

Coles County Sheriff's Office
701 7th Street
Charleston, IL 61920



Position Applied For:

Deputy Sheriff

APPLICATION REQUEST AND RELEASE

I, (*print your name*) _____, hereby state that I wish to apply for employment at the Coles County Sheriff's Office. I understand that as part of the application process I am to provide the following documents to the Coles County Sheriff's Office:

COPIES of the following documents:

- 1.) Your birth certificate;
- 2.) High school diploma (or GED)
- 3.) And (if applicable) further education;
- 4.) Proof of honorable discharge from active military service (if applicable), a copy of your DD 214.

I UNDERSTAND ANY ORIGINALS SUBMITTED WILL NOT BE RETURNED

Some form of picture identification, such as a driver's license, will be required at all examinations.

I fully understand that my failure to submit all the required documentation and the fully completed application will result in my disqualification as a candidate for employment as a Coles County employee.

The applicant will be assessed a fee of \$25.00 for administering the written test for correctional officer. (Non-Refundable)

I also understand that, if I am hired by the Coles County Sheriff's Office, I will be required to live in Coles County, or an adjoining county; if I do not live in Coles County or an adjoining county at the time of hire, I agree to move to one of these counties within six months from the date of hire.

NAME: _____

Signature

Address

City / State / Zip Code

Phone (s)

E-mail Address

**Race*

DATE: _____

DUTIES - DEPUTIES:	The patrol officer assignment shall be filled by a certified police officer. The patrol officer will be responsible for, but not limited to, enforcing the laws of the State of Illinois, the ordinances of the county, preserving the peace, and serving warrants and civil process.
DUTIES - CORRECTIONAL OFFICER:	The corrections officer assignment shall be filled by sworn officers who are certified by the Illinois Police Training Board as corrections officers. The corrections officer will be responsible for the safe and secure detention and transportation of inmates.

REQUIREMENTS: APPLICANT MUST BE:	
1.	Over the age of 21
2.	A high school graduate or equivalent
3.	A resident of Coles, or adjoining counties, or willing to relocate to Coles or adjoining counties within six months from the date of employment.
4.	Able to pass a physical ability, written examination, medical examination, and/or other tests as required
5.	Applicants must submit to fingerprinting by the Coles County Sheriff's Office
6.	Deputy applicants must be able to complete a probationary period of one year plus training
7.	Correctional Officers must be able to complete a probationary period of one year plus training

PREFERENCE POINTS To Veterans with Honorable Discharge documentation from the United States Armed Services may be used for appointment or promotion by written notification for Deputy Sheriff and Correctional Officer.

APPLICANT MUST:	
1.	Turn in completed application to the Coles County Sheriff's Office at 701 7 th St, Charleston IL 61920. Must include the signed Application Request and Release form. Applicants are encouraged to turn in completed applications as soon as possible.

APPLICATION MUST INCLUDE THE FOLLOWING:	
1.	Copy of Birth Certificate
2.	Copy of High School diploma or equivalent (GED)
3.	And (if applicable) copies of proof of further education (original copies of transcript with raised seal)
3.	Copy of proof of honorable discharge from active military service (if applicable), preferable a copy of DD 214

PLEASE NOTE: YOUR ORIGINALS WILL NOT BE RETURNED
PLEASE NOTE: You must bring some form of picture identification to ALL TESTING.

COLES COUNTY SHERIFF'S OFFICE

Instructions: Complete this application completely and accurately. All statements made in your application will be subject to verification. If you need additional space to respond to a particular question, use the space at the end of the application and number your response. Note those questions that do not apply to you by writing "N.A." for "not applicable".

1.	Name (Last, First and Middle):
2.	List any other name you have been known by, including maiden name or aliases:
3.	Address: (Street, City, State, County, Zip Code)
4.	Home Telephone Number:
5.	Social Security Number:
6.	Who lives with you at the above address: List full names and their relationship to you:
7.	Date of Birth:
8.	Place of Birth (City and State):
9.	Sex
10:	Height
11.	Weight
12.	Hair Color

13.	Eye Color	
14.	List any scars, birthmarks, identifying marks, etc.	
15.	Are you a citizen of the United States? If naturalized citizen, give details: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Native Born <input type="checkbox"/> Naturalized Citizen	
16.	List each member of your immediate family who is still living. (Include parents and siblings.):	
	Name	Relationship
	Complete Address	Occupation
17.	Emergency Contact Information	
	Name	Relationship
	Complete Address	Telephone #
18.	Do you use narcotics or barbiturates? If yes, give details: <input type="checkbox"/> Yes <input type="checkbox"/> No	
19.	Do you use alcohol habitually? If yes, give details: <input type="checkbox"/> Yes <input type="checkbox"/> No	
20.	Are you prone to bouts of dizziness, blackouts, or seizures which would render you incapacitated? If yes, give details: <input type="checkbox"/> Yes <input type="checkbox"/> No	
21.	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced	
22.	If married, are you living with your spouse currently? If no, explain: <input type="checkbox"/> Yes <input type="checkbox"/> No	

23.	Give information below regarding all marriages:					
	Date of Marriage	Location of Marriage	Wife's Maiden Name	Marriage ever Dissolved	Type of Dissolution	Phone Number of Ex-Spouse
24.	Are you currently paying alimony or child support? Explain:					
	Yes <input type="checkbox"/> No <input type="checkbox"/>					
25.	If divorced, list the names of your previous spouses and where they reside:					
26.	List below every child born to you, adopted by you, or stepchildren:					
	Name	Date of Birth	Place of Birth	Lives with	Town or Residence	Phone #
27.	Are you now supporting all children listed above? If no, explain:					
28.	Have you ever been involved as a defendant in a paternity proceeding? If yes, explain:					
	Yes <input type="checkbox"/> No <input type="checkbox"/>					

EDUCATIONAL BACKGROUND

29.	Name of School	Address of School	Number of Years	Dates Attended	Graduate	Grade Average

30.	List other special training you have received or professional licenses or certifications you hold or have held:
31.	Were you ever expelled or suspended from any school? If yes, give details:
	<input type="checkbox"/> Yes <input type="checkbox"/> No

DRIVING HISTORY

32.	Can you operate an automobile?	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
33:	Do you have an Illinois Driver's License?	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Date of Expiration:	
	Driver's License # :	
34.	Has your license ever been suspended or revoked or placed on probation? If yes, explain:	
35.	Have you ever possessed a Driver's License in another State? If yes, where?	
	Yes <input type="checkbox"/> No <input type="checkbox"/>	

PLACE OF RESIDENCE

36.	List your address for the last ten years, starting with your present address:				
	From	To	Address of Residence	City	State
37.	Current Residence:				
	<input type="checkbox"/> Own <input type="checkbox"/> Rent				
	Do you own other real estate? If yes, give location:				
38.	If Renting, Name, address and Phone Number for the Landlord				

MILITARY SERVICE

39.	Have you ever served in the U. S. Military?				
	<input type="checkbox"/> Yes <input type="checkbox"/> No				
	If yes, What branch of the Service?				
	Highest rank held:				
	Your rank at discharge:				
	What is your service serial number:				
	List period of active service and location of entrance to active duty:				

	List date and location of discharge:
	What type of discharge did you receive?
	Were you ever convicted at a court martial? If yes, explain:
	<input type="checkbox"/> Yes <input type="checkbox"/> No
40.	Are you now or were you ever a member of the U. S. Military Reserves or National Guard?
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, list dates, branch, unit, rank:
41.	Were you ever subject to disciplinary action in the reserves or national guard?
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, explain:

CRIMINAL HISTORY

42.	Have you ever been fingerprinted by a police agency other than for an arrest?
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, explain:
	Have you ever been the victim of a crime: If yes, explain:
	<input type="checkbox"/> Yes <input type="checkbox"/> No

	Was this crime reported to the police? If so, Report Number and Agency
	Have you ever been required to pay a fine in excess of \$25.00? If yes, explain:
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Have you ever been placed on probation? If yes, explain and list what County
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Have you ever been arrested and/or convicted of a crime? If yes, explain:
	<input type="checkbox"/> Yes <input type="checkbox"/> No
43.	Has any member of your immediate family ever been convicted for a serious crime?
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, explain:
44:	List all traffic citations you have received, with date, nature of violation and outcome of case:

45.	Are there any warrants, traffic, or other, now pending against you? If yes, explain:
	<input type="checkbox"/> Yes <input type="checkbox"/> No

EMPLOYMENT HISTORY

46. List all jobs held for the last ten years in sequence, including periods of unemployment. List more recent jobs first. Include temporary or part-time jobs.

Employer's Name	Employer's Address	Supervisor's Name	Type of Business	Phone #	Dates	Salary	Title	Left
<i>Please place a * by the name of any employer you do not wish us to contact.</i>								

HAVE YOU EVER RECEIVED DISCIPLINE FROM AN EMPLOYER

DATE	EMPLOYER	TYPE OF DISCIPLINE AND REASON

47.	Have you ever taken a civil service exam? If yes, give details:					
	<input type="checkbox"/> Yes <input type="checkbox"/> No					
	Have you ever applied with a law enforcement agency? If yes, give details:					
	<input type="checkbox"/> Yes <input type="checkbox"/> No					
	Were you ever rejected for any civil service position? If yes, give details:					
	<input type="checkbox"/> Yes <input type="checkbox"/> No					
48.	List length of time you have received unemployment compensation, or other Federal, State or local benefits assistance: Also, list type of assistance.					
49.	Are you now or have you ever been engaged in any business as an owner, partner or corporate member? If yes, give details:					
	<input type="checkbox"/> Yes <input type="checkbox"/> No					
50.	Were you ever discharged or asked to resign because of misconduct or unsatisfactory service or while under investigation? If yes, give details:					
	<input type="checkbox"/> Yes <input type="checkbox"/> No					

CREDIT HISTORY

51.	List three commercial or business credit references (include bank accounts and loans):					
	Name of Firm	Address of Firm	Phone #	Amount	Date Closed	Comments

RELEASE OF AUTHORIZATION

The undersigned, for and in consideration of being allowed to participate in the pre-employment examination process for criminal justice agency employment by the Coles County Sheriff's Office, hereby releases and discharges the County of Coles, a body politic and corporate, its officers, employees, and agents, of and from any and all claims, demands, causes of action and liabilities to me, my heirs and my assigns, which may result for any and all losses and damages arising wholly or partially as a result of the examinations, and/or any pre-employment background investigations conducted by and for the Coles County Sheriff's Office.

The undersigned authorizes the release of medical, military, educational, credit, criminal history, work history, and personal information from all sources to the County of Coles for use in any pre-employment background examination.

Dated at Coles, Illinois this _____ day _____, 20_____

Signature: _____

Printed Name: _____

COLES COUNTY SHERIFF'S OFFICE

Coles County, Charleston, Illinois
For Patrol & Corrections

DOCTOR'S RELEASE

A strenuous physical qualification test (ability test) established by the Illinois Local Governmental Law Enforcement Officers Training Board will be conducted by the Sheriff's Office Personnel. The physical ability will be measured by:

1. Sit and Reach Test
2. 1 Minute Sit Up Test
3. 1 Repetition Maximum Bench-Press
4. 1.5 Mile Run
5. 2 Mile Walk

"I certify that _____ is physically capable of participating in this strenuous Physical Qualification Test."

WEIGHT: _____ HEIGHT: _____

Signed: Dr. _____

Address: _____

Date: _____

TO BE TURNED IN AT THE PHYSICAL ABILITY TESTING

This form IS NOT to be turned in with the completed application. Those attending the Physical Ability Test will be required to bring this form with them to the Physical Ability Test.

NOTE: REMOVE THIS SECTION BEFORE
RETURNING THE APPLICATION

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WHAT IS PHYSICAL FITNESS?

Physical fitness is a health status pertaining to the individual officer having the physiological readiness to perform maximum physical effort when required.

Physical fitness consists of three areas:

- Aerobic capacity or cardiovascular endurance pertaining to the heart and vascular system's capacity to transport oxygen. It is also a key area for heart disease in that low aerobic capacity is a risk factor.
 - Strength pertains to the ability of muscles to generate force. Upper body strength and abdominal strength are important areas in the low strength levels have a bearing on upper torso and lower back disorders.
 - Flexibility pertains to the range of motion of the joints and muscles. Lack of lower back flexibility is a major risk area for lower back disorders.
-
-

**WHY IS FITNESS IMPORTANT AS A JOB RELATED ELEMENT
FOR LAW ENFORCEMENT OFFICERS?**

It has been well documented that law enforcement personnel (as an occupational class) have serious health risk problems in terms of cardiovascular disease, lower back disorders, and obesity. Law enforcement agencies have the responsibility of minimizing known risk. Physical fitness is a health domain which can minimize the "known" health risks for law enforcement officers.

Physical fitness has been demonstrated to be a bona fide occupational qualification (BFOQ). Job analysis that account for physical fitness have demonstrated the fitness areas are underlying factors determining the physiological readiness to perform a variety of critical physical tasks. These three fitness areas have also been shown to be predictive of job performance ratings, sick time, and number of commendations of police officers. Data also show that fitness level is predictive of trainability and academy performance.

Physical fitness can be an important area for minimizing liability. The unfit officer is less able to respond fully to strenuous physical activity. Consequently, the risk of not performing physical duties is increased.

HOW WILL PHYSICAL FITNESS BE MEASURED?

The POWER TEST consists of 4 basic tests. Each test is a scientifically valid test. It is recommended that five minutes of static stretching, using techniques approved by the Board, be completed prior to each test. A five minute rest is recommended between each test with a fifteen minute rest before the 1.5 mile run. The tests will be given in the following sequence with a rest period between each test.

1. SIT AND REACH TEST

This is a measure of the flexibility of the lower back and upper leg area. It is an important area for performing police tasks involving range of motion and is important in minimizing lower back problems. The test involves stretching out to touch the toes or beyond with extended arms from the sitting position.

The score is in the inches reached on a yard stick.

2. 1 MINUTE SIT UP TEST

This is a measure of the muscular endurance of the abdominal muscles. It is an important area for performing police tasks that may involve the use of force and is an important area for maintaining good posture and minimizing lower back problems. The score is in the number of bent leg sit-ups performed in 1 minute.

3. 1 REPETITION MAXIMUM BENCH PRESS

This is a maximum weight pushed from the bench press position and measures the amount of force the upper body can generate. It is an important area for performing police tasks requiring upper body strength. The score is a ration of weight pushed divided by body weight.

4. 1.5 MILE RUN

This is a timed run to measure the heart and vascular systems' capability to transport oxygen. It is an important area for performing police tasks involving stamina and endurance and to minimize the risk of cardiovascular problems.

The score is in minutes and seconds.

WHAT ARE THE STANDARDS?

- The actual performance requirement for each test is based upon norms for a national population sample.
- The applicant must pass every test.
- The required performance to pass each test is based upon sex and age (decade). While the absolute performance is different for the 8 categories, the relative level of effort is identical for each age and sex group. All recruits are being required to meet the same percentile rank in terms of their respective age/sex group. The performance requirement is that level of physical performance that approximates the 40th percentile for each age and sex group.

POWER CHART

TEST	MALE				FEMALE			
	20-29	30-39	40-49	50-59	20-29	30-39	40-49	50-59
Sit and reach	16.0	15.0	13.8	12.8	18.8	17.8	16.8	16.3
1 minute sit up	37	34	28	23	31	24	19	13
Maximum Bench Press Ratio	.98	.87	.79	.70	.58	.52	.49	.43
1.5 Mile Run	13.46	14.31	15.24	16.21	16.21	16.52	17.33	18.44

1 Mile Run	10.00	11.00	12.00	13.00	10.00	11.00	12.00	13.00
2 Mile Walk	33.00	34.40	36.20	38.20	33.00	34.40	36.20	38.20

HOW DOES ONE PREPARE FOR THE POWER TEST?

1. Preparing for the sit and reach test.

Performing sitting type of stretching exercises daily will increase this area. There are two recommended exercises.

Sit and reach. Do 5 repetitions of the exercise. Sit on the ground with legs straight. Slowly extend forward at the waist and extend the fingertips toward the toes (keeping legs straight). Hold for 10 seconds.

Towel stretch. Sit on the ground with the legs straight. Wrap a towel around the feet holding each end with each hand. Lean forward and pull gently on the towel extending the torso toward the toes.

2. Preparing for the Sit Up Test

The progressive routine is to do as many bent leg sit-ups (hands behind the head) as possible in 1 minute. At least 3 times a week do 3 sets (3 groups of the number of repetitions one did in 1 minute).

3. Preparing for the 1 Repetition Maximum Bench Press

If one has access to weights, determine the maximum weight one can bench press at one time. Take 50% of that poundage. This will be the training weight. One should be able to do 8-10 repetitions of that weight. Do 3 sets of 8-10 repetitions adding 2 ½ to 5 pounds every week.

If one does not have weight equipment, then the push up exercise can be utilized. Determine how many push-ups one can do in one minute. At least 3 times a week do 3 sets of the amount one can do in one minute.

4. Preparing for the 1.5 mile run

Below is a gradual schedule that would enable one to perform a maximum effort for the 1.5 mile run. If one can advance the schedule on a weekly basis, then proceed to the next level. If one can do the distance in less time, then that should be encouraged.

WEEK	ACTIVITY	DISTANCE	TIME	FREQUENCY
1	Walk	1 Mile	20'-17'	5/week
2	Walk	1.5 Miles	29'-25'	5/week
3	Walk	2 Miles	35'-32'	5/week
4	Walk	2 Miles	30'-28'	5/week
5	Walk/log	2 Miles	27'	5/week
6	Walk/log	2 Miles	26'	5/week
7	Walk/log	2 Miles	25'	5/week
8	Walk/log	2 Miles	24'	4/week
9	Jog	2 Miles	23'	4/week
10	Jog	2 Miles	22'	4/week
11	Jog	2 Miles	21'	4/week
12	Jog	2 Miles	20'	4/week