

Police Officer / Full Time

Salary Range: \$19.14 - \$33.47

Opening Date: January 11, 2018

Closing Date: January 26, 2018

Interested candidates must complete and submit a Riverdale City application, a current resume and a copy of your POST certification to Human Resources. You must be POST certified to apply. This job posting will be open until all vacant positions are filled. Once a qualifying application is received, arrangements will be made to begin the testing process. There will not be a group testing date. Starting salary will be based on years of service and qualifications on a 1 for 1 basis. For applications please visit our website at www.riverdalecity.com, or in person at the Riverdale Civic Center 4600 S. Weber River Dr. Riverdale, UT 84405. Return completed applications to the Riverdale Civic Center.

GENERAL PURPOSE

Performs a variety of **working level, technical** law enforcement duties related to enforcing the laws, maintaining the peace, and protecting the citizens of Riverdale. Performs in investigations, patrol or traffic units as may be assigned.

SUPERVISION RECEIVED

Works under the general supervision of the Lieutenant or Sergeant.

SUPERVISION EXERCISED

May provide close to general supervision to less experienced officers while in training or on a case-by-case basis. Functions as the Officer in Charge (OIC) in the absence of a higher ranking officer or by assignment.

ESSENTIAL FUNCTIONS

Performs a variety of advanced level law enforcement duties.

Responds to life and property threatening calls such as robbery, burglary, family disturbance, theft, vandalism, arson, riot, etc.

Conducts investigation and follow-up investigation on scene and post incident; makes arrests of offenders.

Writes crime case reports, arrest reports, complaint reports, etc.

Appears and testifies in court.

Routine patrol of residential neighborhoods and businesses.

Operates the breathalyzer and radar equipment.

Conducts security checks of business and residential establishments.

Performs traffic related functions; i.e. enforcement and investigation of accidents.

Functions may be performed in uniform or investigation divisions. Other functions may be assigned by letter of appointment.

MINIMUM QUALIFICATIONS

- 1. Education and Experience:
 - A. Graduation from high school or equivalent GED.
 - B. Successful completion of Utah Peace Officers Standards and Training (POST) Academy.
 - C. Or an equivalent combination of education and experience.
- 2. Knowledge, Skills, and Abilities:

Some knowledge of modern law enforcement principles, procedures, techniques and equipment; applicable Federal, State, County and City laws and ordinances and departmental rules and regulations; hazardous waste classifications and emergency procedures related to control, containment, and confinement, investigative procedures and practices; legal liabilities associated with arrest and law enforcement; court room procedures and laws of evidence.

Skill in the use of firearms, the operation of police vehicles and other specialized equipment including intoxilyzers, radar (laser) units, restraint devices and less than lethal devices.

3. Special Qualifications:

Must be clear of prior felony criminal convictions; misdemeanor convictions will be dealt with case-by-case.

Must possess a valid Driver's License.

Must maintain firearm proficiency.

Must maintain POST certification.

Must meet department specified physical fitness requirements.

4. Work Environment:

Many functions of the work pose high degrees of hazard uncertainty. Work is subject to all seasonal and weather extremes. Physical readiness essential to effective job performance. Various levels of mental application required. Continuous use of motor skills. Risk of exposure to biohazards and blood borne pathogens. Work requires twenty four hours, seven day a week coverage, including holidays.

<u>Veteran's Preference Points:</u> Applicants **MUST** submit a copy of their DD-214 with their application and **before** the closing date in order to receive veteran's points. This is for initial appointments only.

Riverdale City is an Equal Opportunity Employer. All applicants selected for employment with the city shall be required to take a drug and alcohol test with negative results and a background check as a pre-condition of employment.



Riverdale Police Department Employment Packet

Applicant's Name
Position
Date

Return to:
Riverdale Civic Center
4600 South Weber River Drive
Riverdale, Utah 84405
Phone (801) 394-6616



Information for Riverdale Police Officer Applicants

APPLICATIONS FOR EMPLOYMENT *MUST* **INCLUDE:**

Fill out and return

- a. Cover Sheet
- b. Employment Application
- c. Residential History
- d. Education Experience
- e. Law Enforcement experience, if applicable
- f. Personal Conduct
- g. Motor Vehicle Operation
- h. Controlled Substance
- i. Military Service, if applicable
- j. Employment History
- k. References (All Sheets required)
- 1. Release of Liability for confidential Drug/Alcohol tests
- m. Personal injury release form

A photocopy of the following items:

- a. POST Basic Training Record and POST transcript scores, if applicable.
- b. Military discharge documents (DD214 Long Form). If you have been in the military, you will need a DD214 for each period of active duty which has been completed. if applicable.

FAILURE TO INCLUDE <u>ANY OF</u> THE ABOVE LISTED DOCUMENTS WITH THE APPLICATION PACKET MAY DISQUALIFY YOU FOR FURTHER CONSIDERATION. FALSE INFORMATION OR OMISSIONS ARE CAUSE FOR IMMEDIATE DISQUALIFICATION.

Riverdale City Corporation Employment Application 4600 South Weber River Drive

4600 South Weber River Drive Riverdale, Utah 84405 (801) 394-5541 * FAX (801) 399-5784 www.riverdalecity.com

Name			
First	Middle Initial	Las	st
AddressStreet		 <u>.</u> 	
Street	City	State	Zip
Phone No	Message Phone	 	
Date of application	Position App	olying For:	
Type of Employment Desired:	Full-Time Part-Ti	ime	
Temp/Seasonal			
For jobs requiring driving only: [YesNo	Do you possess a valid Utah	n driver's license	?
Are you legally eligible for emplo	oyment in the U.S.? Yes _	No	
Are you 21 years of age or olde	r? Yes No _		
Date you can start:	-		
Are you employed now?		· · · · · · · · · · · · · · · · · · ·	
May we inquire of your present	employer?		
Referred by:			
Note: The Human Resources departure applicant during the application, explease call (801) 436-1209.			
After reaching the age of 18 yea any Civil or Criminal Law other t No			
If yes, please explain:			
(Convictions do not bar applicant fr	om employment, but will be ev	valuated accordinç	g to the time,
circumstance, and severity.)			
Are you related to anyone curre No If yes, name of	ntly working for Riverdale C employed relative:	city? Yes	
Relationship to you:			

RESIDENTIAL HISTORY

Please list every address that you have lived at over the last twenty years or until you were age 16 years old, whichever is more recent. List the addresses in chronological order from your current address backwards to your earliest address. List ALL addresses including temporary addresses such as those related to summer employment, attending college and any other that would apply. Please include the names of friends, family and others who shared the address with you.

From	to	(month/year)	
		P	O Box
		State	ZIP
		_ Relationship:	
		Relationship:	
		_ Relationship:	
		Landlord's Pho	ne Number
From	to	(month/year)	
		P	O Box
		State	ZIP
		_ Relationship:	
		_ Relationship:	
		_ Relationship:	
		Landlord's Pho	ne Number
T.	,		
From	to	(month/year)	
		P	O Box
		State	ZIP
		D 1 (' 1 '	
	From	From to	From to

ame:Relationship:				
Name:	: Relationship:			
	Landlord's Phone	Landlord's Phone Number		
	to (month/year)			
Street Address	PO 1	Box		
City	State	ZIP		
Roommates: Name:	Relationship:			
Name:	Relationship:			
Name:	Relationship:			
Landlord or Property Owner	Landlord's Phone	Landlord's Phone Number		
From _	to(month/year)			
Street Address	PO l	Box		
City	State	ZIP		
Roommates: Name:	Relationship:			
Name:	Relationship:			
Name:	Relationship:			
Landlord or Property Owner	Landlard's Phone	Number		

EDUCATION

Starting with high school list names and addresses of all schools you have attended or are now attending. This includes all schools of higher education such as colleges, universities, trade or technical colleges and public safety academies.

Name of School:	to
Address:	Phone Number
	Did you Graduate? () Yes () No
Type of Degree received:	Major:
Name of School:	to
Address:	Phone Number
	Did you Graduate? () Yes () No
Type of Degree received:	Major:
Name of School:	to
Address:	Phone Number
	Did you Graduate? () Yes () No
Type of Degree received:	Major:
Name of School:	to
Address:	Phone Number
	Did you Graduate? () Yes () No
Type of Degree received:	Major:

LAW ENFORCEMENT EXPERIENCE

If you answer yes to any of the questions below, please explain your answer completely in the white space below the question, or on the back side of this paper. Refer to the question by number in your response.

1.	Are you currently or have you ever been POST certified? Date? Your current status? () Yes () No
2.	Have you ever worked for any law enforcement agency in any capacity? What agency? What were your responsibilities? () Yes () No
3.	Have you ever applied with other law enforcement agencies for employment as a peace officer or non-peace officer? Please list those agencies on the other side of this page, along with approximate dates of application. () Yes () No
4.	Has any other law enforcement agency conducted a background investigation concerning you? If Yes, what agency? () Yes () No
5.	Have you ever been passed over or rejected for employment as a peace officer? If Yes, by what Agency? () Yes () No
6.	Have you previously applied for employment in any capacity with the Riverdale City Police Department, or with Riverdale City? () Yes () No

PERSONAL CONDUCT

If you answer yes to any of the questions below, please explain your answer completely in the white space below the question or on the back side of this paper. Reference the question by number in your response if necessary.

1.	Have you ever committed an offense where you could have been/or were arrested? If yes, give date when office was committed and what the offense was. () Yes () No
2.	Have you ever been arrested or required to appear before a Court of Law? If yes, how many times arrested, when, what for, and what was the disposition? () Yes () No
3.	Have you ever been detained for investigation, held on suspicion, questioned, fingerprinted or arrested by any law enforcement agency? () Yes () No
4.	Have you ever petitioned any court to seal or expunge a criminal record? () Yes () No
5.	Have you ever been involved in or found guilty of any crime of unlawful sexual conduct? () Yes () No
6.	Have you ever been involved in or found guilty of employing physical violence that resulted in the injury or harm of another? () Yes () No $^{\circ}$
7.	Have you ever been in the subject of an investigation dealing with the theft of something not belonging to you? () Yes () No
8.	Have you ever taken any property that didn't belong to you from a place where you worked without getting permission first? If yes, what was taken, what was the value, date of occurrence? ()Yes() No
9.	Have you ever purchased any item that you knew or suspected was stolen? If yes, list item, quantity, value, date of purchase. () Yes () No
10.	Have you within the past five (5) years done anything at all that you could have been found guilty for doing? () Yes () No
11.	Have you ever had a criminal warrant or a traffic warrant issued for your arrest? If yes, give date warrant was issued and date cleared. () Yes () No
12.	Have you ever intentionally perjured yourself in a Court of Law? () Yes () No
13.	Do you reside or associate with anyone (family or friends) who is or has been involved in criminal behavior equivalent to a class A misdemeanor or a felony? () Yes () No
14.	Have you ever been reported as a missing person or runaway? If yes, list jurisdiction, dates and outcome. () Yes () No
15.	Have you ever been placed on probation or parole? If yes, when, where, why, dates. () Yes () No

16.	Have you been delinquent or has any legal action ever been taken against you for failing to meet an obligation for child support or alimony? () Yes () No $^{\circ}$
17.	Do you owe money for parking tickets? If yes, indicate the amount owed. () Yes () No
18.	Have you ever been asked to submit to a polygraph examination? If yes, list dates, examiner's name, purpose for examination, and name of the agency or company who requested it. () Yes () No
19.	Have you ever failed a polygraph examination? If yes, why did you fail? () Yes () No
20.	Have you ever applied for a permit to carry a concealed weapon? If yes, list date, name of law enforcement agency. () Yes () No
21.	Have you had your permit to carry a concealed weapon approved? If no, date, why it was not granted. If yes, list permit number. () Yes () No
22.	Have you ever falsified an insurance claim? () Yes () No
23.	Have you ever falsified an income tax return? () Yes () No
24.	Have you ever collected unemployment or welfare benefits when you were not entitled to do so? () Yes () No $$
25.	Have you ever fraudulently misused a credit card? () Yes () No
26.	Have you ever forged a check? () Yes () No
27.	Do you or your spouse have an interest in any business enterprise or institution that is regulated by or receives financial benefits from any agency of the State of Utah? If yes, explain. () Yes () No
28.	Has there ever been any situation in which you have been involved which may be incompatible with the discharge of the duties of a certified officer? This would include any activity which may impair your independence of judgment or action in the performance of the duties of a peace officer or special function officer. If yes, explain. () Yes () No

MOTOR VEHICLE OPERATION

Beginning with your current driver license, list every motor vehicle operator's license you have possessed. If you do not have the driver license number indicate the name you used on the license.

State:	Name and DL number used:
State:	Name and DL number used:
State:	Name and DL number used:
questio	answer to any of the questions BELOW is yes, explain why in detail in the space under the on or on the back side of this sheet. Refer to the question number in your response if writing on ck side of this sheet.
1.	Have you ever been refused an operator's license by any state? If yes, give the state, date, and the circumstances. ()Yes ()No
2.	Has your driver's license ever been suspended, revoked, placed on probation, or have you ever received a warning notice from the state who issued your license? If yes, give the name of state, date, circumstance. ()Yes ()No
3.	Have you ever been involved in a traffic accident as a driver that was not reported which really should have been reported? ()Yes ()No
4.	Have you ever been issued a traffic citation? If yes, list date, type of violation, disposition. ()Yes ()No
5.	Have you ever operated a motor vehicle while you were under the influence of alcohol? ()Yes ()No
6.	Have you ever had an alcohol related accident? If yes, give date, place of accident and circumstances. ()Yes ()No
7.	Have you ever been found guilty for driving while under the influence of alcohol or drugs? ()Yes ()No
8.	Have you been convicted or pled guilty to driving while under the influence of alcohol or drugs, or to lesser charges following a D.U.I. arrest? If yes, list the date of the arrest, the law

enforcement agency involved, and the final disposition. ()Yes ()No

CONTROLLED SUBSTANCES

This section deals with controlled substances. Answer each question truthfully If the answer to any of the questions BELOW is yes, explain in detail in the space below the question or on the back side of this sheet. Indicate what types of drugs, narcotics, or other controlled substances were involved, dates of occurrences, and frequency. Refer to the question number in your response if writing on the back side of this sheet.

1.	Have you ever possessed any drugs, narcotics or other controlled substances other than those prescribed by a doctor or other licensed medical practitioner? ()Yes ()No
2.	Have you ever sold or otherwise distributed any drugs, narcotics or other controlled substances ()Yes ()No
3.	Have you ever been involved in the cultivation of marijuana or the manufacturing of any drugs narcotics, or other controlled substances? ()Yes ()No
4.	Have you ever purchased any drugs, narcotics or other controlled substances from other than a doctor, or other licensed medical practioner, or pharmacist? ()Yes ()No
5.	Have you ever knowingly stored illegal drugs, narcotics or other controlled substance for yourself or any other person? ()Yes ()No
6.	Have you ever transported illegal drugs, narcotics, or other controlled substances for yourself or any other person? ()Yes ()No
7.	Have you ever been involved with the use, possession, sale, distribution or manufacture of any substance which was purported to be an unlawful drug, narcotic or other controlled substance? ()Yes ()No

MILITARY SERVICE

Applicant must complete this section if he/she has served with the United States Armed Forces. If applicant has not served with the United States Armed Forces, answer "no" on question "1" then skip to the next section.

	Jame Ra Address Ph				
	AddressPh				
	List your current or past commanding officers or enough to provide additional information. Rame Rai				
10.	0. Did you ever commit a criminal act while off du	ty while in the armed services? ()Yes ()No			
9.	0. While in the service, were you ever reduced in grade or rank? ()Yes ()No				
8.	. Have you ever been given the option to resign in service? ()Yes ()No	lieu of forced separation from any military			
7.	. Have you ever been separated from military service for disciplinary reason? ()Yes ()No				
	. Were you ever court-martialed, tried or charged, deck court, captain's mast, company punishment while a member of the armed forces? If yes, list circumstances. ()Yes ()No	or were you the subject of a summary court, t, or Article 15, or any other disciplinary action			
5	() Clideshable () Early separation () Other List your highest rank held: Lis	t your rank at time of discharge:			
4.	. Have you changed your military discharge status at any time? If yes, what was your discharge status prior to having it changed? Explain why the change of your status was necessary here or on the back side of this sheet. ()Yes ()No () General () Less than Honorable () Undesirable				
3.	. List date, location and status (i.e., honorable, gen	neral, etc.) of discharge:			
2.	Are you currently participating in the United States armed forces, National Guard, or military reserve program? ()Yes ()No				
1.	Have you ever served with the United States armed forces, Nation Guard, or military reserve? () Yes () No				

EMPLOYMENT HISTORY

Instructions:

Begin with your present or last employment and list all full-time employment you have had for the last twenty years or until age sixteen, whichever is more recent. List your employment in reverse order from your present or last employment. If you are unable to remember some information, please show that on the appropriate blank. Any omissions will make it more difficult to process your application package and may result in you being passed over for employment. You may attach another page to this form if you run out of room to list your complete employment history.

Name of Employer:		
Address:		
Phone #:From (month/year)	Fax #:	
From (month/year)	Full time	Part time
Starting: \$ Ending: \$		Average hours per week
Last position or title held:		
Description of responsibilities:		
Reason for leaving:		
Name of your last supervisor:		
Name of Employer:		
Address:		
Phone #:From (month/year)	Fax #:	
From (month/year)	Full time	Part time
Starting: \$ Ending: \$		Average hours per week
Last position or title held:		
Description of responsibilities:		
Reason for leaving:		
Name of your last supervisor:		
Name of Employer:		
Address:		
Phone #:From (month/year)	Fax #:	Dout time o
Starting \$ Ending \$	run ume	A vama as house man vasals
Starting: \$ Ending: \$		
Last position or title held: Description of responsibilities:		
Reason for leaving:		
Name of your last supervisor:		
Name of Employers		
Name of Employer:		

Address:			_
Phone #:	Fax :	#:	-
From (month/year)	Full time	Part time	
Starting: \$ Ending: \$		Average hours per week	
Last position or title held:			
Description of responsibilities:			
Reason for leaving:			
Name of your last supervisor:			
Name of Employer:			_
Address:	Eov.		-
		#:	-
From (month/year)	Full time	Part time	_
Starting: \$ Ending: \$	i dii tiille	Average hours per week	
Last position or title held:		0 Pro Por	
Description of responsibilities:			
1 1			
Reason for leaving:			
Name of your last supervisor:			
Phone #:	Fax	#:	-
		- -	-
From (month/year)	Full time	Part time	
Starting: \$ Ending: \$		Average hours per week	
Last position or title held:			
Description of responsibilities:			
Reason for leaving:			
Name of your last supervisor:			
Name of Employer:			_
Address:			
Phone #:	Fax =	#:	_
From (month/year)	Full time	Part time	_
Starting: \$ Fnding: \$	i un unic	Part time Average hours per week	-
Last position or title held:		Tiverage nours per week	_
Description of responsibilities:			_
Reason for leaving:			
Name of your last supervisor:			

ε ε =====			
	REFERE	ENCES	
Name	Years Kr	nown	
Address	City	State	ZIP
Home Phone #	Work Phone #	Work Phone #	
Relationship to Applicant			
Method of Discovery: provided by ap provided by an	plicant other reference (name: _		
1)
	rrent or former employe		
provided by cu	rrent or former employe	r) name:)
provided by cu		r) name:)
provided by cu Other (r) name:)

Regarding:			
	REFERI	ENCES	
Name	Years K	nown	
Address	City	State	ZIP
Home Phone #	Work Phone	#	
Relationship to Applicant			
		rsonBy Mail	
provided by ap		·)
provided by ap	pplicant		
provided by an	oplicant nother reference (name:	er) name:)
provided by ap provided by ap provided by cu	pplicant nother reference (name: urrent or former employe	er) name:)
provided by approvided by an provided by an provided by cu	pplicant nother reference (name: urrent or former employe	er) name:)

REFERENCES

Name			_ Years	Known		
Address			City		State	ZIP
Home Phone	:#		Work Phone	e#		
Relationship	to Applican	t				
			e Below this Liephone In I			·
Method of D	•	by applicant				
	provided l	by another re	eference (name	e:)
	provided l	by current or	former emplo	yer) name:)
_	Other ()
Notes:						

REFERENCES

Name		Years I	Known	
Address		City	State	ZIP
Home Phone	e#	Work Phone	e#	
Relationship	to Applicant			
	Do Not V Contact:			
Method of D	Discovery: provided by appli	cant		
	provided by anoth	ner reference (name	:)
	provided by curre	nt or former employ	yer) name:)
	Other ()
Notes:				

Drug Screen Release

I certify	that the information contained in this application is correct to the
best of my knowledge, and I u	understand that falsification of this information is grounds for refusal to
hire or, if hired, dismissal.	_
• •	or organizations referenced in this application to give you any and all
.	evious employment, education, or any other information they might have,
	ard to any of the subjects covered by this application and release all such
	ny damage that may result from furnishing such information to you. I
• •	receive such information. In consideration for my employment and my
	ent by Riverdale City, I agree to conform to the rules and regulations of
•	edge that these rules and regulations may be changed, interpreted, verdale City at any time, at the city's sole option and without any prior
notice to me.	retaile City at any time, at the city's sole option and without any prior
notice to me.	
Potential employees may be re	equested to provide a specimen for drug testing. I understand that by
2 • • • •	giving Riverdale City authorization to test. All positive tests will be
reviewed by a medical review	officer. Test results are confidential. Riverdale City will pay fees for all
required drug testing.	
<u> </u>	advised that this application will remain active only for the time period
in which the position I applied	for remains open.
I authorize investigation of a	Il statements contained in this application and an investigation of my
	all criminal history records and driver's license history. I understand that
	n may or may not bar me from employment with Riverdale City.
une manage et une m. Conguere	and or may not our mo from emproyment want in ordano city.
Signature	
Data	
Date	

Riverdale City does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services

OFFICER MERCAL POLICE

RIVERDALE CITY

PERSONAL INJURY RELEASE FORM

Release executed on January 11, 2018 by		herein referred to as
releasor.	PRINTED NAME]	
In consideration of being permitted to participate Officer; and more specifically in the physical a Riverdale City, releasor, on releasor's behalf, release hereby releases, waives and discharges Riverdale Cithe releasor, releasor's spouse, legal representative and any claim or damages resulting from said prowhether caused by the negligence of releasees or Police Officer selection process.	agility/stress portion of the sor's spouse, legal representa City, its officers, and employ s, heirs and assigns, for any ocess, on account of injury of	process conducted by atives, heirs, and assigns wees from all liability to and all loss or damage, or death to the releasor,
Releasor is cognizant of the advice that one should exercise program. Knowing that, releasor has maphysical agility/stress test with or without a physical effective regardless.	ade an informed determinati	on to participate in the
Releasor hereby assumes full responsibility for the to the negligence of releasees or otherwise while parenthods used for the Police Officer selection process.	rticipating in the physical ag	1 1 0
Releasor expressly agrees that this release and waiv as permitted by the laws of the State of Utah, and t that the balance shall, notwithstanding, continue in	hat if any portion thereof is	
In witness whereof, releasor has executed this releasuritten.	ase at Riverdale City on the	day and year first above
	Signature	_
	Date	