Police Academy
Application Instructions
2015-2016

Application Deadline: Monday, June 29, 2015

Questions?
Call 269-965-3931 ext. 2216 or 2197
or email us at crju@kellogg.edu

There are limited seats available in the academy.
Applications will be processed on a first come, first served basis on or after March 2.
Academy Application Process

1. Apply
   - Applications available **Monday, March 2, 2015**
   - Read and complete the application in its entirety
   - Applications accepted on a first come, first served basis
   - Applications will be accepted until **Monday, June 29, 2015**.

2. Interview
   - Interviews will be scheduled as applications are received
   - Interview will last approximately 1 hour
   - Applicants should dress for job interview

3. Conditional Letter of Acceptance
   - Conditional letter will be sent pending review of application, interview, and background investigation.
   - Will include steps on how to complete the medical testing packet, including: Physical, Vision, Hearing, & Drug Screen. Medical testing must be completed by **August 3, 2015**.

4. Final Acceptance
   - Upon successfully passing the above testing, a formal acceptance letter will be mailed to the applicant.
   - Will include details for purchasing uniforms and registering for classes.

5. Academy Orientation
   - Mandatory for all accepted recruits
   - Will be held on **Monday, August 17, 2015 @ 10 am**
   - Fingerprinting will be completed as part of the orientation

6. Academy Opening
   - Mandatory for all accepted recruits
   - Will be held on **Wednesday, August 26, 2015 @ 10 am**
   - Presented by MCOLES Representative
   - Completion of affidavit to enter into licensure program

7. Start of Academy
   - Academy will start on **Friday, August 28, 2015**
   - No Class on Monday, September 7 (Labor Day)
Application Instructions

The academy packet is made up of eleven different forms (sections). Some of these sections are information for entrance into the academy, and some should be filled out by you or a physician. Most of these forms will be included in your final application packet, but not all of them will. Please read each section closely to determine the action needed. If you have any questions on a section of the packet, please contact the Criminal Justice office.

Please keep this instruction packet for future reference.

1. Employment Standards for Michigan Law Enforcement Officers (Gold)
   - This form lists the basic standards for employment that are required by the state for every law enforcement officer.
   - Note that different departments may require higher standards than listed here.
   - This form is for your reference and does not need to be turned in with your application packet.

2. Application Checklist (Neon Orange)
   - Lists all items that should be submitted and the order they should be in.
   - Note that some items may or may not be applicable to you. Please read each bullet carefully.
   - This form is required in the final application packet.

3. Candidate’s Personal History Statement (White - 10 pages, single sided)
   - Read the instructions carefully
   - Answer all questions honestly and completely
   - Attach additional pages if needed.
   - If you answered Yes to any questions in the Legal History portion, you must include all police reports and/or court records pertaining to the incident in your application packet.
   - DO NOT complete the bottom section of the page 10; this will be completed with you and our MCOLES representative at the Academy Opening.
   - This form is required in the final application packet.

4. KCC Background Supplementation (White – 7 pages, double sided)
   - Read the instructions carefully
   - Answer all questions honestly and completely
   - Attach additional pages if needed
   - Complete your autobiography as a separate document and include it in the final application packet.
   - This form is required in the final application packet.
5. **Physician’s Health Screening Form (Green)**
   - This form is used solely to determine that you are physically capable of performing the exercises for the Pre-Enrollment Physical Fitness Test.
   - This form is NOT part of your physical.
   - This form can be completed by a physician or a physician’s assistant.
   - Bring this form with you the day of your Pre-Enrollment Physical Fitness Test. **You will not be allowed to test without this form.**
   - Be sure to get the form back from the test proctor; you will need it again if you fail the test and need to retake it.
   - This form is not required in the final application packet.

6. **MCOLES Physical Fitness Test Application (White)**
   - **This test must be completed on or after March 2, 2015 for the results to be valid by the beginning of the academy.**
   - Fill out all areas the form neatly and completely and submit it to the Criminal Justice office no later than the Wednesday prior to your test date. Payment must also be received at that time.
   - Forms/Payments can be submitted in person, by mail, fax, or email.
   - The test fee is $45 and can be paid by Credit/Debit Card only.
   - An electronic version of the form is available on our website at [www.kellogg.edu/criminaljustice](http://www.kellogg.edu/criminaljustice) and can be submitted by email from there.
     i. To submit by email, fill out the form completely, then click the submit button at the bottom. The form will automatically attach to your default email account when you click the submit button. It will also automatically populate the To: and Subject: fields of the email. All you need to do is click send.
     ii. If you click the Submit button and get an error message, the above steps will not work.
        1. You will have to fill in the form, and then save it to your desktop. Then open your email client (AOL, Yahoo, Gmail, etc.), attach the saved form to the email and send it to crju@kellogg.edu with “Physical Fitness Test” as the subject.
   - On the day of the Fitness Test:
     i. You must bring in the signed **Physician’s Health Screening Form (Section 5)**
     ii. After completing the test, you will be given a pink and a goldenrod copy of your fitness test results.
     iii. **If you passed** the test, include the pink (academy) copy of your test results in your application packet. Keep the goldenrod copy for your records.
     iv. **If you fail** the test, it is your option to repeat it as often as necessary to pass; however, you must retake the entire test each time. You will also be required to complete a new application form and pay the $45.00 test fee. Be sure to keep your **Physicians Health Screening Form** if you wish to repeat the test.
7. **Fitness Test Minimums** (Yellow)
   - This form lists the requirements for passing the physical fitness test based on gender and age.
   - This is an informational page and is not required in the application packet.

8. **MCOLES Reading and Writing Test instructions** (Blue)
   - Registration for this test must be done at [www.michigan.gov/mcoles](http://www.michigan.gov/mcoles).
   - The test must be paid for by credit/debit or money order when you register. The cost of the test is $68. **NOTE**: Registration with a money order can take up to two weeks to be processed.
   - The results for the reading and writing test will be available online 24 hours after you complete the test. Steps to obtain your results will be given to you at the test site. Print a copy of your results and include them in the application packet.

9. **Secretary of State Driving Record** (White, double sided)
   - A copy of your driving record is required for admission into the police academy.
   - You must apply for the "Non-Edited Driving History" (not the abbreviated one). If you request a version other than the Non-Edited version, you will be responsible to apply and pay for the non-edited version.
   - This record can be obtained in person at a Secretary of State “Plus” center or by mail.
     i. The closest “Plus” center to the college is located at:
        2545 Capital Ave SW, Battle Creek, MI, 49015
        1. Be sure to take your driver’s license with you to the center
        2. The cost for this record is $9
        3. No forms are needed for this method
        4. Be sure to include the record they give you in your application packet
     ii. You can complete the form and mail it to the address listed at the bottom of the form.
        1. The cost for this record is $8
        2. Be sure to include your payment with the form.
        3. Your driving record will be sent directly to the Criminal Justice Office and will be added to your application after you turn it in.

10. **MFR Disclaimer** (Pink)
    MCOLES requires academy participants to obtain 37 hours of First Aid Training. As this training is not a direct part of academy classes, MCOLES will allow a recruit/applicant to fulfill the First Aid requirement by taking Medical First Responder Training (EMT-110) here at Kellogg Community College or its equivalent at a different institution. You can complete this requirement in three ways:
• **Option 1 - Currently Licensed**
  
i. If you currently hold a Paramedic, Emergency Medical Technician (EMT), or Medical First Responder License Issued by the Michigan Department of Health you may be exempt from all or a portion of the First Aid requirements. If you currently hold an “Emergency Response” Certificate from the American Red Cross you may be exempt from all or a portion of the First Aid requirements.
  
ii. The training director can request MCOLES to waive the First aid requirement if you already have one of the licenses/certifications listed above. Please bring your license or certificate into the criminal justice office to complete this process.

• **Option 2 – Take Medical First Responder Before the academy starts (out of session)**
  
i. Complete the Medical First Responder training at Kellogg Community College or its equivalent at another institution prior to the police academy session.
  
ii. If you choose this option, you must successfully complete the class and pass the National Registry Examination prior to the beginning of the police academy. MCOLES requires the passing of the National Registry Examination to ensure that the applicant/recruit is current with up-to-date material. The training director cannot waive the First Aid requirement unless you have passed the National Registry Exam.
  
iii. Once you complete the class and have passed the National Registry Exam, you must apply, by mail, for your State of Michigan MFR license. The form is available online at [http://www.michigan.gov/mdch/0,4612,7-132-2946_5093_28508-47472--00.html](http://www.michigan.gov/mdch/0,4612,7-132-2946_5093_28508-47472--00.html) (Scroll down to Forms & Publications, then under the Licensing section, select the Michigan Course Completion Application Packet link).
  
iv. Once you receive your State of Michigan MFR License in the mail, please bring it to the Criminal Justice office so copies can be placed in your academy folder.
  
v. If you complete EMT 110 but fail all attempts of the National Registry Exam, you must move to Option 3 and take EMT 110 during the academy.
  
**NOTE:** Completing this requirement before the academy session does lower the overall credit load for the applicant during the academy.

• **Option 3 – Take Medical First Responder during the academy (in session)**
  
i. You may enroll in Kellogg Community College’s Medical First Responder Training (EMT-110) during the police academy session in either the fall or spring semesters. This class must NOT conflict with the academy class schedule.
  
ii. Taking Medical First Responder (EMT-110) during the academy ensures that you are being taught current material and best practices;
therefore, MCOLES does not require you to take the National Registry Examination upon the successful completion of the class.  

**NOTE:** EMT 110 is a 3 credit hour class and if taken during the academy session, it may require more time and effort during the academy session.

- Please review the above three options carefully. Make sure that you choose the best option for you. If you have any questions, please contact the Criminal Justice Department for assistance.
- Please read the form carefully and check each box at the bottom of the form, then sign and date the form.
- This form is required as part of the final application packet.

11. Other Documents

- Medical Insurance Coverage
  i. Medical Insurance coverage is required while you are in the Academy.
  ii. If you don’t have insurance, you will need to purchase this by the time the Academy starts. If you do not have health insurance, Student Medical Insurance is available through Kellogg Community College Student Support Services; please contact Student Support Services at 269-965-4124 for more information.

- Letters of Recommendation
  i. You must provide two professional (non-family) letters of recommendation.
  ii. Examples include: Educators, Pastor, Counselor, Mentor, Employer, Supervisor, etc.

- Please refer to the checklist listed in Section 2 to see what other items you may need to add to your packet.
Application Deadline: Monday, June 29, 2015

Questions?
Call (269) 965-3931 ext. 2216 or 2197
or email us at crju@kellogg.edu

There are limited seats available in the academy.
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EMPLOYMENT STANDARDS FOR MICHIGAN LAW ENFORCEMENT OFFICERS

The chart below outlines the selection and employment standards published by the Michigan Commission on Law Enforcement Standards (MCOLES). By law, no person shall be employed as a law enforcement officer unless they fully comply with these standards. Agencies may set standards higher than these, however, the burden is upon the agency to defend the job relatedness of the higher standard.

Agencies must screen all preservice, agency employed recruits, or reciprocity candidates considered for employment for compliance with all standards.

The selection and employment standards published under the authority of Public Act 203 of 1965 are found in Rules 28.14203, through 28.14207 of the Michigan Administrative Code of 1979, as amended.

<table>
<thead>
<tr>
<th>Category</th>
<th>Standard</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>Not less than 18 years.</td>
<td>No maximum age</td>
</tr>
<tr>
<td>Citizenship</td>
<td>United States Citizenship.</td>
<td>Birth Certificate; Certificate of Naturalization; Valid Passport</td>
</tr>
<tr>
<td>Education</td>
<td>High school diploma or GED is the minimum for an employed recruit. Pre-service recruits must have a minimum of an associate’s degree upon completion of the basic training academy.</td>
<td>A college degree from an accredited institution is evidence of complying with the minimum standard.</td>
</tr>
<tr>
<td>Felony Convictions</td>
<td>No prior felony convictions.</td>
<td>Includes expunged convictions.</td>
</tr>
<tr>
<td>Good Moral Character</td>
<td>Possess good moral character as determined by a favorable comprehensive background investigation covering school and employment records, home environment, and personal traits and integrity.</td>
<td>Includes arrest and expunged convictions, all previous law violations and personal protection orders.</td>
</tr>
<tr>
<td>Driver's License</td>
<td>Possess a valid operators or chauffeur's license.</td>
<td>May not be in a state of suspension or revocation</td>
</tr>
<tr>
<td>Disorders, Diseases or Defects</td>
<td>Be free from any physical defects, chronic diseases, or mental and emotional instabilities which may impair the performance of a law enforcement officer or which might endanger the lives of others or the law enforcement officer.</td>
<td>This includes, but is not limited to, diseases such as diabetes, seizures and narcolepsy. Each case shall be investigated to determine its extent and effect on job performance. The evaluation should include the expert opinion of a licensed physician specializing in occupational medicine.* See below for mental and emotional instability standard.</td>
</tr>
<tr>
<td>Hearing</td>
<td>Initial unaided testing involves pure tone air conduction thresholds for each ear, as shown on the pure tone audiogram, shall not exceed a hearing level of 25 decibels at any of the following frequencies: 500, 1000, 2000, 3000; and 45 decibels at 4000 Hertz.</td>
<td>Initial testing may be performed by a certified hearing conservationist, a licensed hearing aid specialist or a licensed audiologist. See Note for individuals requiring additional unaided or aided testing requirements by a licensed audiologist. *</td>
</tr>
<tr>
<td><strong>Mental/ Emotional Disorders</strong></td>
<td>Be free from mental or emotional instabilities which may impair the performance of the essential job functions of a law enforcement officer or which might endanger the lives of others or the law enforcement officer.</td>
<td>Mental and emotional stability may be assessed by a licensed physician, or a licensed psychologist or psychiatrist. MCOLES may require the examination be conducted by a licensed psychologist or psychiatrist. **</td>
</tr>
<tr>
<td><strong>Vision, Color</strong></td>
<td>Possess normal color vision without the assistance of color enhancing lenses.</td>
<td>The unaided eye shall be tested using pseudoisochromatic plates. The Farnsworth Dichotomous D-15 panels shall be used for any candidate who fails the pseudoisochromatic plates.</td>
</tr>
<tr>
<td><strong>Vision, Corrected</strong></td>
<td>Possess 20/20 corrected vision in each eye.</td>
<td>No uncorrected standard</td>
</tr>
<tr>
<td><strong>Vision, Normal Functions</strong></td>
<td>Possess normal visual functions in each eye.</td>
<td>Includes peripheral vision, depth perception, etc.</td>
</tr>
<tr>
<td><strong>Reading and Writing</strong></td>
<td>Pass the MCOLES reading and writing examination or an approved agency equivalent examination.</td>
<td>Does not apply to Recognition of Prior Training &amp; Experience Program Students</td>
</tr>
<tr>
<td><strong>Physical Fitness</strong></td>
<td>Pass the MCOLES physical fitness pre-enrollment examination. This does not apply to Recognition of Prior Training &amp; Experience Program students.</td>
<td>Pre-enrollment testing is required for admittance to an approved training program, however this standard is fulfilled only upon successful completion of physical fitness training.</td>
</tr>
<tr>
<td><strong>Police Training</strong></td>
<td>Successfully complete the MCOLES mandatory basic training curriculum.</td>
<td>This may be done by completing successfully, an approved college preservice program or a basic training academy. Candidates seeking reciprocity from other states may apply for the Recognition of Prior Training and Experience Program.</td>
</tr>
<tr>
<td><strong>Licensing Examination</strong></td>
<td>Pass the MCOLES licensing examination upon the completion of basic training.</td>
<td>For reciprocity candidates, successfully complete the Recognition of Prior Training and Experience Program and licensing examination.</td>
</tr>
<tr>
<td><strong>Fingerprinting</strong></td>
<td>Fingerprint the applicant with a search of state or federal fingerprint files to disclose criminal record.</td>
<td>Includes expunged convictions.</td>
</tr>
<tr>
<td><strong>Oral Interview</strong></td>
<td>Conduct an oral interview to determine the applicant's acceptability for a law enforcement officer position and to assess appearance, background and the ability to communicate.</td>
<td></td>
</tr>
<tr>
<td><strong>Drug Testing</strong></td>
<td>Cause the applicant to be tested for the illicit use of controlled substances</td>
<td>Must use a Commission certified laboratory and comply with Commission procedures.</td>
</tr>
</tbody>
</table>

* Agencies with an applicant who fails the initial hearing standard should contact the MCOLES Standards Compliance Section for additional unaided and aided hearing criteria as well as testing protocols.

** Agencies are encouraged to request the assistance of the Standards Compliance Section of MCOLES when their employment process reveals that a candidate may not comply with a state standard. This is particularly true with medical conditions which may involve circumstances unfamiliar to the agency and which require medical opinions. Please call (517) 322-1417 with any questions.

Michigan Commission on Law Enforcement Standards, 106 W. Allegan St., Suite 600, P.O. Box 30633, Lansing, MI 48909 06/12
APPLICATION CHECKLIST FOR: _____________________________
Print Candidate Name

All items must be submitted together (and correctly) to make a complete application.

☐ This application checklist with each item checked
☐ Copy of driver’s license (both front and back) with the photo recognizable
☐ Copy of social security card
☐ Copy of your Birth Certificate
☐ Non-Edited Driving History
☐ Completed Personal History Questionnaire (including MCOLES Applicant Information and Authorization for Release of Information)
☐ KCC Background Supplementation
☐ Autobiography
☐ Copy of your Health Insurance Card
☐ Two professional (non-family) Letters of Recommendation
☐ MCOLES Pre-Enrollment Reading and Writing Passing Test Score
☐ MCOLES Physical Fitness Passing Test Score DATED MARCH 2, 2015 OR LATER
☐ Copy of your proof of high school graduation or GED (you may skip this if you currently have a college degree)
☐ Medical First Responder Disclaimer

The following items are needed only if they apply to you:

☐ College transcript(s), if you have attended a college other than KCC
☐ Copy of your DD214 Long Form (un-amended)
☐ Proof of citizenship, if you were born outside the United States
☐ Copies of the police report(s) and final court disposition papers on any arrest.

<table>
<thead>
<tr>
<th>For Office Use Only</th>
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</thead>
<tbody>
<tr>
<td>Received By:</td>
</tr>
<tr>
<td>Degree:</td>
</tr>
<tr>
<td>Law Enforcement (255)</td>
</tr>
<tr>
<td>Criminal Justice (314)</td>
</tr>
<tr>
<td>Degree in:</td>
</tr>
<tr>
<td>obtained from:</td>
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</table>

Comments:
InMichigan Commission on Law Enforcement Standards

CANDIDATE’S PERSONAL HISTORY STATEMENT AND AFFIDAVIT

(Rev. 05-20-13)

Instructions to the Applicant:

The Michigan Commission on Law Enforcement Standards (MCOLES) requires that all candidates seeking eligibility for law enforcement licensing comply with the Commission’s minimum selection and employment standards. Candidates must meet these standards at the time of entrance into the basic training program, when applying for the Recognition of Prior Training and Experience (RPTE), or at the time of employment. Candidate must maintain compliance with such requirements throughout the training period and at the time of initial licensing or re-licensing through reciprocity.

One of the selection requirements involves “good moral character.” The state of Michigan Administrative Code (Rule 28.14203(e)) requires that candidates must “Possess good moral character as determined by a favorable comprehensive background investigation covering school and employment records, home environment, and personal traits and integrity. Consideration will be given to a history of, and circumstances pertaining to, having been a respondent to a restraining or personal protection order. Consideration shall also be given to all law violations, including traffic and conservation law convictions as indicating a lack of good character.”

The information you provide in this personal history statement will be used in evaluating your background and will assist staff in determining your suitability for the position of law enforcement officer. The information you provide in this document will subsequently be discussed with you and you will be required to file an affidavit in support of the information provided.

Please fill out the questionnaire completely and accurately. Return the completed personal history statement with your application to your academy director, agency, or MCOLES representative. When completing the personal history statement, please keep in mind that:

1. The completion of this form is mandatory;

2. All statements are subject to verification; and,

3. Deliberately making false statements, committing fraud, or failing to disclose requested information are grounds for denying your enrollment into or dismissing you from the training program, including the Recognition of Prior Training and Experience program. Further sanctions by the Commission may be imposed including a two-year ineligibility from applying for enrollment in any training program, or permanently denying your application. Subsequent license revocation may also be imposed for making a material false statement or committing fraud in the application process. (R 28.14602 – 28.14609)

It is to your advantage to respond openly. Any negative factor in your background will be evaluated in terms of the circumstances and facts surrounding its occurrence, and its degree of relevance to the job of a law enforcement officer.

NOTE: Use extra sheets of paper, if necessary, to completely answer the questions on the attached pages.

Do not leave any question responses blank, or enter “N/A”. If a question appears not to apply to you, contact the academy director/background investigator who will make a determination if your lack of response or applicability is appropriate.

PLEASE PRINT IN INK OR TYPE YOUR RESPONSES TO THIS QUESTIONNAIRE!
Type or print only:

<table>
<thead>
<tr>
<th>Name: Last:</th>
<th>First:</th>
<th>Middle:</th>
<th>Suffix (Jr, Sr, III):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Security No.*:</td>
<td>Date of Birth:</td>
<td>Gender‡:</td>
<td>Race‡:</td>
</tr>
<tr>
<td>Residence Address (Street, City, State, Zip):</td>
<td>Phone No.:</td>
<td>Highest Degree:</td>
<td></td>
</tr>
<tr>
<td>Driver’s License No.:</td>
<td>Issuing State:</td>
<td>E-Mail:</td>
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</table>

Authorization for release of information:

I hereby authorize any individual, agency or organization to furnish the Michigan Commission on Law Enforcement Standards, its representatives and/or agents (including, but not limited to, its 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/emotional, 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.

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.

Signature: 

Today’s Date:

<table>
<thead>
<tr>
<th>AUTHORITY:</th>
<th>203 PA 1965</th>
</tr>
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<tbody>
<tr>
<td>COMPLIANCE:</td>
<td>Voluntary</td>
</tr>
<tr>
<td>PENALTY:</td>
<td>No License Activation/ Academy Enrollment</td>
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</table>

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

‡ This information is for the purposes of EEO reporting only.
Michigan Commission on Law Enforcement Standards  
106 W. Allegan St., Suite 600, PO Box 30633, Lansing, MI 48909  

CANDIDATE’S PERSONAL HISTORY STATEMENT AND AFFIDAVIT IN SUPPORT OF APPLICATION TO ENTER INTO LICENSING PROCESS  

PLEASE PRINT IN INK OR TYPE YOUR RESPONSES TO THIS QUESTIONNAIRE  

<table>
<thead>
<tr>
<th>PERSONAL INFORMATION</th>
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<tbody>
<tr>
<td>LAST NAME</td>
<td>FIRST NAME</td>
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<td></td>
<td></td>
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<tr>
<td>DATE OF BIRTH</td>
<td>SOCIAL SECURITY NO.</td>
</tr>
<tr>
<td>(mm/dd/yyyy):</td>
<td>/</td>
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<tr>
<td>PREVIOUS NAME OR ALIAS-Enter any name changed due to marriage or divorce, legal change to your name, or alias used in official capacity. Provide explanation – documentation may be requested.</td>
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<tr>
<td>Last:</td>
<td>First:</td>
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<tr>
<td>Last:</td>
<td>First:</td>
</tr>
<tr>
<td>Are you a citizen of the United States? (Proof shall be a birth certificate, US passport, or certificate of naturalization).</td>
<td>Yes</td>
</tr>
<tr>
<td>HOME ADDRESS</td>
<td>CITY</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>2nd ADDRESS (School, new address, etc.)</td>
<td>CITY</td>
</tr>
<tr>
<td></td>
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<tr>
<td>PHONE NO.</td>
<td>2nd PHONE NO.</td>
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Authority: 203 PA 1965  
Compliance: Voluntary  
Penalty: No License Activation/Academy Enrollment  

* This is in accordance with the Federal Privacy Act of 1974, disclosure is voluntary. If necessary, the Social Security Number will be used for identification purposes to ensure proper records are obtained.
**EMPLOYMENT HISTORY**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you ever been talked to, interviewed, or suspected by an employer of any crime in the workplace?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever been talked to, interviewed, or suspected by an employer of any form of workplace harassment (inappropriate sexual behavior, sexual harassment, ethnic harassment) or workplace violence (threatening behavior or assaultive behavior)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever been fired, asked to resign in lieu of termination, or decided to resign during an inquiry into your behavior from any place of employment?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If “Yes” to any of the above, please give the details (include when, where, and the circumstances – use a separate sheet if necessary):

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you ever been an unsuccessful candidate for a law enforcement position (either volunteer or paid) because you did not meet the background requirements or other non-medical employment qualification?</td>
<td></td>
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</tr>
</tbody>
</table>

If “Yes,” please give the details (include when, name of agency or academy and the circumstances):

Please list your previous employers for the last 10 years (current or most recent first). Be specific for the reasons for leaving (resignation in good standing; resignation prior to discipline or termination; termination for violation of rules/policies/law; promoted; reassigned; etc.). Include life-time employment history (paid or volunteer) with any law enforcement agency. Use a separate sheet of paper if necessary.

<table>
<thead>
<tr>
<th>Employer Name</th>
<th>Address</th>
<th>Position Held</th>
<th>Dates From</th>
<th>To</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisor to Contact</td>
<td>Telephone Number</td>
<td>Reason for Leaving</td>
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</table>
## MILITARY SERVICE

Applicants with prior military service should submit a copy of their DD Form 214 with their application to the academy or with their application to the MCOLES Recognition of Prior Training and Experience program.

| Have you ever served in the armed forces, National Guard, or military reserves? | Yes | No |
| If “Yes”, have you ever been the subject of any judicial or non-judicial disciplinary action, or discharged for less than honorable service? | Yes | No |

If “Yes”, please give the details (include branch of service, when, where, and the circumstances):

## MOTOR VEHICLE OPERATION

Please list all traffic citations (exclude parking violations) you have received: (Attach a separate sheet if necessary)

<table>
<thead>
<tr>
<th>APPROXIMATE DATE</th>
<th>NATURE OF VIOLATION (Initial Cause for Stop, Charge or Citation)</th>
<th>TICKETED Y/N</th>
<th>JURISDICTION/AGENCY WHERE VIOLATION OCCURRED</th>
<th>DISPOSITION (Final Disposition - Fine, Points, Probation, Other)</th>
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<tbody>
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</table>

Do you currently have active violation points on your driver’s license? Yes No
If “Yes”, how many points do you have? _____ pts

Has your driver’s license ever been denied, suspended or revoked in this state or any other state, the District of Columbia, a possession or territory of the U.S., or Canada? Yes No
If “Yes”, please provide the details (what, when, where, and why):

Do you currently have any restrictions placed on your driver’s license? Yes No
If “Yes”, please explain (nature of restriction and why):

Have you been involved, as a driver at fault, in a motor vehicle accident? Yes No
If “Yes”, please provide the following information:

<table>
<thead>
<tr>
<th>APPROXIMATE DATE</th>
<th>LOCATION</th>
<th>INVESTIGATING POLICE AGENCY</th>
<th>INDICATE INJURIES</th>
</tr>
</thead>
<tbody>
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</table>
**LEGAL HISTORY**

Please provide the following information if you have ever been
- interviewed by a police agency as a suspect in, or questioned about, any criminal offense (misdemeanor or felony);
- been arrested or charged with any criminal offense (misdemeanor or felony);
- convicted of any criminal offense (misdemeanor or felony) including: expungements or conviction set asides (MCL780.621);
  Holmes Youthful Trainee Act dispositions (MCL762.11); or drug court dispositions (MCL333.7411).

Criminal offenses and charges include, but not limited to: conservation law violations; appearance tickets; or criminal traffic violations. (NOTE: Include any diversion programs, delayed or deferred sentencing. Do not include traffic offenses that are treated as civil infractions, see Motor Vehicle Operation above). Attach a separate sheet if necessary.

<table>
<thead>
<tr>
<th>APPROXIMATE DATE</th>
<th>POLICE AGENCY OR JURISDICTION</th>
<th>INITIAL CHARGE/VIOLATION OR REASON FOR QUESTIONING</th>
<th>FINAL DISPOSITION (Conviction, dismissal, fines, probation, jail, etc.)</th>
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</table>

Have you ever had a felony conviction “expunged” or “set aside”? Yes  No

If “Yes,” please provide the details (nature of crime, county where expunged, and when):

Have you ever been placed on court probation as an adult, or been on parole? Yes  No

If “Yes,” please provide the details (when, where, why):

Have you ever been on bail, or personal recognizance, or other release conditions from a court-ordered custody? Yes  No

If “Yes,” explain here:

Have you ever been required to appear before a juvenile court? Yes  No

If “Yes,” please provide the details (when, where, why) and final disposition:

Are you now or have you ever been a plaintiff or defendant in any civil court action? Yes  No

If “Yes,” please provide the details (when, where, why):

Have you ever been a respondent to a restraining or personal protection order in this state or any other state or tribal court? Yes  No

A respondent is the person enjoined or prohibited from certain behaviors or actions.

If “Yes,” please provide dates, court of jurisdiction, and circumstances of the order and final disposition. Use a separate sheet of paper if necessary.
**FINANCIAL HISTORY**

The basic training academy or MCOLES may require you to submit a current financial or credit history statement to verify the information provided below.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>Have you ever filed for or declared bankruptcy?</td>
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<tr>
<td>Have any of your bills ever been turned over to a collection agency?</td>
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<tr>
<td>Have you ever been evicted for non-payment of rent?</td>
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<tr>
<td>Have you ever had a credit card canceled by the company for unpaid balances?</td>
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<tr>
<td>Have you ever had purchased goods repossessed?</td>
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</tr>
</tbody>
</table>

If you answered “Yes” to any of the above questions, please give the details (when, firms/businesses involved, and the circumstances and final disposition):

---

**EDUCATION HISTORY**

Please list your educational achievements here. A high school diploma or GED is required for enrollment into an MCOLES approved academy and for licensing. Official college transcripts are required for enrollment into the academy as a preservice recruit, and official transcripts confirming the award of a degree are required for license eligibility. Only recognized accredited colleges and universities are accepted. College degrees are evidence of meeting the high school requirement.

<table>
<thead>
<tr>
<th>High School</th>
<th>Location</th>
<th>Diploma or GED?</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>College</td>
<td>Location</td>
<td>Degree / Credit Hours</td>
<td>Date</td>
</tr>
<tr>
<td>Vocational/Trade School/Other</td>
<td>Location</td>
<td>Degree or Certificate</td>
<td>Date</td>
</tr>
</tbody>
</table>

Have you ever been suspended or expelled from any high school or post-secondary school?  
(Post-secondary schools include colleges, universities, graduate schools, business and vocational schools.)

| Yes | No  |

Have you ever been subject to formal discipline procedures, short of suspension or expulsion from school for unacceptable behavior at any high school or post-secondary school?

| Yes | No  |

If “Yes” to either of the above questions, please explain (include school, date, and circumstances):

| Yes | No  |

Have you ever been denied admission to, withdrew from, or dismissed from, a police training academy or criminal justice academic program?

| Yes | No  |

If “Yes”, please explain (include school/academy, date, and circumstances):
MCOLES STANDARDS AND ELIGIBILITY

The basic training academy and the MCOLES representative must determine if you meet the MCOLES standards and are able to perform the essential job functions of a law enforcement officer. Please answer the following questions. If you have any questions about this information, please contact the Standards Compliance Section (517) 322-1417.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you read and fully understand the current Michigan Commission on Law Enforcement Standards’ Minimum Selection and Employment Standards to qualify for law enforcement licensing, and do you attest that you comply with these provisions?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Have you ever failed to submit to, or tested positive on a drug screen test for employment or licensing?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>If “Yes,” provide details here.</td>
<td></td>
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</tr>
<tr>
<td>Have you ever sought and received a written determination from the Michigan Commission on Law Enforcement Standards regarding any situation which may affect compliance with the minimum selection and employment standards?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>To your knowledge, have you ever been investigated by the Michigan Commission on Law Enforcement Standards for an alleged standards violation, or to determine whether you could meet the selection and employment standards?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>If “Yes,” please provide details here and copies of previous written determination.</td>
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</tr>
<tr>
<td>Have you ever been removed from, or withdrawn from, an employment application process for any position with a law enforcement agency or with a law enforcement training academy in this state or any other state?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>If “Yes,” please provide details here.</td>
<td></td>
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</tr>
<tr>
<td>Have you ever had your law enforcement license or certification in Michigan, or any other state, territory or tribe, denied, suspended, revoked, or restricted by administrative action or stipulation?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>If “Yes,” please provide details here.</td>
<td></td>
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</tr>
<tr>
<td>Have you ever been convicted of a crime that is a misdemeanor under either Federal or State law that has as an element the use or attempted use of physical force, or the threatened use of a deadly weapon against a current or former spouse, parent, guardian or person with who you cohabitated or have cohabitated or with whom you have a child in common or against any person similarly situated to a spouse, parent or guardian (commonly known as domestic violence)?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>If “Yes,” please provide details here. A determination must be made whether you are eligible to possess a firearm under federal law.</td>
<td></td>
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<tr>
<td>Have you ever been notified by the Michigan State Police that you are subject to restrictions on the purchase of a pistol pursuant to MCL 28.422b?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
### LOCAL ACADEMY QUESTIONS: Academy Name

Click here to enter text.

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### EMPLOYED RECRUITS AND RECOGNITION OF PRIOR TRAINING AND EXPERIENCE CANDIDATES

Any previous employment with any law enforcement /public safety agency (police, corrections, fire, etc.) held, either in Michigan or elsewhere, was in accordance with the Federal Fair Labor Standards Act (minimum wages for all hours worked).

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</table>

I understand that to be in compliance with MCOLES administrative rules 28.14102(a), (b), and (c), and for the purposes of this section R 28.14206, that on the first day of training, I meet all the Federal Fair Labor Standards Act requirements. This statement means: 1) I am receiving at least minimum wages from the employer I have identified on my application for all hours spent in the academy and any additional hours worked outside the academy; 2) I am not volunteering to work time for my employer; 3) I have not entered into any contractual agreement (signed or unsigned, verbal or written) with my employer that would obligate me to donate money to compensate my employer for tuition and wages, or volunteer time outside or after the academy, to compensate or repay my employer.

Even if there is no agreement with my employer, I have not and will not, nor have or will I allow anyone in my name, to voluntarily reimburse my employer in any form for tuition and wages provided to me to attend the academy.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</table>

I understand these requirements and am verifying that my employment meets these requirements at the time of entry into this training session. I also understand that I will be required to produce, to the training director, a copy of proof that wages are being paid to me by my employing agency sometime during this approved training session.

Furthermore, I understand that if there is any change in my employment status during this training session, I must notify the training director and the Commission immediately.

I recognize that any misrepresentation on my part to obtain licensing or a state subsidy of tuition costs constitutes fraud and is punishable as a felony under MCL § 750.218.
AUTHORITY: 1965 PA 203

When filling out this Personal History Statement please keep in mind that:

1. completion is mandatory,
2. all statements are subject to verification, and
3. deliberately making false statements, committing fraud, or failing to disclose requested information are grounds for denying your enrollment into or dismissing you from the training program, including the Recognition of Prior Training and Experience program. Further sanctions by the Commission may be imposed including a two-year ineligibility from applying for enrollment in any training program, or permanently denying your application. Subsequent license revocation may also be imposed for making a material false statement or committing fraud in the application process. (R 28.14602 – 28.14609)

Candidate’s Signature  
Date

Academy Director’s Signature  
Date

PLEASE WAIT TO SIGN BELOW

This section is to be completed by the candidate after reviewing the Personal History Statement Information with the MCOLES Field Representative

STATE OF MICHIGAN  )
COUNTY OF_______________________ ) ss.
Applicant’s Social Security Number:______________________
Employing Agency or Training Center:____________________
Now comes____________________________________ and being first duly sworn certifies as follows:

Print Candidate’s Name

I agree that the information I have provided above in this Personal History Statement is true, accurate and complete and this document constitutes an official statement within the purview of Michigan statutes and is subject to verification by any employing agency and/or the Michigan Commission on Law Enforcement Standards, and that a failure to fully disclose information required by this affidavit constitutes misrepresentation or fraud as prohibited by MCL 28.609b(1)(d), and, if so, shall constitute grounds for revocation of license as a law enforcement officer in Michigan pursuant to MCL 28.609b(1)(d).

Candidate’s Name (print) ________________________________
Candidate’s Signature: ________________________________ Date signed: ______________

The foregoing affidavit was acknowledged before me this ____________________ (Date), by ____________________________________________________________

(Name of Person) who is personally known to me or who has produced __________________________ (Type of identification) as identification and who did (did not) take an oath.

Signature of Notary __________________________________________

Commission in ______________________ County
Acting in ______________________ County
Commission Expires __________________________

(Notary’s Stamp/Seal)
Instructions: Read every question carefully. Answer every question. If the question does not apply to you, write “N/A” in the answer space. Do not leave blank answer spaces. Please print clearly and legibly. Attach additional pages if you need to continue an answer; please note the question you are referring to. Applications that are incomplete or cannot be read will not be accepted.
**Personal History**

Name  
(Last, First, Middle) ___________________________ Soc. Security # __________________

Nickname ___________________________ Date of Birth ______________ Age _______________

Place of Birth  
City ___________________________ County ___________________________ State/Territory ___________________________ Country ___________________________

List all states/countries in which you have had a Driver’s License or ID Card:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Have any of your driver’s licenses ever been suspended or revoked?   Yes   No

If yes, please explain (include the state/country, dates, reason, and status):

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

**Residential History**

Please list any address you have lived at since birth. Include any addresses in which you have stayed at in excess of 60 days. Begin with your current address and work backwards. Attach an additional sheet if more space is needed.

<table>
<thead>
<tr>
<th>From (Month/Year)</th>
<th>To (Month/Year)</th>
<th>Street Address</th>
<th>City</th>
<th>State/Territory</th>
<th>Zip</th>
<th>County</th>
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<tbody>
<tr>
<td>Present</td>
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</table>
Excluding family members, list any adults (18+) you have lived with during the past five years. Attach an additional sheet if more space is needed.

Name

Current Street Address
City

State/Territory
Zip Code
Country

Home #
Cell#
Relationship

Name

Current Street Address
City

State/Territory
Zip Code
Country

Home #
Cell#
Relationship

Name

Current Street Address
City

State/Territory
Zip Code
Country

Home #
Cell#
Relationship

Name

Current Street Address
City

State/Territory
Zip Code
Country

Home #
Cell#
Relationship

Name

Current Street Address
City

State/Territory
Zip Code
Country

Home #
Cell#
Relationship

Name

Current Street Address
City

State/Territory
Zip Code
Country

Home #
Cell#
Relationship
**Employment/Unemployment History**

Have you ever been disciplined, fired, asked to resign, or resigned to avoid being fired from a position? ☐ Yes ☐ No

Please list all periods of employment or unemployment. Begin with your present employment/unemployment status and work backwards. Attach an additional sheet if more space is needed.

<table>
<thead>
<tr>
<th>Date (MM/YY)</th>
<th>From</th>
<th>To</th>
<th>Business/Agency</th>
<th>Title</th>
<th>Supervisor</th>
<th>Contact #</th>
<th>Reason for Leaving</th>
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</table>
Volunteer History
Please list all periods of volunteer involvement. Begin with your present employment/unemployment status and work backwards. Attach an additional sheet if more space is needed.

<table>
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<tr>
<th>Date</th>
<th>From</th>
<th>To</th>
<th>Business/Agency</th>
<th>Title</th>
<th>Supervisor</th>
<th>Contact #</th>
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</tbody>
</table>

Military Service History
Have you ever served on active duty with the United States Military or as a member of the Reserves or National Guard?  □ Yes □ No

Active Duty
Branch of Service __________________ Dates of Service __________________
Type of Discharge* __________________
*If other than “Honorable Discharge,” please explain: __________________

Highest Rank ______________________ Rank at Separation __________________

Reserves/National Guard
Branch of Service __________________ Dates of Service __________________
Type of Discharge* __________________
*If other than “Honorable Discharge,” please explain: __________________

Highest Rank ______________________ Rank at Separation __________________
Were you ever arrested, cited, or apprehended by military police?  □ Yes*  □ No
*If yes, please explain: ________________________________________________________________

Were you ever the subject of a report or investigation by military police or other investigative service (i.e., CID, CIS, OIS)?  □ Yes*  □ No
*If yes, please explain: ________________________________________________________________

Did you ever receive a court martial or non-judicial punishment for a violation of the Uniform Code of Military Justice (UCMJ)?  □ Yes*  □ No
*If yes, please explain: ________________________________________________________________

**Drug & Alcohol Use**

How often do you drink alcohol? _______ drinks/day, _______ days/week

Has anyone ever suggested to you that you might have a problem with drinking?  □ Yes  □ No

Have you ever tried, used, or experimented with any illegal drugs or controlled substances?  □ Yes  □ No

Have you ever tried, used, or experimented with marijuana in any form?  □ Yes  □ No

List all controlled/illegal substances you have ever tried, used, or experimented with:

<table>
<thead>
<tr>
<th>Drug/Substance</th>
<th>Have you used?</th>
<th>If yes, Frequency of use:</th>
<th>Date Last used</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana</td>
<td>□ Yes □ No</td>
<td></td>
<td></td>
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<tr>
<td>Cocaine</td>
<td>□ Yes □ No</td>
<td></td>
<td></td>
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<tr>
<td>Amphetamines</td>
<td>□ Yes □ No</td>
<td></td>
<td></td>
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<tr>
<td>Methamphetamines</td>
<td>□ Yes □ No</td>
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<td></td>
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<tr>
<td>Heroin</td>
<td>□ Yes □ No</td>
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<tr>
<td>LSD</td>
<td>□ Yes □ No</td>
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<tr>
<td>PCP</td>
<td>□ Yes □ No</td>
<td></td>
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<tr>
<td>Peyote</td>
<td>□ Yes □ No</td>
<td></td>
<td></td>
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<tr>
<td>Mushrooms</td>
<td>□ Yes □ No</td>
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<td></td>
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<tr>
<td>Ecstasy</td>
<td>□ Yes □ No</td>
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<tr>
<td>Steroids</td>
<td>□ Yes □ No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inhalants</td>
<td>□ Yes □ No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>□ Yes □ No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Have you ever used medications that were not prescribed to you?  □ Yes*  □ No
*If yes, please explain: ________________________________________________________________
General History

Have you ever been arrested for a misdemeanor? □ Yes □ No
Have you ever been arrested for a felony? □ Yes □ No
Have you ever been interviewed as a suspect or accused in any offense? □ Yes □ No
Do you have any history of associating with criminals? □ Yes* □ No
If so, list the crime(s) & relationship(s) with the criminal: 

Have you ever applied to work for a criminal justice organization? □ Yes* □ No
*What agency? ____________________________ *Why weren’t you hired? ____________________________

Have you ever applied to any other police academy? □ Yes* □ No
* Which Academy? ____________________________
* Why are you not attending that academy? ____________________________

Do you have any personal history (i.e. victimization or other) that would prohibit you from being objective and carrying out police duties fairly and without bias? □ Yes* □ No
If so, please explain: ____________________________

Is there any reason you may not be considered for employment as a police officer? □ Yes* □ No
If so, please explain: ____________________________

Autobiography

Please tell us about yourself. Consider the topics listed below during your writing process. Your autobiography should be typed in 12pt font, double spaced, and between 750 and 1,250 words in length. This document will be included as part of your completed application.

- Education
  - High School
  - College
- Work History
- Strengths
- Weaknesses
- Hobbies
- Career Goals
- Awards
- Community Service
- Successes
- Failures
- Values
- Family Life
- Reasons and/or events that encouraged you to become a police officer

By signing this document, you confirm that the answers are true and accurate to the best of your knowledge, and you understand that a failure to disclose any information is subject for dismissal from the police academy.

____________________________________  ____________________________  __________
Applicant Signature                    Printed Name                        Date
# Pre-Enrollment Physical Fitness Examination

## PHYSICIAN’S HEALTH SCREENING FORM

<table>
<thead>
<tr>
<th>Examinee’s Name (Last, First, Middle)</th>
<th>Date of Birth (M/D/YYYY)</th>
<th>Social Security Number*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (Street, City, State, Zip)</td>
<td></td>
<td>Drivers License Number</td>
</tr>
</tbody>
</table>

**Note to Examining Physician/Physician’s Assistant:** Your medical exam will attest that the examinee is physically capable of performing the following 4 exercises that are required to be performed during the MCOLES Physical Fitness Examination:

1. **Vertical Jump**
   - The examinee performs 3 standing vertical jumps, one jump at a time, jumping as high as possible each time.

2. **Sit-Ups**
   - The examinee must complete as many sit-ups as possible in 60 seconds. The back must be flat on the mat, knees bent 90%, feet flat on the floor, hands overlapped behind the head, without interlocking their fingers.

3. **Pushups**
   - The examinee must complete as many pushups as possible in 60 seconds. The hands must be shoulder width apart on the floor, elbows extended, locked out; feet no more than 6 inches apart; legs, hips and torso move in the same plane.

4. **One-Half Mile Shuttle Run**
   - The examinee runs 15 round trips between two pylons placed 88 feet apart for time.

Note to the examining physician/physician’s assistant: *You must sign below and provide the required information for this form to be valid.* This health screening is valid for a period of 180 days from the date of the medical screening.

My health screen of the above identified person reveals *no apparent reason* why this examinee cannot safely participate in the physical exercises described above.

<table>
<thead>
<tr>
<th>Physician/Physician’s Assistant Name (Printed)</th>
<th>Phone No.</th>
<th>Medical License No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (Street, City, State, Zip)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signature

Examinee: You must bring this ORIGINAL form with you, signed and completely filled out by your physician/physician’s assistant, when you come to take the pre-enrollment physical fitness examination at an MCOLES authorized test site.

**A MEDICAL PHYSICAL SCREENING CONDUCTED BY OTHER THAN A PHYSICIAN OR A PHYSICIAN’S ASSISTANT IS NOT ACCEPTABLE. FAILURE TO FOLLOW THIS PROCEDURE AND/OR OBTAIN THE APPROPRIATE SIGNATURES WILL PREVENT YOU FROM PARTICIPATING IN THE MCOLES PHYSICAL FITNESS TESTING.**

<table>
<thead>
<tr>
<th>Examinee’s Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

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

**Authority:** P.A. 203 of 1965.
**Compliance:** Voluntary-necessary before testing.
**Penalty:** No admission to test.
Please complete all areas of the form. All information provided is kept strictly confidential. Application may be submitted online, by mail, e-mail, or by fax. Fax application to (269) 565-2060. E-mail application to crju@kellogg.edu. Mail application to: Kellogg Community College, Criminal Justice Programs, 450 North Ave, Battle Creek, MI 49017.

Test Fee is $45 and is payable by Credit or Debit Card Only. Application deadline is 4:00pm the Wednesday before each test. Cancellations for a refund must be received by that time. All payments will be processed on Thursday or Friday prior to the test.

Submitting this form does not qualify as confirmation; we will e-mail you to confirm your registration. Please contact us if you do not receive confirmation by Wednesday prior to the test date. Kellogg Community College will notify you by e-mail or phone if the session is cancelled due to inclement weather or low enrollment. A recorded message regarding cancellation will be available the Thursday before a test at 269-965-3931, ext. 2216.

Please TYPE or PRINT the following information:

1. **Applicant Information**

<table>
<thead>
<tr>
<th>Name Last</th>
<th>First</th>
<th>MI</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Address</th>
<th>Street Number/Name</th>
</tr>
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<table>
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<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Phone Number</th>
<th>Email Address</th>
</tr>
</thead>
</table>

2. **Requested Test Date (Please Check One)**

- [ ] Saturday, March 7, 2015 @ 12:00 noon
- [ ] Saturday, April 11, 2015 @ 12:00 noon
- [ ] Saturday, May 2, 2015 @ 12:00 noon
- [ ] Saturday, May 16, 2015 @ 12:00 noon
- [ ] Saturday, June 6, 2015 @ 12:00 noon
- [ ] Saturday, June 27, 2015 @ 12:00 noon

**PLEASE NOTE THE START TIME FOR EACH TEST DATE**

The information on this form has been provided by me and is true and complete to the best of my knowledge. I agree to provide proof of any information if it is requested. I understand that false/or misleading information may lead to loss of course credit, loss of tuition and fees paid, dismissal from KCC and/or criminal action.

3. [ ] I have read the above statement and agree.

4. **Payment**

- [ ] Credit/Debit Card – Please fill in all areas of the following form.

<table>
<thead>
<tr>
<th>Amount to charge: $</th>
<th>Card Type:</th>
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</thead>
</table>

<table>
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<tr>
<th>Card Number:</th>
<th>Expiration Date:</th>
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<tr>
<th>Cardholder’s Name:</th>
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</table>

For Office Use Only

For Customer Service Only - $45 Application Fee

Please deposit by applicant name to Account #04-0701-159900-834
MCOLES
PRE-ENROLLMENT
FITNESS TEST

**MALES**

<table>
<thead>
<tr>
<th>AGE GROUP</th>
<th>VERTICAL JUMP</th>
<th>SIT-UPS</th>
<th>PUSH-UPS</th>
<th>½ MILE SHUTTLE RUN</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-29</td>
<td>17.5</td>
<td>32</td>
<td>30</td>
<td>4:29.6</td>
</tr>
<tr>
<td>30-39</td>
<td>16</td>
<td>30</td>
<td>30</td>
<td>4:38.2</td>
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<tr>
<td>40+</td>
<td>15.0</td>
<td>30</td>
<td>28</td>
<td>4:54.7</td>
</tr>
</tbody>
</table>

**FEMALES**

<table>
<thead>
<tr>
<th>AGE GROUP</th>
<th>VERTICAL JUMP</th>
<th>SIT-UPS</th>
<th>PUSH-UPS</th>
<th>½ MILE SHUTTLE RUN</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-29</td>
<td>11.0</td>
<td>28</td>
<td>7</td>
<td>5:35.4</td>
</tr>
<tr>
<td>30-39</td>
<td>9.0</td>
<td>19</td>
<td>7</td>
<td>5:59.1</td>
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<tr>
<td>40+</td>
<td>8.0</td>
<td>18</td>
<td>7</td>
<td>6:13.3</td>
</tr>
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</table>

In order to pass the test, candidates must score at least the minimum listed in the tables for each event. Be careful to look in the age and gender category that applies to you.

The time limit for sit-ups is 1 minute.

The time limit for push-ups is 1 minute.

The ½ mile shuttle run is 15 laps around two markers set up 88 feet apart.

A complete explanation of each even is available by visiting the MCOLES website at www.michigan.gov/mcoles.
**MCOLES Reading and Writing Test**

You Must Register on-line at www.michigan.gov/mcoles

- In the middle of the home page is a section called, “Most Requested” and within that is a link to the, “Reading and Writing Test”.

- Follow the site directions for registration. You will need a credit card to register (either your own or someone who gives you permission to use theirs). You may also register with a money order, but the registration takes longer. The cost of the test is $68.

- When you register be sure to write down or print off your **ID and Password**. You will need it to log into the test site the day of your test.

- You must bring your driver’s license or other government issued picture ID to the test. The test begins promptly at 8:30 AM in the computer lab at the Kellogg Community College Regional Manufacturing Technology Center (RMTC), located at 405 Hill Brady Road, Battle Creek, MI 49037.

- For driving directions and a campus map, go to http://www.kellogg.edu/about/maps.html

- Your results will be available online 24 hours after you complete the Reading and Writing test.

- To access your test results:
  2. Click on View the results of a completed test.
  3. Sign in using the e-mail address and password you used to log into the test. *If the proctor reset your password for you, be sure you write that new password down so you can access your results.*
  4. Print off your results and include the printout in your application packet.
Secretary of State Driving Record

The Secretary of State Driving Record can be found on our website at:

http://www.kellogg.edu/academics/academic-programs/criminal-justice/law-enforcement-police-academy/
MCOLES requires academy participants to obtain 37 hours of First Aid Training. As this training is not a direct part of academy classes, MCOLES will allow a recruit/applicant to fulfill the First Aid requirement by taking Medical First Responder Training (EMT-110) here at Kellogg Community College or its equivalent at a different institution. You can complete this requirement in three ways:

**Option 1 - Currently Licensed**
- If you currently hold a Paramedic, Emergency Medical Technician (EMT), or Medical First Responder License Issued by the Michigan Department of Health you may be exempt from all or a portion of the First Aid requirements. If you currently hold an “Emergency Response” Certificate from the American Red Cross you may be exempt from all or a portion of the First Aid requirements.
- The training director can request MCOLES to waive the First aid requirement if you already have one of the licenses/certifications listed above. Please bring your license or certificate into the criminal justice office to complete this process.

**Option 2 – Take Medical First Responder before the academy starts (out of session)**
- Complete the Medical First Responder training at Kellogg Community College or its equivalent at another institution prior to the police academy session.
- If you choose this option, you must successfully complete the class and pass the National Registry Examination prior to the beginning of the police academy. MCOLES requires the passing of the National Registry Examination to ensure that the applicant/recruit is current with up to date material. The training director cannot waive the First Aid requirement unless you have passed the National Registry Exam.
- Once you complete the class and have passed the National Registry Exam, you must apply, by mail, for your State of Michigan MFR license. The form is available online at [http://www.michigan.gov/mdch/0,4612,7-132-2946_5093_28508-47472--00.html](http://www.michigan.gov/mdch/0,4612,7-132-2946_5093_28508-47472--00.html) (Scroll down to Forms & Publications, then under the Licensing section, select the Michigan Course Completion Application Packet link).
- Once you receive your State of Michigan MFR License, please bring it to the Criminal Justice office so copies can be placed in your academy folder.
- If you complete EMT 110 but fail all attempts of the National Registry Exam, you must move to Option 3 and take EMT 110 during the academy.
  
  **NOTE:** Completing this requirement before the academy session does lower the overall credit load for the applicant during the academy.

**Option 3 – Take Medical First Responder during the academy (in session)**
- You may enroll in Kellogg Community College’s Medical First Responder Training (EMT-110) during the police academy session in either the fall or spring semesters. This class must NOT conflict with the academy class schedule.
- Taking Medical First Responder (EMT-110) during the academy ensures that you are being taught current material and best practices; therefore, MCOLES does not require you to take the National Registry Examination upon the successful completion of the class.
  
  **NOTE:** EMT 110 is a 3 credit hour class and, if taken during the academy session, it may require more time and effort during the academy session.

My choice for completing my First Aid training for the 2015-2016 Police Academy is:

- [ ] Option 1
- [ ] Option 2
- [ ] Option 3

I understand that if I do not complete the requirements for this option as listed above, I am subject to dismissal from the police academy.

<table>
<thead>
<tr>
<th>Printed Name</th>
<th>Signature</th>
<th>Date</th>
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</table>