



Ward Police Department

405 Hickory St. / P.O. Box 237 / Ward, Arkansas 72176
(501) 843-6351 / (501) 843-2340 / Fax # (501) 941-4699

Chief of Police
Steve A. Benton

Potential Applicants,

The Ward Police Department strives to provide the citizens of Ward with the most professional law enforcement service and protection possible. Thank you for your interest in joining us to serve and protect this great community. Please follow the directions to ensure all information is provided.

- **Use only blue ink.**
- **Answer Every Question:** If the question does not apply to you, please indicate by answering **N/A** or **NONE**.
- **Provide Complete Addresses:** Including Number, Street, City, State and Zip Code for all references, past employers or anything else that asks for an address. If mailing address is different than physical address, please provide both addresses.
- **Provide Complete Phone Numbers:** Including Area Code
- **Applications with missing or incomplete information will be disqualified.**
- **Notarized Forms:** This package has three (3) forms that will need to be notarized. They are the Personal History Statement, Authorization for the Release of Information, and Domestic Violence Affidavit for Pre-Employment. If you do not know a notary, please return the form in person so one of our notaries can witness your signature. There **will not** be a charge for this service.

All information asked for in the application package is required to conduct a background check, if the application package is not fully completed as required it will be considered incomplete and will not be processed for consideration.

All applications will be kept on file for sixty (60) days and will be reviewed when positions become available.

Thank you for your time and interest in applying with our Police Department.

Respectfully,
Steve A. Benton
Chief of Police

WARD POLICE DEPARTMENT HIRING PROCEDURES

The following outlines the Ward Police Department hiring procedures:

1. Review of application and attached paper work.
2. Interview Board. *If Applicant passes Interview Board he/she moves to the following procedures.*
3. Background Investigation and Review.
4. Background Investigator and Interview Board Members make recommendations to the Police Chief.
5. Interview with Police Chief.
6. Conditional Letter of Hire. *Pending if Applicant passes the following procedures.*
7. Drug Screen.
8. Physical Examination.
9. Psychological Examination.
10. Review of Drug Screen, Physical, and Psychological Examination.
11. Offer of Employment.

NOTE: Please check which position you are applying for

Police Officer

Chose one: Full-Time Part-Time Auxiliary (Non-Pay) ANY POSITION

Sign the attached Job Description

Communication Officer

Chose one: Full-Time Part-Time ANY POSITION

Sign the attached Job Description

The following are needed documents/forms for background investigation:

- Birth certificate
- High School / GED Diploma
- College Transcript
- DD214 long form (If prior military)
- Certification of Training (if prior/current Law Enforcement)

WARD POLICE DEPARTMENT

PATROL OFFICER

JOB DESCRIPTION

JOB SUMMARY: Patrol officers operate under the general supervision of the Patrol Sergeant to assist in the prevention of crime and the preservation of order. Patrol officers are primarily responsible for protecting life and property and enforcing laws and regulations throughout the city.

SPECIFIC JOB DUTIES AND RESPONSIBILITIES:

Enforce the laws and ordinances of the City and State and all other pertinent laws.

Investigate suspicious conditions and complaints.

Arrest and restrain persons who violate laws and ordinances.

Transport prisoners to the Police Department and to and from various jails and courts.

Direct traffic and issue citations to traffic violators.

Check vehicles parking in restricted areas and issue citations when necessary.

Respond to fires and accidents in assigned areas, or as directed, and provide all possible assistance and prepare proper reports.

Maintain order in crowds or disturbances.

Escort parades, funerals, and attends other public events as required.

Answer criminal complaints and take necessary corrective action.

Attempt to respond to citizen's questions on laws and ordinances.

Operate patrol cars safely as required and perform minor maintenance, such as adding gasoline, checking oil, and tires.

Attends and testifies in court as required.

Follows all policies, laws and protocol.

Complete and submit all proper reports and affidavits in timely manner.

Performs and completes any other related work or task.

(Over)

Reports any infractions of Departmental and/or City Policies and/or violation of State or local laws by any police officers or employees of the City of Ward.

Performs any other legal or ethical act as requested by the Chief of Police, Lieutenant, or Sergeant.

MINIMUM QUALIFICATIONS FOR PATROL OFFICERS:

Successful completion of the Arkansas Law Enforcement Training Academy within one (1) year of hire for Full-Time/Part-Time I Officer or a Commission on Law Enforcement Standards and Training approved forty (40) hours Law Enforcement Refresher Course.

Successful completion of Commission on Law Enforcement Standards and Training approved Reserve Officer Course within one (1) year of hire for Part-Time II and Specialized Officers. Auxiliary Officers must successful complete a Reserve Officer Course prior to being employed.

Completion of all State required certifications for law enforcement officers.

Must be at least twenty-one (21) years of age.

High school diploma or equivalent.

Citizen of the United States.

Consent to a Background Check.

Must pass a background check before employment.

A valid Arkansas driver's license with relatively clean driving record for the past three (3) years.

No convictions of violation of the Arkansas Hot Check Law, DWI/DUI, Failure to Appear, or Contempt of Court within the past ten (10) years.

No felony or misdemeanor convictions involving violence, weapons, or illegal drugs.

The ability to successfully complete all training classes or programs assigned.

SPECIAL KNOWLEDGE, SKILLS, and ABILITIES:

Knowledge of Federal, State, and City laws and ordinances: including rules of criminal procedures and laws governing search and seizure and rules of evidence.

Knowledge of modern police methods.

Ability to physically and mentally react in a variety of emergency law enforcement situations.

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Good social skills and above average intelligence with the ability to communicate effectively, both orally, and written.

The ability to understand and carry out oral and written instruction.

The ability to observe situations and to record them clearly and accurately.

The ability to perform multiple tasks at any given time.

SPECIAL KNOWLEDGE, SKILLS, and ABILITIES, Continued:

The ability to perform with all types of law enforcement equipment: including but not limited to the use of firearms.

The ability to get along with co-workers.

The ability to maintain proper self restraint and composure during and following any altercation or incident.

The listed information is intended to describe the general nature of this position and is not considered to be a complete statement of duties, responsibilities, and requirements.

Acknowledged: _____ Date: _____

Witnessed: _____ Date: _____

WARD POLICE DEPARTMENT

APPLICANT INFORMATION FOR RECORD KEEPING REQUIREMENT

(Answer All Questions & Please Print)

The City of Ward is an Equal Opportunity Employer. We request that you voluntarily provide the following information which will be used to study recruitment and employment patterns and to provide, as requested, statistical data to certain federal compliance agencies. This information WILL NOT be used in the employment process, and failure to provide the information WILL NOT jeopardize your opportunity for employment with the City of Ward.

NAME: _____ TODAY'S DATE: _____

Title of job for which you have applied: _____

SEX & RACE/ETHNIC IDENTIFICATION

(Check One)

SEX: Male [] Female []

RACE/ETHNIC: For the purpose of Equal Opportunity, race/ethnic categories are identified as follows.....Please check the category that identifies your race/ethnic background.

[] WHITE (Not of Hispanic origin) – All persons having origin in any of the original people of Europe, North America or the Middle East.

[] BLACK (Not of Hispanic origin) – All persons having origin in any of the Black racial groups of Africa.

[] HISPANIC All persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

[] ASIAN OR ALASKAN NATIVE All persons having origins in any of the original people of North America and who maintain culture identification through tribal affiliation or community recognition.

I understand that I am protected by various laws prohibiting discrimination on the basis of race, color, national origin, sex, religion, age, (if over the age of 40) and, in some circumstances, disability or veteran status. I further understand that the information contained in this is to be used solely in equal employment record keeping, reporting and other legal requirements. I also understand that this information will be kept in strictest of confidence and will not be disclosed to others except for the above stated purpose and then only if necessary.

SIGNED: _____ DATE: _____

NOTE: The information provided on this form will be kept separate from the employment application form.

STATE OF ARKANSAS

COMMISSION

ON

LAW ENFORCEMENT STANDARDS

AND TRAINING

PERSONAL HISTORY STATEMENT

PERSONAL HISTORY STATEMENT

Law Enforcement Agency: Ward Police Department Date: _____

INSTRUCTIONS: Fill out this questionnaire completely and accurately. All statements in your questionnaire are subject to verification. Incorrect statements may bar or remove you from employment. If space provided is inadequate, add additional pages and identify information by item number. If a question does not apply to you, indicate by writing N/A in the answer blank. Type or print legibly in all responses.

PERSONAL:

1. Name: _____ / /
First: Middle: Last: Social Security Number

Nicknames or Aliases: _____

2. Height: _____ inches Weight: _____ lbs.

3. Present Mailing Address: _____
Street & Number City State Zip Code

Permanent Mailing Address: _____
Street & Number City State Zip Code

Telephone Number: Home: _____ Business: _____

4. Date of Birth: _____ Place of Birth: _____

5. Citizenship: U.S. Born U.S. Naturalized Other-Specify _____

6. List organizations, clubs and associations of which you are or have been a member, or with which you are or have been associated.

7. List hobbies and/or special skills. _____

MARITAL:

8. Marital Status (check one) Single Married Divorced
 Engaged Separated Widowed

9. Name of Spouse or Fiancé(s): _____ DOB: _____

10. If married, are you living with your spouse? Yes No
 If not, State Reason: _____

11. Have ever been separated or divorced? Yes No
 If yes, give date and location: _____

12. Give the following information concerning your spouse's parents:

	Name:	Complete Address
Father		
Mother		

13. List Below every child born to you:

Name:	Complete Address	Place of Birth	With Whom Resides

14. Are you now supporting all children born to you, adopted by you and Stepchildren? Yes No
 If no, give details. _____

15. Have you ever been involved as defendant in a paternity proceeding? Yes No
 If yes, give date, court or jurisdiction: _____

REFERENCES:

16. Give the names of five responsible persons, **other than relatives or past employers**, who could provide information about your character, ability, experience, personality and other qualities:

Name:	Complete Address:	Complete Phone Number:

FAMILY HISTORY:

17. List your parents, brothers and sisters:

	Name:	Complete Address:	Complete Phone Number:
Father			
Mother			
Bro/Sis			
Bro/Sis			
Bro/Sis			

18. Has any member of your immediate family ever been arrested or convicted of a felony offense?

Yes No If yes, complete the following:

Date:	Location:	Charge:	Disposition:

FINANCIAL:

19. Do you have life insurance and/or hospitalization insurance: Yes No

20. Have you a savings account? Yes No
 Bank: _____ City and State: _____
 Bank: _____ City and State: _____

21. Have you a checking account? Yes No
 Bank: _____ City and State: _____
 Bank: _____ City and State: _____

22. Do you own or have interest in any type of business dealing with alcohol?
 Yes No If yes, give name, location and type of business:

23. Do you own or are you buying your own home: Yes No
 Is there a mortgage on the property? Yes No

24. Do you own or are you buying other real estate? Yes No
 If yes, give name of agency holding mortgage:
 Bank or Company: _____ City and State: _____

25. List motor vehicles that you own or are buying or leasing:

Make:	Model:	Year:	Amount Owed:

26. What income other than salary do you have at present? Include spouse's salary?

27. List Credit References:

Name of Firm:	Amount Owed:
Complete Address:	
Name of Firm:	Amount Owed:
Complete Address:	

Name of Firm:	Amount Owed:
Complete Address:	
Name of Firm:	Amount Owed:
Complete Address:	
Name of Firm:	Amount Owed:
Complete Address:	
Name of Firm:	Amount Owed:
Complete Address:	
Name of Firm:	Amount Owed:
Complete Address:	

28. What is your indebtedness at present? _____

29. Have your creditors treated you fairly? Yes No If not, explain: _____

30. Have you ever been sued? Yes No If yes, give details: _____

RESIDENCES:

31. List addresses for the past 10 years starting with **present** address at top:

FROM MO. YR.	TO MO. YR.	ADDRESS OF RESIDENCE	CITY / STATE & ZIP	LANDLORD
	PRESENT			

WORK HISTORY:

32. Are you now or have you ever been engaged in any business as an owner, partner, or corporate board member: Yes No If yes, give details below: _____

33. If you have ever been discharged or forced to resign because of misconduct or unsatisfactory service, give details: _____

34. Have your employers always treated you fairly? Yes No If not, Explain: _____

35. Do you object to wearing a uniform? Yes No

36. Do you object to working nights? Yes No

37. Do you object to working shifts? Yes No

38. List **ALL** jobs you have held in the last ten years. **Put your present or most recent job first.** If you need more space, you may attach additional sheets. Include military service in proper item sequence and temporary part-time jobs.

A. Title of present _____ Starting _____ Ending _____
 or last position: _____ Salary: _____ Salary _____

Date Employed:			Name and Title of supervisor:			No. of employees supervised by you:		
Date Separated:			Employer:			Complete Address:		
Full-Time	Years	Months	Details:					
Part-Time	Years	Months						
If Part-Time, # of hours worked per week:			Reason for leaving:					

B. Title of present _____ Starting _____ Ending _____
 or last position: _____ Salary: _____ Salary _____

Date Employed:			Name and Title of supervisor:			No. of employees supervised by you:		
Date Separated:			Employer:			Complete Address:		
Full-Time	Years	Months	Details:					
Part-Time	Years	Months						
If Part-Time, # of hours worked per week:			Reason for leaving:					

C. Title of present _____ Starting _____ Ending _____
 or last position: _____ Salary: _____ Salary _____

Date Employed:			Name and Title of supervisor:			No. of employees supervised by you:		
Date Separated:			Employer:			Complete Address:		
Full-Time	Years	Months	Details:					
Part-Time	Years	Months						
If Part-Time, # of hours worked per week:			Reason for leaving:					

D. Title of present or last position: _____ Starting Salary: _____ Ending Salary: _____

Date Employed:			Name and Title of supervisor:	No. of employees supervised by you:
Date Separated:			Employer:	Complete Address:
Full-Time	Years	Months	Details:	
Part-Time	Years	Months		
If Part-Time, # of hours worked per week:			Reason for leaving:	

E. Title of present or last position: _____ Starting Salary: _____ Ending Salary: _____

Date Employed:			Name and Title of supervisor:	No. of employees supervised by you:
Date Separated:			Employer:	Complete Address:
Full-Time	Years	Months	Details:	
Part-Time	Years	Months		
If Part-Time, # of hours worked per week:			Reason for leaving:	

39. Have you previously submitted an application for employment with this agency? Yes No
If yes, approximate date: _____

MILITARY SERVICE:

40. Were you ever in the U.S. Military Service or any other military organization? Yes No
Branch of Service: _____ Unit: _____ Date of Enlistment: _____
Date of Discharge: _____ Service Number: _____ Highest Rank: _____

41. List medals and decorations: _____

42. Type of discharge: _____

43. If you are presently a member of the National Guard or any military reserve, give the unit, location, and describe your obligation: _____

44. List all schools attended:

Name of School	Location Complete Address	From MO. & YR.	To MO. & YR.	Year Completed
Grade School				
High School				
College or University				

45. Did you either graduate from high school or pass the high school equivalency test? Yes No

46. List college degrees received and major field of each. Include incomplete courses: _____

47. Were you ever expelled from any school or were you ever disciplined by any school official?

Yes No If yes, explain: _____

ARREST AND MILITARY DISCIPLINARY:

Answer all of the following questions completely and accurately. Any falsification or misstatements of fact may be sufficient to disqualify you. (Exclude minor traffic violations)

48. Have you ever been arrested or detained by police? Yes No If yes, give details below:

- A. Crime Charged: _____ Police Agency: _____
Date: _____ Disposition of Case: _____
- B. Crime Charged: _____ Police Agency: _____
Date: _____ Disposition of Case: _____
- C. Crime Charged: _____ Police Agency: _____
Date: _____ Disposition of Case: _____
- D. Crime Charged: _____ Police Agency: _____
Date: _____ Disposition of Case: _____

49. Have you ever been placed on probation? Yes No If yes, give details below: _____

50. Have you ever been required to pay a fine in excess of \$25.00? Yes No If yes, give details below: _____

51. Have you ever been reported as a missing person or as a runaway? Yes No If yes, give complete details, including jurisdiction, dates and outcome: _____

52. Were you ever court martial, tried on charges, or were subject of a summary court, deck court, captain's mast or company punishment, or any other disciplinary action while a member of the armed forces?
 Yes No If yes, explain below: _____

53. List any disciplinary action taken against you in the National Guard or other reserve unit? _____

54. If you have ever been fingerprinted by a police agency other than for an arrest, give details below. Your answers will be checked with the F.B.I. and other agencies.

Agency: _____	Date: _____	Reason: _____
Agency: _____	Date: _____	Reason: _____
Agency: _____	Date: _____	Reason: _____
Agency: _____	Date: _____	Reason: _____
Agency: _____	Date: _____	Reason: _____

55. Can you operate a motor vehicle? Yes No

56. Do you possess a valid operator's license from the State of Arkansas? Yes No
Operator's License Number: _____ Date Issued: _____

57. Do you possess an operator's license issued by any state other than Arkansas? Yes No
If so, give state and number: _____

58. Was your license ever suspended or revoked? Yes No If yes, state which and give reason: _____

59. Was your license ever restored? Yes No When?_____

60. Have you ever been refused an operator's license by any state? Yes No

61. Have your driving privileges ever been restricted? Yes No If yes, give details:_____

62. Has a motor vehicle being driven by you ever been involved in an accident? Yes No
If yes, give complete details for each accident whether collision or non-collision:_____

A. Date:_____ Police Investigation? Yes No
Location:_____ Cause of Accident:_____

B. Date:_____ Police Investigation? Yes No
Location:_____ Cause of Accident:_____

C. Date:_____ Police Investigation? Yes No
Location:_____ Cause of Accident:_____

63. List any convictions for minor traffic violations:

Location:	Approximate Date:	Nature of Violation:	Penalty or Disposition:

ATTITUDES:

64. What do you consider to be the current social problems of greatest concerns?

65. What are your experiences and beliefs concerning the use of alcoholic beverages?

66. What are your experiences and beliefs concerning the use of marijuana and/or other mind altering drugs?

67. What are your feelings about the use of deadly force if it becomes necessary in the performance of official duties?

CAREER OBJECTIVES:

68. Explain briefly your reasons for applying for this position:

I hereby certify that all statements made in this questionnaire are true and complete and understand that any misstatements of material facts will subject me to disqualification or dismissal.

Signature in Full

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC, THIS _____ DAY

OF _____, 20__

**NOTICE-False swearing is a Class A
Misdemeanor, Punishable under
Arkansas Code 5-53-103.**

WARD POLICE DEPARTMENT

Authorization for the Release of Information

TO WHOM IT MAY CONCERN:

As an applicant for a position with the Ward Police Department, I recognize that two essential characteristics for anyone entering the law enforcement profession are honor and integrity. I further recognize the need for the Ward Police Department to conduct an extensive background check on every applicant.

With this recognition in mind, I hereby authorize the Ward Police Department and its authorized representatives in possession of this release, or a copy thereof, within one year of its date, to obtain any information in your files pertaining to my employment, military, credit, education, juvenile court, psychological, or medical records, including not limited to academic, achievement, attendance, athletic, personal history, and disciplinary records, medical records, and credit records.

I hereby direct you to release such information upon request of the Ward Police Department. This release is executed with full knowledge and understanding that the information is for official use. Consent is granted to all parties to furnish such information, as described above, to third parties in the course of fulfilling its official responsibilities. I hereby release you, as custodian of such records, and any law enforcement agency, court, school, college, university, or other educational institution, hospital, or other repository of medical records, credit bureau, lending institution, consumer reporting agency, or retail business establishment including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or attempt to comply with it.

I am furnishing my Social Security Account Number on a voluntary basis with the understanding such is not required by any law or regulation. I have been advised that all parties will utilize this number only to facilitate the location of employment, military, credit, court, law enforcement, and educational records concerning me in connection with this application. Should there be any question as to the validity of this release, you may contact me as indicated below:

(Over)

Applicant's Full Name (Print): _____

Address: _____

Telephone Number: (_____) _____

Applicant's Notarized Signature: _____

Sworn to and signed before me, on this the _____ day of _____,
_____.

in and for _____ county, in the state of _____ .

Signature of Notary Public: _____

NOTARY SEAL

Printed Name of Notary Public: _____

My Commission Expires: _____

WARD POLICE DEPARTMENT

DOMESTIC VIOLENCE

AFFIDAVIT for PRE-EMPLOYMENT

STATE OF ARKANSAS

_____, I being first duly sworn on oath, states as follows:

My name is _____. I am applying for an employment position with Ward Police Department. As part of my background investigation, I have been asked to provide this sworn affidavit to attest to whether I have ever been the subject of a domestic violence investigation; a protective order related to domestic violence or an arrest based on a domestic violence charge. I understand that as a condition of employment, this background investigation requires that I provide this information. This is necessary to ensure that I meet the criteria for employment with Ward Police Department. I understand that this information is necessary due to federal statutes which disqualify certain individuals from possessing firearms.

Applicant's Signature

Subscribed and sworn to before me this

_____ day of _____, 20_____

Notary Public, State of

My Commission expires _____