



Application for Police Recruit City of Houghton Police Department

Mission Statement

The City of Houghton Police Department is professional and personable and we care about the community we protect. Partnered with the community, the City of Houghton Police Department strives to create a healthy and safe community for our children, citizens and visitors to enjoy.

Overview

The City of Houghton Police Department is offering an opportunity to attend a Police Academy to become an officer, with tuition paid for by City of Houghton Police Department. Employees at all levels are selected based on their qualifications, skills and abilities.

The City of Houghton Police Department offers competitive wages and benefits.

The City of Houghton is an equal opportunity employer and provider.

Salary: \$20.22 per hour during Academy training, \$27.03 after graduation

Applications will be accepted until March 1, 2023. Interested applicants can submit their application to the City of Houghton Police Department.

Applicants will be required to submit to and pass a drug test.

Job Description: Police Recruit

Read the job description below before applying; it contains important information about expectations for the position. Applicants must meet the minimum qualifications, no exceptions. You are responsible for documenting that you meet all requirements; failure to do so can result in disqualification.

General Summary

This is training-level work in general duty police activities involving the protection of life and property, enforcement of laws, and the investigation of crimes. An employee in this classification receives formal training at a Police Academy approved by the Michigan Commission on Law Enforcement Standards (MCOLES). Upon successful completion of that training and obtaining of an MCOLES license, an employee in this job classification will be eligible for potential employment in the classification of Patrol Officer.

Essential Functions

- Learn police procedures, practices and techniques.
- Learn and understand laws, statutes and regulations essential to law enforcement activities.
- Cope with situations firmly, courteously, tactfully and with respect for the rights of others.

- Analyze situations quickly and objectively and determine a proper course of action to be taken.
- Understand and carry out oral and written instructions.
- Write and speak effectively.
- Complete satisfactorily the prescribed course of training at the Police Academy.
- Learn and develop skill in the use and care of firearms and other equipment used in the performance of essential tasks.
- Learn clerical procedures connected with police work.
- Develop good general intelligence and emotional stability.
- Operate equipment in the performance of essential tasks.
- Perform the essential and physical functions of the job.
- Use computer systems to obtain necessary information in the performance of the position.

This list may not be inclusive of the total scope of job functions to be performed. Duties and responsibilities may be added, deleted or modified at any time.

Employment Qualifications

Education: High school diploma or GED. Associate's Degree in law enforcement, criminal justice, or related area preferred.

Other Requirements: At least 20 years of age. Successful completion of the MCOLES Written and Physical Abilities Test. United States citizen. Valid Michigan driver's license. No prior felony convictions or certain misdemeanor convictions.

The qualifications listed above are intended to represent the minimum skills and experience levels associated with performing the duties and responsibilities contained in this job description. The qualifications should not be viewed as expressing absolute employment or promotional standards, but as general guidelines that should be considered along with other job related selection or promotional criteria.

Working Conditions

- Required to deal with people in various states of intoxication and emotional and mental conditions.
- Required to work outside in all sorts of weather.
- Exposure to extreme changes in temperature.
- Exposure to a variety of foul odors.
- Exposure to contact with bodily fluids of others.
- Exposure to assault by individuals with various weapons.
- Exposure to blood-borne pathogens.
- Exposure to homes in various states of cleanliness and hygiene.
- Exposure to individuals with various communicable diseases and health concerns.

Physical Requirements

Traverse difficult terrain; strength and stamina to physically restrain suspects; running, climbing, standing, squatting, and sitting for prolonged periods of time; occasionally lift and carry over 100 pounds; strength to subdue persons and to drag, carry and lift persons and objects; vision to read printed materials and computer screens; and hearing and speech to communicate in person or over the radio/telephone.

The physical demands described herein are representative of those that must be met by an employee to successfully perform the essential functions of the job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

Northern Michigan University Regional Police Academy General Information

***Medical, eye and hearing exams costs are the responsibility of the recruit

Financial Aid:	Contact Mike Rotundo	(906)2271575
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Important Dates:			
	Orientation Meetings	Nov 2, 2023 5:00 pm	Room 132 Jacobetti Complex
	Mandatory Meeting	Dec 7, 2023	Room 132 Jacobetti Complex
	Testing	Jan/Feb 2023	
	Application Deadline	5:00pm Feb 25, 2023	
	Interviews/Uniforms	March 6-8, 2023	Room 132 Jacobetti Complex
	First day of Academy	May 8, 2023	
	Graduation	Aug 17, 2023	

PT – Must sign up by calling (906)227-1408. Bring the signed Physician Physical Screening Form, \$45.00 check/cash, Operator's license, pen or pencil. Test is held in the Vandament Arena located in the Physical Education Instructional Facility.

MCOLES – Register for the MCOLES Reading/Writing by going to www.pbstesting.com. The test is held at the MARESA Building 321 E Ohio St, Marquette, MI 49855.

Fill out the application on the following pages and return to the Houghton Police Department:
Email to police@cityofhoughton.com or drop off/mail to 616 Shelden Ave, Houghton MI 49931

CITY OF HOUGHTON

Employment Application
Police Department



APPLICANT INFORMATION

Last Name		First		Middle	
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available			Date of Birth:		
Position Applied for					
Are you a citizen of the United States?		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you ever worked for this company?		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	If yes, explain	
Are You:		Male <input checked="" type="checkbox"/>	Female <input type="checkbox"/>		
Maiden Name if Applicable			Any Alias		

EDUCATION

High School		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Degree
College		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Degree
Other		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Degree

REFERENCES

Please list three professional references.

Full Name		Relationship
Company		Phone ()
Address		

Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT

Company		Phone ()
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/>		
Company		Phone ()
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/>		
Company		Phone ()
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/>		

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DRIVER'S LICENSE

Do you presently have a Michigan Driver's License?

If so, please attach a copy of the license to this application as well as your driving record from the Secretary of State

If you do not have a valid Michigan Driver's License, please provide a copy of your license and driving record from another state.

DISCLAIMER/AUTHORITY TO RELEASE INFORMATION/SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

The City of Houghton adheres to USDOT policy, Section 40.25

This provision requires employers to check on the drug and alcohol testing background of new hires and other employees beginning safety-sensitive work. Employers would have to get written consent from the applicant (in the absence of which the employer would not hire the person). The employer sends the request for information and the employee's consent to all other employers for whom the employee had worked within the previous two years.

The employer cannot let the employee perform safety-sensitive duties for more than 30 days unless the employer has obtained, or made and documented a good faith effort to obtain, the required information from previous employers (as well as from firms to whom the employee applied for safety-sensitive work, where there was a positive test result or a refusal). If the employer finds that the employee has a violation on his record, and the employee has not successfully completed the return-to-duty process, the employer must immediately stop using the employee to perform safety-sensitive functions.

I consent to the release of information concerning my capacity and/or all aspects of prior job performance by employers, educational institutions, law enforcement agencies for the purpose of determining my eligibility and suitability for employment.

Signature

Date



CITY OF HOUGHTON

POLICE DEPARTMENT

616 Shelden Avenue, P.O. Box 606

Houghton, Michigan 49931

Phone: (906) 482-2121

Fax: 906-482-0353

email: policedepartment@cityofhoughton.com

Authorization for Release of Records

In order to determine my suitability for employment with the Houghton Police Department, the Houghton Police Department is conducting a personal background investigation.

I, _____ do hereby authorize any military organization, educational institutions, governmental agencies, banks and credit agencies, former and present employers, and individuals to furnish to the Chief of Police, City of Houghton, MI or the authorized agent, all information regarding me, whether or not it is in their records. I hereby release them from civil or criminal liability whatsoever for issuing the same.

I understand that all information gathered during the course of this investigation is to be held in the strictest of confidence.

I hereby certify that there are no willful misrepresentations or falsifications of my statements and answers to the questions. I am aware that should an investigation disclose such misrepresentation or falsification, my application will be rejected.

Signature

Date

Witness

WAIVER & AUTHORIZATION FOR RELEASE OF INFORMATION

Sections A & B to be completed by all applicants (non-licensed, currently licensed, or previously licensed law enforcement officers)

Section A - Type or print only:

Last Name:	First Name:	Middle Name:	Suffix (Jr, Sr, III):	
Social Security No.*:	Date of Birth:	Phone No.:	Gender [†] :	Race [‡] :
Residence Address (Street, City, State, Zip):			Highest Degree:	
Drivers License No.:	Issuing State:	E-Mail:		

Section B – Authorization for release of information:

I hereby authorize any individual, agency or organization to furnish to the Michigan Commission on Law Enforcement Standards, the _____¹, their representatives and/or agents (including, but not limited to, academies or contractors) any and all information pertaining to my background and ability to comply with the standards for selection, employment, training and licensing as a law enforcement officer. Such information includes, but is not necessarily limited to: employment, criminal, academic, military, and personal histories; academic, attendance, and driving records; and medical records (includes medical/psychological, including diagnosis and prognosis, if any).

I hereby authorize any individual, agency or organization to release such information upon request. This authorization is executed with the full knowledge and understanding that the information is for official use by the Michigan Commission on Law Enforcement Standards and the _____¹.

Further, I hereby authorize the Michigan Commission on Law Enforcement Standards to release any and all records collected pursuant to this authorization to any individual, agency or organization for the legitimate purposes of fulfilling the Commission's statutory and administrative objectives.

I hereby release any individual, agency or organization, including its officers, employees and related personnel, both individually and collectively, from any and all damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this Authorization for Release of Information, or any attempt to comply with it.

This Authorization shall continue in effect until revoked by me in writing. A photostatic copy of this Authorization shall have the same force as the original.

Applicant Signature:	Today's Date:
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Section C to be completed by current or previously licensed law enforcement officers only

Section C – Former Michigan employing law enforcement agency authorization:

I hereby authorize any and all of my former employing Michigan law enforcement agencies to provide the _____¹, with a copy of the record regarding the reason or reasons for, and circumstances surrounding, my separation of service created by any former employing law enforcement agency or agencies. ***(Under 2017 PA 128, MCL§28.561, et seq. a hiring law enforcement agency shall not hire a law enforcement officer unless the hiring law enforcement agency receives the record regarding the reason or reasons for, and circumstances surrounding, a separation of service from each prior employing law enforcement agency.)***

Applicant signature:	Today's Date:
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AUTHORITY: 1965 PA 203; 2017 PA 128
 COMPLIANCE: Voluntary
 PENALTY: No License Activation/ Employment/
 Academy Enrollment

* This information is confidential.
 Confidential information is protected
 by the Federal Privacy Act.

‡ This information is for
 the purposes of EEO
 reporting only.

¹ Type or print the name of the hiring law enforcement agency or the enrolling academy.