

Internal Use Only

Name: \_\_\_\_\_  
(Print or Type)

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

Social Security Number: \_\_\_\_\_ (optional)

Time: \_\_\_\_\_

Police Officer Application Information Summary

**POLICE DEPARTMENT**

City of Elkhart



**STATEMENT OF EQUAL EMPLOYMENT OPPORTUNITY**

**The City of Elkhart is an Equal Opportunity Employer and will accept applications, hire qualified applicants, administer all terms and conditions of employment and make available all benefits and compensation of employment without regard to race, color, creed, religion, sex, national origin, disability, or age, except when such constitutes a bona fide occupational qualification necessary for proper and efficient administration of the agency.**

## INSTRUCTIONS

1. Read each item carefully.
2. This application must be typed or printed neatly in ink.
3. All items must be completed and necessary documentation included.
4. If additional space is needed, attach a supplemental page at the end of the application.
5. The completed application must be returned to:

[kristin.klimek@elkhartpolice.org](mailto:kristin.klimek@elkhartpolice.org) or

**Elkhart Police Department  
175 Waterfall Drive  
Elkhart, IN 46516  
Services Division**

## POLICY REGARDING THE APPLICANT INFORMATION SUMMARY

1. The failure to comply with instructions and policy regarding this phase of the applicant selection process may result in the rejection of the application.
2. The failure to accurately and truthfully complete this application may result in the rejection of the application.
3. The failure to return this application by the specified date may result in the rejection of the application.
4. Applications will not be accepted without complete addresses, phone numbers, and zip codes.
5. It is the responsibility of the applicant to advise or forward any changes relative to applicant's name, address, and phone number.

If you are in need of assistance in completing the application form, feel free to contact the Services Division of the Elkhart Police Department at (574) 295-7070.

# ELKHART POLICE DEPARTMENT

## Basic Requirements:

- Applicants must be at least 21 years of age when they apply and under the age of 40 years at the time of hire.
- Applicant must be a high school graduate or possess a GED.
- Applicant must be a U.S. citizen.
- Applicant cannot have any Felony convictions or convictions for Domestic Violence.
- Applicant must have or be able to obtain a valid Indiana drivers license.

I, \_\_\_\_\_ verify that I meet all of the above listed basic requirements.  
(Print or type)

\_\_\_\_\_

Signature

\_\_\_\_\_  
Date

## Procedures:

1. Submit completed application with specified certificates and documents.
2. Participate in the testing procedures including the agility test, PEP test, and written test.
3. Background investigation.
4. Oral Interview Board.
5. Truth verification.
6. Physical and psychological examinations.
7. Approval by local Pension Board.
8. Final approval by state PERF board.

**I. PERSONAL HISTORY**

- A. Name in full (last, first, middle): \_\_\_\_\_
- B. Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
- C. List all other names you have used including nicknames and maiden names. If you have ever used any last names other than your true name, list the period of time during in which it was used and the circumstances for its use. If you have ever legally changed your name, list the date, place, and the court. This information is required to assist the department in conducting the applicant's background investigation.

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

- D. Birth Date (month, day, year): \_\_\_\_\_  
Place of birth (city, state): \_\_\_\_\_

***Include a COPY of your birth certificate.*** This will be used to verify your age for statutory requirements.

- E. Are you a United States citizen? Yes \_\_\_\_\_ No \_\_\_\_\_
- F. Are you currently a certified law enforcement officer? Yes \_\_\_\_\_ No \_\_\_\_\_

**II. FAMILY HISTORY**

List all family members (living or deceased) in the following order: parents, step-parents, foster parents, guardians, brothers, sisters, spouse, children:

<u>RELATIONSHIP</u>	<u>NAME</u>	<u>PRESENT ADDRESS AND PHONE</u> (if living)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____
_____	_____	_____
_____	_____	_____

**III. RESIDENCES**

A. Present Residence:

\_\_\_\_\_ (Number) \_\_\_\_\_ (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (ZIP)

Telephone number: ( ) \_\_\_\_\_ - \_\_\_\_\_

Cell/other phone ( ) \_\_\_\_\_ - \_\_\_\_\_

E-mail address: \_\_\_\_\_

B. In chronological order, with the most current first, list all of your residences in the last five years:

<u>Dates</u>		<u>Address</u>			
From ---	To	Number	Street	City	State ZIP
_____ - _____		_____	_____	_____	_____
_____ - _____		_____	_____	_____	_____
_____ - _____		_____	_____	_____	_____
_____ - _____		_____	_____	_____	_____
_____ - _____		_____	_____	_____	_____
_____ - _____		_____	_____	_____	_____
_____ - _____		_____	_____	_____	_____

**IV. EDUCATION**

List all schools attended at the high school level and above. **Include COPIES of all transcripts, diplomas and degrees.**

	<u>Years Attended</u>		<u>Address</u>	<u>Degree / Diploma</u>
	From	To		
High Schools				
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Colleges / Universities				
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Other, Vocational, Technical, etc...				
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**V. EMPLOYMENT RECORD**

In chronological order, starting with your most recent employer, list all former and current employers. Include full-time, part-time, temporary/seasonal work, and all periods of unemployment. Present employers will be contacted prior to any appointment: make sure all telephone numbers are correct:

1. Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Name of Company: \_\_\_\_\_  
Address & ZIP code: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary \_\_\_\_\_
  
2. Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Name of Company: \_\_\_\_\_  
Address & ZIP code: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary \_\_\_\_\_
  
3. Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Name of Company: \_\_\_\_\_  
Address & ZIP code: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary \_\_\_\_\_
  
4. Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Name of Company: \_\_\_\_\_  
Address & ZIP code: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary \_\_\_\_\_

5. Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Name of Company: \_\_\_\_\_  
Address & ZIP code: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary \_\_\_\_\_

6. Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Name of Company: \_\_\_\_\_  
Address & ZIP code: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary \_\_\_\_\_

7. Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Name of Company: \_\_\_\_\_  
Address & ZIP code: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary \_\_\_\_\_

8. Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Name of Company: \_\_\_\_\_  
Address & ZIP code: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary \_\_\_\_\_

9. Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Name of Company: \_\_\_\_\_  
Address & ZIP code: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary \_\_\_\_\_

10. Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Name of Company: \_\_\_\_\_  
Address & ZIP code: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary \_\_\_\_\_

11. Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Name of Company: \_\_\_\_\_  
Address & ZIP code: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary \_\_\_\_\_

12. Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Name of Company: \_\_\_\_\_  
Address & ZIP code: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary \_\_\_\_\_

\*Copy this Page for Additional Employment History if Needed.



**VI. MILITARY SERVICE**

A. Are you registered with the Selective Service?

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

Selective Service Number: \_\_\_\_\_

B. Have you ever served in the Armed Forces of the United States?

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

Branch of Service:

Army \_\_\_\_\_

Navy \_\_\_\_\_

Air Force \_\_\_\_\_

Marine Corps \_\_\_\_\_

Coast Guard \_\_\_\_\_

National Guard \_\_\_\_\_

Dates Served: \_\_\_\_\_  
(Month, Day, Year)

Last held rank: \_\_\_\_\_

Type of Discharge: \_\_\_\_\_

C. While in the Military Service, were you ever convicted of any offense (civil or military)?

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

When? \_\_\_\_\_

Explain: \_\_\_\_\_

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

D. **Include COPY 4 of your DD214 - (Armed Services Discharge)**

**VII. DRIVER RECORD**

- A. List all vehicle operator licenses you currently hold or have held:  
Include a COPY of your current license

License Type (Oper. / Chauff / CDL)	Licensing State	License Number	Expiration Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- B. List all vehicle accidents that you have been involved in over the last five years:

Date	Location	Description
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- C. List all traffic citations you have received in the past three years:

Date	Location	Description
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- D. Has your driver's license ever been suspended or revoked?

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

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

**VIII. ARREST / FELONY / MISDEMEANOR CONVICTION RECORD**

A. Have you ever been convicted of a felony offense?

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

If yes, provide the following:

Date	Place	Charges/Disposition
_____	_____	_____
_____	_____	_____
_____	_____	_____

C. Have you ever been convicted of a misdemeanor offense?

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

If yes, provide the following:

Date	Place	Charges/Disposition
_____	_____	_____
_____	_____	_____
_____	_____	_____

D. Use this area for further clarification regarding any of the above:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

IX. **REFERENCES**

List three current references. (**Excluding relatives, current and former employers**):

1. Name: \_\_\_\_\_  
Address and ZIP code: \_\_\_\_\_  
Primary Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_  
Additional Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Occupation: \_\_\_\_\_  
How long have you known this individual? \_\_\_\_\_

2. Name: \_\_\_\_\_  
Address and ZIP code: \_\_\_\_\_  
Primary Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_  
Additional Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Occupation: \_\_\_\_\_  
How long have you known this \_\_\_\_\_  
individual?

3. Name: \_\_\_\_\_  
Address and ZIP code: \_\_\_\_\_  
Primary Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_  
Additional Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Occupation: \_\_\_\_\_  
How long have you known this \_\_\_\_\_  
individual?

## Nepotism Form

Name	Position Applied For

To comply with Indiana Code 36-1-20 regarding the employment of relatives in local government that was placed into law effective July, 1, 2012 we require the following information. Please fill out the information below and return it with your application. If **none**, please indicate so.

Relatives currently employed by City of Elkhart (include “step”, “half” & “in-law” relations) additional space is available below the signature box if needed			
<b>Name</b>		<b>Relationship</b>	
<b>Name</b>		<b>Relationship</b>	
<b>Name</b>		<b>Relationship</b>	
<b>Name</b>		<b>Relationship</b>	
<b>Name</b>		<b>Relationship</b>	
<b>Name</b>		<b>Relationship</b>	
<b>Name</b>		<b>Relationship</b>	
<b>Name</b>		<b>Relationship</b>	
<b>Name</b>		<b>Relationship</b>	
<b>Name</b>		<b>Relationship</b>	
<b>Name</b>		<b>Relationship</b>	
<b>Name</b>		<b>Relationship</b>	

I certify that all information provided on this form is true. I understand that if a job is offered the offer may be rescinded based on the information provided above in compliance with Indiana law. I further understand that any false statement made herein is sufficient reason for the City of Elkhart to rescind the employment offer or for termination of subsequent employment regardless of date of discovery.

<b>Signature of Applicant</b>	<b>Date</b>

## Applicant Checklist

Please use the following list as a guide in completing your application.

Supply COPIES of all documents (not originals unless specified\*).

- \_\_\_\_\_ Birth Certificate (copy)
- \_\_\_\_\_ **OFFICIAL** High School and College Transcripts (copies)
- \_\_\_\_\_ High School and College Diplomas (copies)
- \_\_\_\_\_ DD214 Armed Services Discharge (will read "**COPY #4**" at bottom of page)
- \_\_\_\_\_ Driver License (copy – picture side only)
- \_\_\_\_\_ **Selective Service Number** If you do not remember your SSN or have not registered with the Selective Service the following website may be of help.  
<https://www.sss.gov>

\* If you are unable to provide some of this information or if you are waiting for information that you have requested please, provide a written explanation on your application. Documents will be required before the Agility Test.

**KEEP THIS PAGE FOR YOUR RECORDS**

**GENERAL HIRING PROCEDURES**

**The following pages contain the procedures adopted by the Board of Safety of the City of Elkhart and the Elkhart Police Department. Applicants or potential applicants reviewing these procedures should keep in mind that each step outlined is a separate and distinct requirement calling for commitment on their part, and overall constitute a total process. Each step must be successfully completed in order to meet eligibility requirements.**

**It is the responsibility of each applicant to fully understand and complete each step as outlined. The Elkhart Police Department will assist each applicant as needed or requested in fully understanding all procedures and requirements. Any applicant who wishes may contact the departments Services Division by calling 574-295-7070, with questions or for further clarification of any part of this procedure.**

**FORMATION OF A HIRING POOL:**

**The Elkhart Police Department accepts applications daily. Applications may be picked from the police department or may be found online at the department website. Every attempt will be made by the police department to publicize the departments hiring process. The department will continually contact appropriate groups, organizations, and persons to assure that the widest possible group of individuals from all aspects of the community is aware of the process.**

**Upon the completion of one hiring pool the Services Division of the police department will notify the next group of applicants that has been received of the next stage of the hiring process. The Services Division will then ensure that the next 3 stages are completed. If and when an opening on the department occurs the Services Division will then ensure that the rest of the procedure is followed until the opening is filled.**

**LETTER TO APPLICANT:**

**Dear Applicant,**

**Attached you will find a copy of the hiring procedure used by the City of Elkhart, Indiana and the Elkhart Police Department. This procedure has been approved and adopted by the City and the Board of Public Safety. The purpose of this procedure is to ensure that the best qualified applicants are selected to serve as police officers with the City, and that should you become a member of the police department, you can be proud to be a part of a truly professional organization.**

**This procedure and policy take into consideration requirements by the American Disabilities Act, The Public Employees Retirement Fund, and the City of Elkhart Board of Public Safety. Also included are any optional standards adopted by the Police Departments local Pension Board under the laws of the State of Indiana.**

**The purpose of this packet is to inform you of all the steps necessary for you to successfully complete in order to be considered for hiring by the Elkhart Police Department. You will see that the process is not an easy one and can take a significant commitment on your part in addition to being time consuming for both you and the persons involved in the hiring process.**

**The City of Elkhart is an equal opportunity employer and is committed to hiring only the most qualified individuals for its Police Department. With this in mind and as you review the attached material, we wish you well in your attempt to join a professional organization and in seeking what may be for you a truly rewarding career.**

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1. APPLICATION:

**The first step in the hiring process is the written application.**

**Applications are available on the Elkhart Police Department's web site at <https://elkhartpolice.org/careers/>**

**The application is reviewed and evaluated on its content and neatness.**

**Failure to comply with instructions and policy regarding this phase of the applicant selection process, and failure to accurately and truthfully complete the application including complete addresses, phone numbers, and zip codes may result in its rejection.**

**It is also the applicant's responsibility to advise or forward any changes relative to the applicant's name, address, phone number, email address, or employment.**

**If the applicant is in need of assistance in completing the application he/she should feel free to contact the Services Division at (574) 295-7070.**

2. AGILITY TEST, PERSONNEL EVALUATION PROFILE TEST, and WRITTEN EXAM:

**Upon the completion of one hiring pool the Services Division of the police department will notify the next group of applicants that has been received of the next stage of the hiring process. This notification will be by letter. The letter will detail the time and place of the testing. All three tests will be administered on the same day.**

- **AGILITY TEST: The Elkhart Police department has adopted the Indiana Law Enforcement Academy physical fitness test as its agility test. The applicants will be tested in push ups, sit ups, vertical leap, 300 meter sprint, and 1 ½ mile run. The standards for each event will be included in the letter. A waiver or disclaimer will also be included and must be signed by the applicant and turned in on the day of testing. This disclaimer will release the city and police department from all liability should any injury occur during the agility testing process.**
- **PERSONNEL EVALUATION PROFILE TEST: The PEP test is used to gauge an applicant's ethics and attitudes towards drugs, reporting theft, socialization, customer service, employment background, absenteeism, and tardiness. The PEP test was developed by P.E. Inc. and is used by police department's nationwide. The test is graded by P.E. Inc. on a 0 to 100 point scale. A low score indicates that the applicant might be a high risk applicant.**
- **WRITTEN EXAMINATION: The written examination will measure and grade qualities and skills deemed to be necessary in good police candidates. The specific written instrument or test may vary or change from process to process taking into consideration the intent of the department and city administration to stay current with the latest standards and professional thought processes dealing with applicant selection and additionally any legal considerations deemed appropriate by the city legal department. A minimum score may be required as decided upon by the police department after considering all legal aspects and requirements.**



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**Applicants will be notified by letter as to whether they passed or failed the testing stage of the process. Those who have failed the testing phase may reapply to the police department in the next hiring pool.**

**3. BACKGROUND INVESTIGATION:**

**Those applicants who have successfully completed the testing stage of the process will undergo an extensive background investigation. Areas in this investigation will include but not be limited to verification of all information on the employment application, personal reference checks, neighborhood checks, spouse and family interviews, a credit check, and other areas that are deemed appropriate and allowable by law.**

**4. ORAL INTERVIEW BOARD:**

**It is required that each applicant personally appear before a Board of Review; Comprised of members of the Police Merit Board, and the Chief of Police and/or his designated representatives. All information pertaining to the applicant will be available for the board's consideration. Each applicant will be asked questions by the board concerning this information during their interview. In addition the board will be considering the demeanor of each applicant and his or her maturity and confidence, as well as answers to questions posed to them.**

**Following the appearance before the board the applicant will receive notification by letter indicating one of three possible board decisions:**

- 1. A conditional offer of employment will be offered to the applicant.**
- 2. The applicant will be retained on an Eligibility list to be considered for future openings.**
- 3. The applicant will be eliminated from further consideration for employment. The applicant may reapply to the department in the next hiring pool.**

**Once a conditional offer of employment is tendered to the applicant he or she will continue in the process and must complete the remaining stages before being hired by the police department.**

**5. TRUTH VERIFICATION:**

**Applicants who have been given a conditional offer must successfully complete a truth verification examination. The method of verification used by the Elkhart Police Department is the polygraph examination. The polygraph instrument is designed to identify deception by asking a series of questions and monitoring the applicant's responses. The examiner may use the application, PEP test results, background investigation, and any other investigative tool to comprise a list of questions for the applicant. The applicant will be notified by letter if he or she has successfully passed the examination.**

**KEEP THIS PAGE FOR YOUR RECORDS**

**6. PHYSICAL AND PSYCHOLOGICAL EXAMINATION:**

**Indiana state law mandates that each police applicant who receives a conditional offer of employment, and passes the truth verification examination, successfully pass a complete medical and psychological examination given by approved PERF (Public Employee Retirement Fund) physicians and psychologists. The applicant will make all arrangements to undergo the examinations and promptly notify the Elkhart Police Department Services Division of these arrangements. The costs of the examinations are covered by the local Pension Board. Once received by the department, the examinations become the property of the department. It is required that a PERF approved licensed physician and psychologist, sign off on the PERF examination booklet indicating that the applicant has met all PERF standards for employment and membership in the PERF plan. Should the examining physician or psychologist not sign the PERF booklet (indicating unsuccessful completion of the PERF examination), the applicant cannot be hired by the department.**

**7. APPROVAL BY THE LOCAL PENSION BOARD:**

**Once the signed PERF forms are received by the department from the examining physicians, the local Pension Board must also meet to sign the PERF application. The local Pension Board is also responsible for ensuring that the applicant meets any local standards or requirements adopted by the local board and the Board of Public Safety.**

**8. FINAL APPROVAL BY STATE PERF BOARD:**

**After the local Pension Board signs the PERF booklets, they are sent to the state PERF board for examination and review. The state board will then determine if the applicant is eligible, (based on physicians statements) to participate in the state PERF. They will further determine whether any excludable conditions exist that would prohibit the applicant from claiming disability pension benefits in the future. Those applicants passing the aforementioned mental and psychological examinations, and receiving endorsements from the local Pension Board and the state PERF board will be given a conditional offer of employment by the Board of Safety, and as soon as practical, be sworn in as a probationary police officer.**