



**BACKGROUND DATA SHEET**  
**for Test Cycle**

**Southwestern Illinois Joint Fire & Police Recruitment  
& Testing Consortium**

NAME \_\_\_\_\_

\_\_\_\_\_  
Last 4 of Social Security Number

\_\_\_\_\_  
Today's date

**1. Are you currently a certified police officer?**

Yes → What municipality or accredited law enforcement training center? \_\_\_\_\_

No → Have you been an officer within the past 3 years?

Yes

No

**2. Do you plan to submit a DD214 (re: military service)**

Yes

No

N/A

**3. What is the highest level of education you have completed?**

60-64 semester hours of college / 90 quarter hours

Associate's Degree

Associate's Degree in Law Enforcement

16+ yrs., Bachelor's Degree

17+ yrs., Graduate School

N/A

**4. If you have taken college courses but not yet earned a degree, indicate the number of semester hours you will complete by January of next year. *Note: you do not need to answer this question if you have earned a college degree.***

\_\_\_\_\_

**5. If you have 2 or more years full time law enforcement experience with a municipal, county, state or federal agency, please list the details below.**

\_\_\_\_\_  
Department Name

\_\_\_\_\_  
Dates: From To

\_\_\_\_\_  
Department Name

\_\_\_\_\_  
Dates: From To

\_\_\_\_\_  
Department Name

\_\_\_\_\_  
Dates: From To

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

# STATISTICAL DATA FORM

## Test Cycle

### Southwestern Illinois Joint Fire & Police Recruitment & Testing Consortium

*The information collected on this form is for statistical purposes only, and is strictly voluntary. It will **NOT** affect an applicant's evaluation. The gathered information will assist the Consortium in improving their services.*

Please answer the following questions by selecting an answer for each question:

1. **Gender:**

- Female  
 Male

2. **Race:**

- |   |   |
|---|---|
| <input type="checkbox"/> African American | <input type="checkbox"/> Hispanic/Chicano       |
| <input type="checkbox"/> Asian            | <input type="checkbox"/> Native American Indian |
| <input type="checkbox"/> Caucasian        | <input type="checkbox"/> Other _____            |

3. How did you **FIRST** learn of this test? (**please choose only 1**)

- Notice e-mailed from Consortium  
 From a friend/colleague  
 Referred by a municipality (please name city) \_\_\_\_\_  
 Television ad  
 Magazine ad  
 Notice at School or School Online Resource  
    Please list school / site name: \_\_\_\_\_  
 Internet ad/website (please list site name) \_\_\_\_\_  
 Career day event (please list school name) \_\_\_\_\_  
 Newspaper ad (*only those choosing this response should go to question 4*)  
 Other \_\_\_\_\_

4. If you selected 'newspaper' above, in which newspaper did you **FIRST** see our advertisement?

- |   |  |
|---|--|
| <input type="checkbox"/> Belleville News-Democrat | <input type="checkbox"/> Alton Telegraph       |
| <input type="checkbox"/> Command Post             | <input type="checkbox"/> Advantage             |
| <input type="checkbox"/> East St. Louis Monitor   | <input type="checkbox"/> Intelligencer         |
| <input type="checkbox"/> Highland News Leader     | <input type="checkbox"/> Trenton Sun           |
| <input type="checkbox"/> O'Fallon Progress        | <input type="checkbox"/> Jersey County Journal |
| <input type="checkbox"/> St. Louis American       |  |
| <input type="checkbox"/> Capaha Arrow (SEMO)      |  |
| <input type="checkbox"/> Western Courier (WIU)    |  |
| <input type="checkbox"/> Daily Egyptian (SIUC)    |  |
| <input type="checkbox"/> Other _____              |  |

Today's date: \_\_\_\_\_

## **AUTHORIZATION TO RELEASE INFORMATION**

The undersigned hereby authorizes the release and full disclosure of any information and all records, concerning the undersigned to any duly authorized agent of the Southwestern Illinois Joint Fire & Police Recruitment & Testing Consortium, including the following agencies which comprise the consortium: City of Alton, Village of Caseyville, City of Collinsville, City of Edwardsville, City of Fairview Heights, Village of Glen Carbon, City of Highland, City of O'Fallon, City of Troy, City of Waterloo and Village of Shiloh hereinafter jointly and individually referred to as the "Consortium".

The undersigned authorizes the disclosure and furnishing to the Consortium copies of any and all information relating to the undersigned's employment, work record, credit history, salary, attendance, education, disciplinary history, performance evaluations, reputation, medical records, criminal history, driving history, and military service records to reviewed in accordance with all legal requirements. In addition, the undersigned agrees to consent for social media account reviews (i.e. - Facebook, Instagram, Snapchat, Google, etc.) similar to what is completed for criminal background review and Fair Credit Reporting requirements. Information of a confidential or privileged nature may be included. The information will be used to assist the Consortium with the undersigned's employment background investigation. All materials pertaining to this background investigation become the property of the Consortium and will not be returned. The undersigned hereby authorizes the Consortium, and the individual agencies which comprise the Consortium, to disclose and furnish to each other copies of any and all information obtained including but not limited to employment background investigations.

The undersigned hereby releases you and your organization from any and all liability or damages, which may result from furnishing the information requested. The undersigned further releases the Consortium and its agents from any and all liability, from liability as a result from the collection of such information and from liability as a result of sharing such information by and between the individual agencies which comprise the Consortium. The undersigned acknowledges that in the event an application is disapproved, the sources of confidential information cannot be revealed.

A photocopy of this release will be valid as an original even though the photocopy does not contain an original writing of my signature.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

*OFFICE USE:*

Witness: \_\_\_\_\_

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***Southwestern Illinois Joint Fire & Police  
Recruitment & Testing Consortium***

**PHYSICAL AGILITY TEST  
RELEASE OF ALL LIABILITIES FORM  
for Test Cycle**

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The undersigned, recognizing that the Physical Agility Test is an integral part of the examination for patrolman, hereby releases, remises and discharges the Southwestern Illinois Joint Fire & Police Recruitment & Testing Consortium, all participating Municipalities, Southwestern Illinois College, Western Illinois University, their officers, servants, agents and employees of and from any and all claims, demands and liabilities to me and on account of any and all injuries, losses and damages to my person shall have been caused, or may at any time arise as the result of certain police examination conducted by the Southwestern Illinois Fire & Police Recruitment & Testing Consortium. The intention hereof being to completely, absolutely, and finally release said Southwestern Illinois Joint Fire & Police Recruitment & Testing Consortium, Southwestern Illinois College, Western Illinois University, their officers, servants, agents and employees of and from any and all liability arising wholly or partially from the cause aforesaid.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

***OFFICE USE ONLY***

Witness: \_\_\_\_\_

**SOUTHWESTERN ILLINOIS POLICE RECRUITMENT CONSORTIUM**  
**APPLICATION FOR EMPLOYMENT – EQUAL OPPORTUNITY EMPLOYERS**

**ALL**

- COLLINSVILLE    EDWARDSVILLE    FAIRVIEW HGHTS    HIGHLAND    O'FALLON  
 WATERLOO    TROY    ALTON    GLEN CARBON    CASEYVILLE    SHILOH

**A. APPLICANT IDENTIFICATION** – Information provided in this section is used for identification purposes only.

1. Name: \_\_\_\_\_  
*Last* *First* *Middle*
2. List any other names, aliases you have used or been known by (include maiden name, if applicable).  
 \_\_\_\_\_
3. Address: \_\_\_\_\_  
*Street* *City*  
*State* *Zip Code*
4. Telephone Number(s): (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_
5. Social Security Number: \_\_\_\_\_
6. Are you a U.S. Citizen? \_\_\_\_\_ Yes \_\_\_\_\_ No    *If yes:* \_\_\_\_\_ Native Born \_\_\_\_\_ Naturalized  
*If "naturalized", give particulars* \_\_\_\_\_
7. Are you authorized to work in the United States on an unrestricted basis? \_\_\_\_\_ Yes \_\_\_\_\_ No
8. Have you ever been convicted of a felony? \_\_\_\_\_ Yes \_\_\_\_\_ No

**B. EDUCATIONAL HISTORY**

- | <u>High School</u> | <u>City &amp; State</u> | <u>Graduate?</u>   |
|--------------------|-------------------------|--|
| _____              | _____                   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____              | _____                   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____              | _____                   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
2. College/University Attended \_\_\_\_\_  
 City & State \_\_\_\_\_ Exp. Grad. Date \_\_\_\_\_  
 Major/Minor \_\_\_\_\_ Degree Rec'd, if any \_\_\_\_\_
  3. College/University Attended \_\_\_\_\_  
 City & State \_\_\_\_\_ Exp. Grad. Date \_\_\_\_\_  
 Major/Minor \_\_\_\_\_ Degree Rec'd, if any \_\_\_\_\_

4. College/University Attended \_\_\_\_\_  
 City & State \_\_\_\_\_ Exp. Grad. Date \_\_\_\_\_  
 Major/Minor \_\_\_\_\_ Degree Rec'd, if any \_\_\_\_\_

5. List other schools attended (Trade, Vocational, Business, etc). Give name and dates attended, course of study, certificate and any other pertinent information.  
 \_\_\_\_\_  
 \_\_\_\_\_

6. Were you ever expelled or suspended from any school? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, explain \_\_\_\_\_

7. List other formal education beyond high school you may have, including special training courses:  
 \_\_\_\_\_  
 \_\_\_\_\_

8. List any special licenses or certificates you hold or have held:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**C. EMPLOYMENT HISTORY**

1. Have you ever taken a civil service exam? \_\_\_\_\_ Yes \_\_\_\_\_ No *If yes, please specify below.*

<u>Agency</u>	<u>Date</u>	<u>Position on List</u>	<u>Status</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Are you now on any eligibility list? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, explain \_\_\_\_\_

3. Were you ever placed on a civil service list and not hired? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, explain \_\_\_\_\_

4. Were you ever rejected for any civil service position? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, explain \_\_\_\_\_

5. Have you ever submitted an application for appointment to another police department? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, provide date \_\_\_\_\_

6. Have you ever been a law enforcement officer or held a similar position? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, Position \_\_\_\_\_ Dates \_\_\_\_\_ Location \_\_\_\_\_  
 Position \_\_\_\_\_ Dates \_\_\_\_\_ Location \_\_\_\_\_

7. Were you ever discharged or forced to resign because of misconduct or unsatisfactory service or while under investigation? \_\_\_\_ Yes \_\_\_\_ No

If yes, explain \_\_\_\_\_

8. Are you now, or have you ever been, engaged in any business as an owner, partner, or corporate member? \_\_\_\_ Yes \_\_\_\_ No

If yes, explain \_\_\_\_\_

Beginning with your present or most recent job, list all employment since the age of 18, including part-time, temporary or seasonal employment. Include all periods of unemployment. Attach extra pages if necessary.

1. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Supervisor \_\_\_\_\_ Name of a co-worker \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

2. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Supervisor \_\_\_\_\_ Name of a co-worker \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

3. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Supervisor \_\_\_\_\_ Name of a co-worker \_\_\_\_\_

Reason for Leaving \_\_\_\_\_



4. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Job Title \_\_\_\_\_  
 Duties \_\_\_\_\_  
 \_\_\_\_\_  
 Supervisor \_\_\_\_\_ Name of a co-worker \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_

5. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Job Title \_\_\_\_\_  
 Duties \_\_\_\_\_  
 \_\_\_\_\_  
 Supervisor \_\_\_\_\_ Name of a co-worker \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_

INDICATE BY NUMBER ANY OF THE ABOVE EMPLOYERS WHOM YOU DO NOT WISH FOR US TO CONTACT.

\_\_\_\_\_

**D. SPECIAL QUALIFICATIONS & SKILLS**

1. List any special licenses you hold (such as Paramedic, Pilot, Radio Operator, Scuba, etc.). Show licensing authority, original dates of issue, and date of expiration.

\_\_\_\_\_  
 \_\_\_\_\_

2. List any special specialized machinery or equipment that you can operate.

\_\_\_\_\_  
 \_\_\_\_\_

3. If you are fluent in a foreign language, indicate in each area your level of fluency (Excellent, Good, Fair)

<u>Language</u>	<u>Reading</u>	<u>Speaking</u>	<u>Understanding</u>	<u>Writing</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

4. Please use the space below to state why you want to work as a police officer and why you wish to work in Southwestern Illinois. You should also state the special talents that you feel you would bring to the position. (If you need more space, use a separate sheet of paper.)

**E. REFERENCES – List five persons who you know well enough to provide current information about you. Do not list relatives or former employers**

1. Name \_\_\_\_\_ Residence Phone \_\_\_\_\_  
Home Address \_\_\_\_\_ City/State \_\_\_\_\_ Years Known \_\_\_\_\_  
Business Phone \_\_\_\_\_

Business Address \_\_\_\_\_ City/State \_\_\_\_\_

2. Name \_\_\_\_\_ Residence Phone \_\_\_\_\_  
Home Address \_\_\_\_\_ City/State \_\_\_\_\_ Years Known \_\_\_\_\_  
Business Phone \_\_\_\_\_

Business Address \_\_\_\_\_ City/State \_\_\_\_\_

3. Name \_\_\_\_\_ Residence Phone \_\_\_\_\_  
Home Address \_\_\_\_\_ City/State \_\_\_\_\_ Years Known \_\_\_\_\_  
Business Phone \_\_\_\_\_

Business Address \_\_\_\_\_ City/State \_\_\_\_\_

4. Name \_\_\_\_\_ Residence Phone \_\_\_\_\_  
Home Address \_\_\_\_\_ City/State \_\_\_\_\_ Years Known \_\_\_\_\_  
Business Phone \_\_\_\_\_

Business Address \_\_\_\_\_ City/State \_\_\_\_\_

5. Name \_\_\_\_\_ Residence Phone \_\_\_\_\_  
 Home Address \_\_\_\_\_ City/State \_\_\_\_\_ Years Known \_\_\_\_\_  
 Business Phone \_\_\_\_\_  
 Business Address \_\_\_\_\_ City/State \_\_\_\_\_

**F. MEMBERSHIP IN ORGANIZATIONS (Past and/or Present)**

<u>Name &amp; Address</u>	<u>Type (Social, Fraternal, Professional etc.. Do not include any religious or ethnic affiliations.)</u>	<u>From</u>	<u>To</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**G. PERSONAL DECLARATIONS**

1. Have you ever made an application for employment with this or any other municipality?  Yes  No

If yes, give municipality, date(s), and status of application.

\_\_\_\_\_  
 \_\_\_\_\_

2. Have you ever used marijuana, cocaine, or any other illegal substances?  Yes  No

3. Have you ever abused prescription drugs?  Yes  No

4. Have you ever abused alcohol?  Yes  No

5. Are there any incidents in your life or details not mentioned herein which may influence this department's evaluation of your suitability for employment as a police officer or firefighter?  Yes  No

If yes, explain

\_\_\_\_\_  
 \_\_\_\_\_

**H. BACKGROUND INFORMATION – Information provided in the following sections will only be used for background checks if you are offered a position and will not affect your status as an applicant in any manner.**

1. Name: \_\_\_\_\_

2. Driver's license number: \_\_\_\_\_

3. Height: \_\_\_\_\_

4. Weight: \_\_\_\_\_

5. Color of eyes: \_\_\_\_\_

6. Color of hair: \_\_\_\_\_

7. Sex: \_\_\_\_\_

8. Race(s): \_\_\_\_\_

9. Date of birth: \_\_\_\_\_

10. Place of birth: \_\_\_\_\_  
City County State

11. List every member of your immediate family who is still living; include father, mother, sisters & brothers.

<u>Name</u>	<u>Relationship</u>	<u>Address</u>	<u>Occupation</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

12. Are you: \_\_\_ Single \_\_\_ Married \_\_\_ Separated \_\_\_ Widowed \_\_\_ Divorced \_\_\_ Civil Union

13. Are you living with your spouse/civil partner? \_\_\_ Yes \_\_\_ No If no, explain \_\_\_\_\_  
\_\_\_\_\_

14. Give the following information regarding your marriage/marriages/civil unions:

<u>Date</u>	<u>Where</u>	<u>Spouse Maiden name (if applicable)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

15. If a marriage to which you were a party was ever dissolved, fill out the following:

Separated _____ Explain	_____
Divorced _____ Explain	_____
Anulled _____ Explain	_____

To Whom was Action Granted?  
To Whom was Action Granted?  
To Whom was Action Granted?

16. Are you paying alimony? \_\_\_ Yes \_\_\_ No If yes, explain \_\_\_\_\_

17. If divorced, list the name(s) or your previous spouse(s) & where they reside:  
\_\_\_\_\_  
\_\_\_\_\_

18. List below, every child born to you, adopted by you & stepchildren:

<u>Name</u>	<u>Date of Birth</u>	<u>Place of Birth</u>	<u>Where does child live &amp; with whom?</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

19. Are you now supporting all children born to you, adopted by you & stepchildren?  Yes  No

If no, please explain fully \_\_\_\_\_

20. Have you ever been named as the natural father in a paternity proceeding?  Yes  No

If yes, please explain fully \_\_\_\_\_

21. Are you paying child support?  Yes  No

If yes, explain \_\_\_\_\_

**I. FINANCIAL HISTORY**

**SOURCE OF INCOME**

1. What is your present salary or wages? \_\_\_\_\_

2. Do you have income from any other source other than your principal occupation?  Yes  No

If yes, how much? \_\_\_\_\_ How often? \_\_\_\_\_

The source? \_\_\_\_\_

3. Do you own any real estate?  Yes  No Value \$ \_\_\_\_\_

Location: \_\_\_\_\_

4. Do you own any bonds, government or other?  Yes  No Value \$ \_\_\_\_\_

5. Do you own any corporate stock?  Yes  No Value \$ \_\_\_\_\_

6. Do you have a bank account?  Yes  No

*Savings:* Average Balance: \$ \_\_\_\_\_

Name & Address of Bank \_\_\_\_\_

*Checking:* Average Balance: \$ \_\_\_\_\_

Name & Address of Bank \_\_\_\_\_



13. Were you ever disciplined while in the Military Service? (include court martial, captain's masts, company punishments in active service, reserve unit or National Guard)  Yes  No

<u>Charge</u>	<u>Agency</u>	<u>Date</u>	<u>Disposition</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

14. If you had no military service, explain \_\_\_\_\_

**L. RESIDENCE – List ALL addresses where you have lived during the past ten years beginning with present address. List date by month and year. Attach extra page if necessary.**

<u>From</u>	<u>To</u>	<u>Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

With whom do you live at your current address? List full names & relationships

\_\_\_\_\_

**M. CRIMINAL HISTORY**

1. Have you ever been placed on probation?  Yes  No

If yes, explain \_\_\_\_\_

2. Have you ever been required to pay a fine in excess of \$25.00?  Yes  No

If yes, explain \_\_\_\_\_

3. Have you ever been reported as a missing person or runaway?  Yes  No

If yes, explain \_\_\_\_\_

4. Have you ever been the victim of a crime?  Yes  No

5. Have you ever been fingerprinted by a police agency other than for an arrest?  Yes  No

If yes, complete the following:

<u>Agency</u>	<u>Date</u>	<u>Purpose</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Are there any warrants, traffic or otherwise, now pending against you?  Yes  No

If yes, explain \_\_\_\_\_

7. Have you ever been arrested, detained by police or summoned into court for anything other than a traffic violation?  
 Yes  No If yes, complete the following:

<u>Offense Charged</u>	<u>Police Agency, City &amp; State</u>	<u>Date</u>	<u>Disposition of Case</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

8. Have you ever been convicted of a felony or misdemeanor?  Yes  No

**N. TRAFFIC RECORD**

1. Can you operate an automobile?  Yes  No

2. Do you possess a valid operator's or chauffer's license from Illinois?  Yes  No  
If yes, date of expiration \_\_\_\_\_

3. Driver's License Number: \_\_\_\_\_ State \_\_\_\_\_

4. Have you ever been refused an operator's or chauffer's license in any other state?  Yes  No

If yes, please explain \_\_\_\_\_

5. Have you ever had an operator's or chauffer's license in any other state?  Yes  No

6. Has your driver's license ever been suspended or revoked?  Yes  No  
If yes, give dates, location & reasons below:  
\_\_\_\_\_

7. Has your license ever been placed on probation?  Yes  No

If yes, explain \_\_\_\_\_



8. List to the best of your memory all traffic citations you have received, excluding parking tickets?

<u>Month &amp; Year</u>	<u>Charge</u>	<u>City &amp; State</u>	<u>Disposition</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

9. Describe in a brief narrative any traffic accidents in which you have been involved, giving approximate dates and locations:

**I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the statements and answers to questions I have provided in this application. I am fully aware that any such willful misrepresentation, omissions, or falsifications may be grounds for immediate rejection or termination of employment.**

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*