



FOR OFFICE USE ONLY	
Date Received:	
Time Received:	
Received By:	No: _____

**ALTOONA POLICE DEPARTMENT
POLICE OFFICER EMPLOYMENT APPLICATION**

Applicant's Name: _____
Last Name
First Name
Middle Name

Date of Application: _____

Copies of the following documents must accompany this application.
 Check if included or N/A if not applicable.

Included	Documents Provided	Verified By (Office Use Only)	Date Verified (Office Use Only)
	Birth Certificate		
	Driver's License		
	Social Security Card		
	DD Form 214 (If Applicable)		
	High School Diploma/G.E.D		
	High School Official Transcript		
	College Diploma/Certificate		
	College Official Transcript		
	Police Academy Diploma/Act 120		
	Police Academy Official Transcript		

11. CRIMINAL HISTORY:

- | | | |
|---|-----|----|
| A. Have you ever been convicted of any Felony or Misdemeanor offenses? | Yes | No |
| B. Have you ever pled guilty to any Felony or Misdemeanor offenses? | Yes | No |
| C. Do you currently have Felony or Misdemeanor offense charges pending? | Yes | No |

If you answered "Yes" to any of the above questions, you must provide the following information for each offense.

Offense: _____

Date of offense: _____

City and State where offense occurred: _____

Disposition or sentence for offense: _____

Additional information: _____

Offense: _____

Date of offense: _____

City and State where offense occurred: _____

Disposition or sentence for offense: _____

Additional information: _____

Offense: _____

Date of offense: _____

City and State where offense occurred: _____

Disposition or sentence for offense: _____

Additional information: _____

12. FINANCIAL:

A. Do you have sources of income other than your principal occupation or that of your spouse? Yes No

Amount	Frequency	Source

B. Do you have or have you had any financial accounts to include but not limited to savings, checking, loans, stocks, or bonds? Yes No If yes, list all accounts for the past seven years.

Name of Financial Institution	Address	Type of Account

13. PAST AND PRESENT MEMBERSHIP IN ORGANIZATIONS:

A. Are you currently a member or have you previously been a member of any organization? Yes No

Name	Address	Type-Social, Fraternal, Professional etc.	Office Held	Membership Dates-From-To

B. Are you now or have you been within the past five years, a member of any organization, association, movement, group, or combination of persons which advocates the overthrow of our constitutional form of government, or which has adopted the policy of advocating or approving the commission of acts of force or violence to deny other persons of their rights under the Constitution of the United States, or which seeks to alter the form of government of the United States by an unconstitutional means? Yes No If yes, describe the circumstances to include the nature and extent of your association with each organization, office or position held, dates, places, and credentials now or formerly held.

14. LICENSES, CERTIFICATES, SPECIAL QUALIFICATIONS AND/OR SKILLS:

A. List licenses, certificates, special qualifications or skills that directly relate to the qualifications of the position for which you are applying. (Provide license/certificate numbers and expiration dates, if applicable).

B. Special skills you possess and machines/equipment you can use. (For example computer, typewriter, polygraph, etc.).

15. FOREIGN LANGUAGE:

Indicate any foreign language skills you have and indicate your level of knowledge for each.

Language	Reading			Speaking			Understanding			Writing		
	Exc.	Good	Fair	Exc.	Good	Fair	Exc.	Good	Fair	Exc.	Good	Fair

16. EDUCATION:

Training	Name and Address	Did You Graduate	Type of Degree/Certificate Received	Major and Minor Course of Study
High School		Yes No		
Technical, Business or Other School		Yes No		
College, University or Professional		Yes No		
Police Academy Act 120 Training		Yes No		
Additional School (s)		Yes No		

17. EMPLOYMENT HISTORY:

A. Beginning with your most recent job, list your entire work history including full-time, part-time, temporary and seasonal employment and all periods of unemployment.

From	Name of Employer	Name of Supervisor	Telephone No.
To	Address (Street, City, State, Zip Code)		
Your Title	Ending Salary	Reason for Separation	
Description of Duties			

From	Name of Employer	Name of Supervisor	Telephone No.
To	Address (Street, City, State, Zip Code)		
Your Title	Ending Salary	Reason for Separation	
Description of Duties			

From	Name of Employer	Name of Supervisor	Telephone No.
To	Address (Street, City, State, Zip Code)		
Your Title	Ending Salary	Reason for Separation	
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Description of Duties			

From	Name of Employer	Name of Supervisor	Telephone No.
To	Address (Street, City, State, Zip Code)		
Your Title	Ending Salary	Reason for Separation	
Description of Duties			

From	Name of Employer	Name of Supervisor	Telephone No.
To	Address (Street, City, State, Zip Code)		
Your Title	Ending Salary	Reason for Separation	
Description of Duties			

B. Have you ever been fired, asked to resign, suspended for cause, or subjected to disciplinary action while in any position? Yes No If yes, explain the circumstances.

19. CHARACTER REFERENCES:

Provide five (5) character references that have known you for at least five (5) years and have definite knowledge of your qualifications for the position you are applying for. DO NOT list relatives, former employers, current employers, or persons living outside the United States.

Name, Last, First, MI	Address	Home Telephone	Work Telephone	Years Known
1.				
2.				
3.				
4.				
5.				

20. Are there any incidents in your life not mentioned herein which may reflect upon your suitability to perform the duties which you may be called upon to take or which might require further explanation? Yes No
 If yes, provide details:

21. Have you ever applied for a position with any other governmental agencies? Yes No

Agency	Address	Position Applied For	Date of Application	Current Status

22. ADDITIONAL COMMENTS:

NOTIFICATION PROCEDURE RELEASE

In the processing procedure required for applicants, it may be necessary to contact the applicant in the event he/she is being given further consideration for the position of Police Officer with Altoona Police Department.

If conventional methods fail in attempting to contact the applicant, a certified registered letter will be sent to the applicant's address listed on the application. Should the registered letter be returned indicating that it was unclaimed or undeliverable; the applicant will be eliminated from further processing and consideration.

It is the applicant's responsibility to notify the Altoona Police Department, in writing, of any change in current address or telephone number. By affixing your signature to this form, the applicant acknowledges that he/she has read and understands the contents of the procedure.

DATE

SIGNATURE OF APPLICANT

VERIFICATION

I understand that this application has been completed subject to the penalties of 18 Pa. C. S. Section 4904 relating to Unsworn Falsification to Authorities.

I certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the entries made by me above are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

I further agree and consent to this application being rejected without cause or hearing if any of the above information contains any misrepresentation, falsification, or if any material information has been omitted.

NOTICE TO APPLICANT

THIS APPLICATION WILL NOT BE ACCEPTED BY THE PERSONNEL OFFICE UNLESS ALL REQUIREMENTS ARE MET PURSUANT TO THE RULES AND REGULATIONS OF THE CIVIL SERVICE COMMISSION WHICH ARE APPLICABLE TO THE POSITION OF POLICE OFFICER.

THIS APPLICATION MUST BE NOTARIZED PRIOR TO BEING RETURNED TO THE PERSONNEL OFFICE.

PRINT NAME OF APPLICANT

SIGNATURE OF APPLICANT-MUST BE SIGNED IN PRESENCE OF NOTARY

STREET ADDRESS

CITY STATE ZIP CODE

On this ____ day of _____, 20____, before me, a Notary Public, personally appeared _____, known to me (or satisfactorily proven) to be the person whose name is subscribed to this document, and acknowledged that he/she executed the same for the purpose therein contained.

In witness thereof, I have hereunto set my hand and seal.

SEAL

My commission expires: _____

Municipal Police Officers' Education and Training Commission
50th Percentile Age & Gender Adjusted Rankings

Physical Fitness Test Battery

Graduation Standards

Event	Age 20 to 29		Age 30 to 39		Age 40 to 49		Age 50 to 59		Age 60 +	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
300 Meter Run	56.0	64.0	57.0	74.0	67.6	86.0	80.0	n/a	n/a	n/a
Time measured in seconds.										
Bench Press	1.06	0.65	0.93	0.57	0.84	0.52	0.75	0.46	0.68	0.45
Six attempts to complete one repetition = Body Weight X Ratio.										
Sit-ups	40	35	36	27	31	22	26	17	20	8
Total number of repetitions performed in one minute.										
1.5 Mile Run	11:58	14:15	12:25	15:14	13:05	16:13	14:33	18:05	16:19	20:08
Time measured in minutes and seconds.										

Municipal Police Officers' Education and Training Commission

50th Percentile Male Graduation Standards

Bench Press Conversion Chart

Body Weight	Age 20 to 29		Age 30 to 39		Age 40 to 49		Age 50 to 59		Age 60 +	
	DVR	Free Weight	DVR	Free Weight						
125	133	112	116	96	105	85	94	74	85	66
130	138	118	121	101	109	89	98	78	88	69
135	143	123	126	105	113	93	101	82	92	72
140	148	128	130	110	118	98	105	85	95	76
145	154	133	135	115	122	102	109	89	99	79
150	159	138	140	119	126	106	113	93	102	82
155	164	144	144	124	130	110	116	96	105	86
160	170	149	149	128	134	114	120	100	109	89
165	175	154	153	133	139	118	124	104	112	92
170	180	159	158	137	143	122	128	107	116	96
175	186	164	163	142	147	127	131	111	119	99
180	191	170	167	147	151	131	135	115	122	102
185	196	175	172	151	155	135	139	118	126	106
190	201	180	177	156	160	139	143	122	129	109
195	207	185	181	160	164	143	146	126	133	112
200	212	191	186	165	168	147	150	130	136	116
205	217	196	191	170	172	151	154	133	139	119
210	223	201	195	174	176	156	158	137	143	122
215	228	206	200	179	181	160	161	141	146	126
220	233	211	205	183	185	164	165	144	150	129
225	239	217	209	188	189	168	169	148	153	132
230	244	222	214	192	193	172	173	152	156	136
235	249	227	219	197	197	176	176	155	160	139
240	254	232	223	202	202	180	180	159	163	143
245	260	237	228	206	206	184	184	163	167	146
250	265	243	233	211	210	189	188	166	170	149
255	270	248	237	215	214	193	191	170	173	153
260	276	253	242	220	218	197	195	174	177	156
265	281	258	246	224	223	201	199	178	180	159
270	286	264	251	229	227	205	203	181	184	163
275	292	269	256	234	231	209	206	185	187	166
280	297	274	260	238	235	213	210	189	190	169
285	302	279	265	243	239	218	214	192	194	173
290	307	284	270	247	244	222	218	196	197	176
295	313	290	274	252	248	226	221	200	201	179
300	318	295	279	256	252	230	225	203	204	183
305	323	300	284	261	256	234	229	207	207	186
310	329	305	288	266	260	238	233	211	211	189
315	334	311	293	270	265	242	236	214	214	193
320	339	316	298	275	269	246	240	218	218	196
325	345	321	302	279	273	251	244	222	221	199
330	350	326	307	284	277	255	248	225	224	203
335	355	331	312	289	281	259	251	229	228	206
340	360	337	316	293	286	263	255	233	231	209
345	366	342	321	298	290	267	259	237	235	213
350	371	347	326	302	294	271	263	240	238	216

Municipal Police Officers' Education and Training Commission

50th Percentile Female Graduation Standards

Bench Press Conversion Chart

Body Weight	Age 20 to 29		Age 30 to 39		Age 40 to 49		Age 50 to 59		Age 60 +	
	DVR	Free Weight	DVR	Free Weight						
75	49	32	43	25	39	21	35	15	34	15
80	52	36	46	29	42	24	37	18	36	17
85	55	40	48	32	44	27	39	21	38	20
90	59	44	51	35	47	30	41	24	41	23
95	62	48	54	39	49	33	44	26	43	25
100	65	51	57	42	52	36	46	29	45	28
105	68	55	60	45	55	39	48	32	47	31
110	72	59	63	49	57	42	51	34	50	33
115	75	63	66	52	60	45	53	37	52	36
120	78	67	68	55	62	48	55	40	54	38
125	81	71	71	59	65	51	58	43	56	41
130	85	74	74	62	68	55	60	45	59	44
135	88	78	77	66	70	58	62	48	61	46
140	91	82	80	69	73	61	64	51	63	49
145	94	86	83	72	75	64	67	53	65	52
150	98	90	86	76	78	67	69	56	68	54
155	101	94	88	79	81	70	71	59	70	57
160	104	97	91	82	83	73	74	62	72	60
165	107	101	94	86	86	76	76	64	74	62
170	111	105	97	89	88	79	78	67	77	65
175	114	109	100	92	91	82	81	70	79	68
180	117	113	103	96	94	85	83	72	81	70
185	120	117	105	99	96	88	85	75	83	73
190	124	120	108	103	99	91	87	78	86	76
195	127	124	111	106	101	94	90	81	88	78
200	130	128	114	109	104	97	92	83	90	81
205	133	132	117	113	107	101	94	86	92	84
210	137	136	120	116	109	104	97	89	95	86
215	140	140	123	119	112	107	99	91	97	89
220	143	143	125	123	114	110	101	94	99	92
225	146	147	128	126	117	113	104	97	101	94
230	150	151	131	129	120	116	106	100	104	97
235	153	155	134	133	122	119	108	102	106	100
240	156	159	137	136	125	122	110	105	108	102
245	159	163	140	139	127	125	113	108	110	105
250	163	166	143	143	130	128	115	110	113	107
255	166	170	145	146	133	131	117	113	115	110
260	169	174	148	150	135	134	120	116	117	113
265	172	178	151	153	138	137	122	119	119	115
270	176	182	154	156	140	140	124	121	122	118
275	179	186	157	160	143	143	127	124	124	121
280	182	189	160	163	146	146	129	127	126	123
285	185	193	162	166	148	150	131	129	128	126
290	189	197	165	170	151	153	133	132	131	129
295	192	201	168	173	153	156	136	135	133	131
300	195	205	171	176	156	159	138	138	135	134