



City of Milwaukee

EMPLOYMENT APPLICATION FOR POLICE AIDE

Department of Employee Relations
City Hall, Room 706
200 East Wells Street
Milwaukee WI 53202-3554
414-286-3751
TTD 414-286-2960
www.milwaukee.gov/jobs

INSTRUCTIONS TO APPLICANT. Please:

- 1. Print answers in black ink.
2. Answer all questions. Credit may not be given for incomplete information.
3. Date and sign at the bottom of this page.
4. Print your Last Name in the left margin of this page.
5. Keep a copy of completed application materials for your files.

Main application form containing fields for personal information, social security number, and residency details.

LAST NAME

EXAM # 10-125

Last Name First Middle Initial
Address Apt. #
City State Zip Code
Day phone: ( ) -
Evening phone: ( ) -
Cell phone: ( ) -
Email Address:

Social Security Number - -
(The provision of your Social Security number is not mandatory. It will be used for applicant tracking purposes.)

Do you currently live in the City of Milwaukee?
Yes No

If yes, when did you become a resident?
(month/year)

NOTE: City employees must live in the City. Residency proof will be required at the time of hire or within six months.

List any other names by which you have been known on official records:

You must be at least 17 years of age at the time of application, and you may not be more than 19 years old at the time of appointment. Individuals born after November 16, 1992 -or- before July 13, 1990 do not qualify.

Are you 17 years of age by November 16, 2009, and will not be more than 19 years old on July 12, 2010? Yes No
Date of birth:

You must have graduated from high school by July 12, 2010, and have obtained a cumulative high school Grade Point Average (GPA) of at least 2.0 upon graduation.

Do you have a high school diploma? Yes No What is your current cumulative GPA?
Indicate the date you received, or will receive, your High School diploma

You must be legally authorized to work for any employer in the United States. United States citizenship is not required for the position of Police Aide, but steps must be taken to obtain U.S. citizenship. All non-citizen applicants must have resided in the United States for a period of not less than five years immediately prior to date of application, and should request information regarding Fire and Police Commission rules and citizenship requirements at time of application.

Are you a United States Citizen? Yes No\*

\* If you checked "no", you must be legally authorized to work for any employer in the United States, and must request and complete an additional application before this application will be accepted. Call 414.286.5071 for more information.

If you have failed a City of Milwaukee Police Department (MPD) background investigation within the past two (2) years, you do not qualify for this position. Have you ever failed an MPD background investigation? Yes No

If yes, when?

Give the titles and dates of all City examinations you have taken within the last six months (if none, print "NONE"):

If you were terminated or discharged by either the MPD or Milwaukee Fire Department, or resigned from either department with charges pending, you must wait two (2) years to apply for any position in either department. If you were terminated or discharged, or resigned with charges pending from either department, more than two (2) years ago, you may apply on a provisional basis and the Fire and Police Commission will determine, based upon a recommendation of the respective Chief, whether or not your application will be accepted.

If you are currently, or were previously an employee of the MPD or Milwaukee Fire Department, select the appropriate choice from the list.

- |  |  |
|--|--|
| <input type="checkbox"/> Currently employed    | <input type="checkbox"/> Resigned with charges pending |
| <input type="checkbox"/> Resigned              | <input type="checkbox"/> Resigned in lieu of discharge |
| <input type="checkbox"/> Terminated/Discharged |  |

The following questions will help to determine your eligibility for employment as a Police Aide. You must respond to every question. If your response is "yes", you do not qualify for this position, and your application will be rejected.

	Yes	No
Have you ever been convicted of a felony?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been convicted of a misdemeanor crime of domestic violence?	<input type="checkbox"/>	<input type="checkbox"/>
Have you had two or more convictions for driving while under the influence, or for reckless driving, including at least one conviction in the last five years?	<input type="checkbox"/>	<input type="checkbox"/>
Has your driver's license been suspended or revoked for moving violations two or more times in the last five years?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been <u>dishonorably</u> discharged from any branch of the United States Military Service?	<input type="checkbox"/>	<input type="checkbox"/>
Have you used, possessed, sold, furnished or manufactured any illegal drug or controlled substance, including marijuana, within the last three years?	<input type="checkbox"/>	<input type="checkbox"/>

**OPEN RECORDS/PUBLIC INFORMATION**

The City sometimes receives requests under the Wisconsin Public Records Law for the identity of job applicants and copies of the job applications. However, except for those applicants who are final candidates for positions, the City is prohibited from releasing the identity of applicants who have indicated in writing that they do not wish their identity to be revealed.

If you do not wish us to reveal your identity, please check the following box:

**READ CAREFULLY BEFORE SIGNING:**

I certify that all answers to questions on this application are accurate, true and complete, and that I have made no willful misrepresentations, omissions, or falsifications. I understand that falsification, misrepresentation, or omission of material information on this application, or at any time during the selection process may result in immediate disqualification from the selection process, or removal from a City position. I waive and release any claim I might have for any injury occurring while participating in any portion of the examination process. I understand that a City Charter Ordinance requires City employees to live in the City. I also understand that covered employees are compensated for overtime work in accordance with the Fair Labor Standards Act. Individuals should discuss overtime pay practices with the appointing authority prior to accepting employment with the City. I authorize the City to make any inquiries about and receive any information about my suitability for employment. I give permission to persons contacted to provide such information. I forever waive, release and covenant not to sue any person or organization for any result of providing, obtaining or acting upon such information. I understand that such information is sought with confidentiality, and I will not request copies of such information. A copy of this authorization shall be effective as the original.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**DO NOT COMPLETE THIS SECTION (FOR OFFICE USE ONLY)**

Comments:

Reviewed by:

### TESTING ACCOMMODATIONS

In accordance with State and Federal laws, the City of Milwaukee is committed to ensure non-discrimination in employment of qualified individuals with disabilities.

Under the Americans with Disabilities Act, an individual with a disability is defined as one who: has a physical or mental impairment that substantially limits one or more major life activities; has a record of such impairment; or is regarded as having such impairment.

"Major life activities" means functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working.

The following information will be treated confidentially and used only to provide testing accommodations. Requests for testing accommodations must be made prior to the test administration so that arrangements can be made.

Will you require any special accommodations during the examination process?

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

If yes, what kind of accommodations will you need? (Example: A Signer, A Reader, Extra time, etc.)

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

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

*Provisions of test accommodations may be granted by the Department of Employee Relations only after review and evaluation on a case by case basis. Factors considered will include the nature of the examination and the knowledge, skills and abilities required for the job.*

In accordance with the Immigration Reform and Control Act of 1986, the City will employ only persons legally authorized to work in the United States. Employment, if offered, is conditional upon the individual's ability to establish verification of identity and authorization to work within three business days of commencement of employment.

**The City requires pre-employment drug testing.**

**THE CITY OF MILWAUKEE IS AN EQUAL OPPORTUNITY EMPLOYER AND VALUES AND ENCOURAGES DIVERSITY.**

## City of Milwaukee Supplementary Applicant Information

No applicant for employment shall be discriminated against because of race, color, creed, religion, sex, genetic testing, sexual orientation, marital status, membership in the military reserves, national origin, ancestry, age, arrest or non-job-related conviction record, non-job-related physical or mental disability, or the use or nonuse of lawful products off the employer's premises during nonworking hours.

Completion of this form is voluntary. We ask, however, for your cooperation in completing the following information. It will be treated confidentially and used only to help us monitor the City's Affirmative Action efforts and to comply with Federal recordkeeping requirements.

### PLEASE PRINT OR TYPE

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

LAST
FIRST
MIDDLE
  
2. Recruiting information: How did you **FIRST** hear about this job opening? (Please check only one)
  - A.  Milwaukee Journal Sentinel
  - B.  Other Newspaper (please specify) \_\_\_\_\_
  - C.  City Hall Posting
  - D.  Library Posting
  - E.  Community Agency Posting (please specify) \_\_\_\_\_
  - F.  College or University Posting (please specify) \_\_\_\_\_
  - G.  From a City Employee
  - H.  From Someone who is NOT a City Employee
  - I.  Job Hotline Number (414-286-5555)
  - J.  Received Job Interest Postcard in mail
  - K.  Job Fair/Career Talk (please specify) \_\_\_\_\_
  - L.  TV (please specify station) \_\_\_\_\_
  - M.  Radio (please specify station) \_\_\_\_\_
  - N.  **www.milwaukee.gov/jobs**
  - O.  Internet (please specify) \_\_\_\_\_
  - P.  OTHER (please specify) \_\_\_\_\_
  
3. Sex (please check one):                    MALE \_\_\_\_\_                    FEMALE \_\_\_\_\_
  
4. Race (please check one):
  - Black/African American (not of Hispanic origin)
  - Hispanic/Chicano/Puerto Rican/Mexican/Cuban/Central or South American
  - White/Caucasian/European/North African/Middle Eastern
  - Native American Indian/Alaskan Native
  - Asian American/Pacific Islander/Far Eastern/Indian subcontinent or Southeastern Asian (i.e., China, Japan, Korea, Philippine Islands, Samoa)
  
5. **List any languages, other than English, which you speak FLUENTLY:** \_\_\_\_\_
  
6. Certain Federal grant positions may require public housing development residency. Please complete the following if you are currently living in a City of Milwaukee public housing development.  
 I live in the \_\_\_\_\_ Housing Development.

The above-completed information is true to the best of my knowledge.

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

## MILITARY SERVICE

Qualified veterans who obtain passing scores on open competitive examinations may be entitled to have additional points added to their scores. Individuals entitled to veteran's preference points also include disabled veterans, spouses of certain disabled veterans or unremarried spouses of eligible veterans who were killed in action or died of a service-connected disability. Candidates must qualify under Wisconsin state statutes defining veterans for this purpose.

Wisconsin State Statute 230.16(7m)(a) defines a "veteran" as a person who fulfills at least one of the following requirements:

1. Served on active duty in the U.S. armed forces for at least 180 days, not including training.
2. Was discharged from the U.S. armed forces because of a disability incurred during active duty or because of a disability that is later adjudicated by the U.S. department of veterans affairs to have been incurred during active duty.
3. Was honorably discharged from the U.S. armed forces.
4. Is eligible to receive federal veterans benefits.

### Documentation Required

If you are an eligible veteran, you must attach an undeleted copy of your DD-214. Undeleted means that the copy you submit must include the bottom portion that indicates the type of discharge you received. If you have not yet been released from active duty, you may present individual orders or a letter from your commanding officer attesting to honorable service and the dates thereof, instead of the DD-214. If you are the spouse of a disabled wartime veteran whose disability is at least 70%, or if you are the un-remarried spouse of a veteran who was killed in action or died of a service-connected disability, you may be eligible to claim preference points. In addition to the documentation described above, you must also provide documentation of your relationship to the veteran and of the veteran's compensable disability.

Do you claim veteran's preference points based on the criteria listed above?

Yes \_\_\_\_\_ No \_\_\_\_\_