. Professional
- 3. Technical
- 4. Protective Services
- 5. Para-Professional
- 6. Admin Support
- 7. Skilled
- 8. Service/Maintenance

D. DISABLED:

- 1. No
- 2. Yes-Visually impaired/blind
- 3. Yes-Hearing impaired/deaf
- 4. Yes-Amputee
- 5. Yes-Epilepsy
- 6. Yes-Paralysis
- 7. Yes-Cardiac
- 8. Yes-Other (specify) _____

H. STATUS:

- 1. Full-time
- 2. Permanent Part-time
- 3. Temporary (Part-time & seasonal)

Place your numbered answer to each question in the corresponding box below.

A	B	C	D	E	F	G	H

NAME: _____ BIRTHDATE: _____

POSITION APPLIED FOR: _____ TODAY'S DATE: _____