Menomonie Police Department Junior Police Program Application

Nature of Work

Through the Junior Police Program, participants receive training on basic law enforcement. Upon successful completion of the Junior Police Program, participants may partake in the ride-along program with an officer. The most important job for participants will be to use his/her learned skills to serve their community and its citizens in a positive manner. The Junior Police Program participants must uphold high standards of discipline, respect, honor and dedication to excellence in all areas of their lives.

Application Process

- Complete and submit application and signed waivers along with a copy of <u>most recent academic grades</u> by May 13th, 2022. Materials can be mailed or dropped off in person at: 615 Stokke Parkway Suite G200, Menomonie, WI 54751. You can also email materials to Officer Kayla Tisol at tisolk@menomonie-wi.gov
- 2. After the application is completed and submitted, a brief background check will be conducted on all applicants. This will include an in-person interview.
- 3. A selection of applicants will be made based on meeting below requirements and space availability. A notification of application status will be made before the date of the first meeting.
- 4. Pay registration fee/ annual dues \$49 (Due at 1st meeting. Scholarships are available.). Fee covers the cost of a polo shirt to be used as a uniform and materials associated with the program. If cost is a barrier, please contact Officer Tisol about financial assistance for the program.

Requirements and Other Necessary Documents

To participate in the Junior Police Program at the Menomonie Police Department, *all candidates must:*

- 1. Be at least 14 years of age (entering 9th grade), through 20 years of age.
- 2. Be a United States citizen or lawful resident alien.
- 3. Have proof of current enrollment in school all the while maintaining a GPA of 2.0 or higher while in the program.
- 4. Be drug (illegal) free, including the use of alcohol and tobacco.
- 5. Have good moral character and possess the qualities of honesty, maturity, self-discipline and initiative.
- 6. Have the desire to learn and the ability to make a commitment to serve the agency and the community.
- 7. Submit completed application by the deadline of May 13, 2022
- 8. Provide a copy of their birth certificate and photo ID (driver's license or school ID).
- 9. Not have a criminal or gang background or involvement as determined by a background check.
- 10. Have and give a 100% commitment to attend weekly meetings during the summer.
- 11. Have 100% support from parents/guardians.

Additionally, all candidates should provide a copy of their health insurance card/information, as well as a career interest in law enforcement, the criminal justice system and/or a community service related field.

Opportunities

- 1. Participate in scheduled events to include: Traffic control; Crowd control; Community public relations.
- 2. Assist at local community events such as festivals and parades.
- 3. Participate in Ride-Alongs once program is completed.

Potential Disqualification or Termination Factors

This is not an exhaustive list and is subject to program coordinator's discretion.

- 1. Current use of non-prescribed or illegal drugs, or abuse of prescription drugs.
- 2. Any felony conviction, some misdemeanor convictions, to include domestic violence charges.
- 3. Police history type, frequency and nature of contacts(s).
- 4. Driving record with a major offense.
- 5. Outside activities, which may be classified as a conflict of interest.
- 6. Revelation of assaultive behavior via background investigation or by the admission of the applicants.
- 7. Falsifying information during the application process.

Personal Information

Position Applying for: Date:			Date:	
Full name: Last	Middle		Social Security Number:	
Mailing Address:		State Zip Code		
Phone:	,	1		
Are you over 18?	Yes No	Date of B	irth:	
Driver's License Nu	mber:	State: _	Expiration Date	:
School:		Grade	e: GPA:	

Parent Signature and Date:

Parent/Guardian Information

Parent/Guardian name:	
Home Address:	_ City, state, zip code:
Phone: Work Phone:	
Parent/Guardian name:	
Home Address:	_ City, state, zip code:
Phone: Work Phone:	

Emergency Contact Information

In the event of an emergency and the parent's/guardian's are unavailable, please list two emergency contacts:

 Contact #1: ______

 Home Address: ______ City, state, zip code: ______

 Phone: ______ Work Phone: ______

 Contact #2: ______

 Home Address: ______ City, state, zip code: ______

 Phone: ______ Work Phone: ______

 Phone: ______ Work Phone: _______

Background Information

Have you ever been arrested?	Yes	No
Have you ever received a ticket?	Yes	No
Have you ever had the police called on you, or had a negative police contact?	Yes	No
Have you ever been under the influence of alcohol?	Yes	No
Have you ever used or possessed any illegal drugs, including marijuana?	Yes	No
Have you ever stolen anything?	Yes	No
Have you ever been involved in a physical fight with someone else?	Yes	No
Have you ever been suspended from school?	Yes	No
Have you ever been a member of a gang, or associated with known gang members?	Yes	No
Have you ever committed an act of vandalism?	Yes	No
Have you ever been a victim of a crime?	Yes	No
Have you been hospitalized in the past 5 years?	Yes	No

Volunteer Experience & Extracurricular Activities:

Leadership Positions: _____ Skills that qualify you for this position: _____ Recognition(s) and award(s). Name of award and organization: Hobbies, skills, outside interests: _____ Why do you want to explore a career in Law Enforcement? Explain:

References

Please list 3-4 references who can comment on your suitability and validate your character. References can be teachers, counselors, employers, etc. Please do not use relatives.

Name (Last, First)	Address	Phone Number	Title/Position
Name (Last, First)	Address	Phone Number	Title/Position
Name (Last, First)	Address	Phone Number	Title/Position
Name (Last, First)	Address	Phone Number	Title/Position

APPLICANT PLEASE READ CAREFULLY AND SIGN BELOW	
Information provided and statements made as part of this application may be grounds for not emplo begin work. All information provided and statements made are subject to verification.	oying you or for dismissing you after you
CERTIFICATION	
ALL INFORMATION PROVIDED AND STATEMENTS MADE BY ME AS PART OF THIS APPLICATION, OR AS PROVIDED IN SUPPORT OF THIS APPLICATION, ARE COMPLETE, CORRECT, AND TRUE TO THE BEST OF N	
I UNDERSTAND THAT IF I AM EMPLOYED, FALSE INFORMATION PROVIDED OR FALSE STATEMENTS N MAY BE CONSIDERED AS CAUSE FOR DISMISSAL.	ADE AS PART OF THIS APPLICATION
Applicant's signature:	Date signed:
Under the provisions of section 19.36, Wisconsin Statutes, I request that my identity as an applicant for	the position of
not be revealed without my consent or until required under law.	
Applicant's signature:	Date signed:

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MENOMONIE POLICE DEPARTMENT 615 STOKKE PARKWAY MENOMONIE, WI 54751





Eric M. Atkinson, Police Chief

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AUTHORIZATION FOR RELEASE OF INFORMATION

(For official use only, not to be released to unauthorized persons)

I hereby empower an employee of the *MENOMONIE POLICE DEPARTMENT* or other authorized representative thereof bearing this release to obtain information and records, within one year of the date of this release, pertaining to me from any or all of the following sources:

- 1. Municipal, State, or Federal law enforcement agencies
- 2. Selective Service System
- 3. Any banking institution
- 4. Any place of business (for purposes of obtaining credit or employment data)
- 5. Any previous employer
- 6. Present employer
- 7. Any school, college, university, or other educational institution
- 8. Any law enforcement or jail officer
- 9. Military Record Centers
- 10. Any private citizen who has knowledge of individual
- 11. Any Local, State, or Federal Government Agency

Exceptions to this blanket authorization

- 1. Any medical information in the possession of any source named above until subsequent to a conditional offer of employment (per Americans With Disabilities Act).
- 2. ______ 3. _____

This release is executed to authorize the **MENOMONIE POLICE DEPARTMENT**, as a prospective employer, to obtain the above information. It is understood that said information shall be used only in consideration of my employment and shall not be further disseminated for any purpose.

	Signa	ture - Full Name		
_	Address - Street and Number			-
	City	State	Zip	-
Signature		WORD/NEWHIRE/releaseofinformationletterhead		rmationletterhead
	Signature	City	City State WORD/NEW	Address - Street and Number City Stale Zip WORD/NEWHIRE/releaseofinfor