APPLICATION FOR EMPLOYMENT

ENTRY LEVEL POLICE OFFICER

VILLAGE OF SOUTH HOLLAND – AN EQUAL OPPORTUNITY EMPLOYER

* Applications accepted until SEPTEMBER 12th, 2025 *

INSTRUCTIONS:

This application must be typed or neatly printed, and all signatures must be original. Complete this application accurately. Incomplete applications will be discarded. All information is subject to validation. If a question does not apply to you, indicate so by writing "DNA". If you need more room for answers, please use the continuation sheets at the end.

* ALL APPLICATION FEES ARE CURRENTLY WAIVED *

PERSONAL INFORMATION:				
Name:				_Date:
(Last)	(First)	(Middle)		
Address:		City/S1	tate/Zip:	
County:Social Secur	ity Number:		Home Phone:	()
Date of Birth: / / City	y/State/Zip of Birth:			
Height: <u>Ft. In.</u> Weight:	Lbs. Age:	_Eye Color:	Hair Color:	Sex: <u>Male / Female</u>
Are you a United States Citizen? YE	S / NO If YES, are	you Native Born or	Naturalized:	
If not malined places also details.				
If naturalized, please give details:				
List any other names or aliases you h	nave ever used (include n	naiden name):		
Email address:				
If you live with anyone at the above	e address. list their name	es and relationshin	os:	
Name (Last, First)		Relation		Occupation
Immediate Family Members - List a	II:			
Name (Last, First)	Address	-	Relation	Occupation

RESIDENCES:

Start with your current address and list all of your addresses within the last ten years.

From (month/year)	To (month/year	Address / City / State / Zip

Do you own or are you buying a home? YES / NO

Do you own or are you buying other real estate? YES / NO

If YES, provide location (Address, City/State/Zip):

EMPLOYMENT HISTORY:

Begin with your current or most recent job, Including military service. List all employment for the last ten years, including periods of unemployment

Name of Employer	From (Mo/Yr)	To (Mo/Yr)	Monthly Salary or Hourly Rate Starting: Last:			
Address	Supervisor Nam	Supervisor Name & Telephone Number:				
City / State / Zip	Reason for Leaving:					
Describe Job Duties:						
		T = 44				
Name of Employer	From (Mo/Yr)	To (Mo/Yr)	Monthly Salary or Hourly Rate Starting: Last:			
Address	Supervisor Nam	e & Telephone	Number:			
City / State / Zip	Reason for Leav	ing:				
Describe Job Duties:	I					
Name of Employer	From (Mo/Yr)	To (Mo/Yr)	Monthly Salary or Hourly Rate Starting: Last:			
Address	Supervisor Nam	Supervisor Name & Telephone Number:				
City / State / Zip	Reason for Leav	Reason for Leaving:				
Describe Job Duties:						
Name of Employer	From (Mo/Yr)	To (Mo/Yr)	Monthly Salary or Hourly Rate Starting: Last:			
Address	Supervisor Nam	e & Telephone	Number:			
City / State / Zip	Reason for Leav	ing:				
Describe Job Duties:						

Name of Employer	From (Mo/Yr)	To (Mo/Yr)	Monthly Salary or Hourly Rate Starting: Last:		
Address	Supervisor Name & Telephone Number:				
City / State / Zip	Reason for Leaving:				
Describe Job Duties:					
Name of Employer	From (Mo/Yr) To (Mo/Yr) Monthly Salary or Hourly Rate Starting: Last:				
Address	Supervisor Name & Telephone Number:				
City / State / Zip	Reason for Leav	ing:			
Describe Job Duties:					
		list and analain			
If you have employers that you do not want	contacted, please	list and explain	vny:		
Have you ever taken a pre-employment exa	m from any other (governmental ag	gency? YES / NO		
If YES, please give details (agency, date, statu	us):				
Are you currently on any eligibility lists? YES	/ NO				
If YES, please explain:					
Have you ever been rejected from an eligibil	lity list? YES / NO				
If YES, please explain:					
Have you ever been placed on an eligibility list and not hired? YES / NO					
If YES, please explain:					

If YES, please give details (posi	tion, date, location):		
Have you ever been dismissed	from a position or forced to res	sign? YES / NO	
If YES, please explain (include	employers):		
Are you or have you ever beer	n part owner, partner, or corpor	ate member of any business?	? YES / NO
If YES, please explain:			
If married, please indicate you	ried Separated Divor r wife's maidenname: of your marriage? arriage(s) (if any): Explanation		
Separation			
Annulment			
Divorce Are you paying alimony? Yes No If divorced, list former spouse residence(s):	Explain: (s) and		
CHILDREN: List children born to you, or ac	lopted by you. Include step-chile Date of Birth	dren. Place of Birth	Child's Residence
Nume		Tidee of Bitti	Location / Who With

Have you ever been employed by a Public Safety Department? YES / NO

Have you ever been named the natural father in a paternity hearing? YES / NO					
If YES, please explain:					
Are you paying child s	upport? YES / NO				
If YES, please explain:					
EDUCATION: Provide the following	information about every school you have	attended.			
<u> </u>	Name and Address of School	Course of Study	Number of Years Completed	Diploma / Degree Received?	
Elementary School					
High School					
Undergraduate College					
Graduate Professional					
Other (specify)					
	nded or expelled from school? YES / NO	,			
ıт YES, please explain:					

	-			
MILITARY: Branch of US Military:		Date inducted:	Date discharged:	
Highest rank:	Rank at discharge	e:	Type of discharge:	
Explanation of discharge:				
Ever convicted at a court-mar	tial? YES / NO			
If YES, please explain:				
Are you or have you been a m	ember of the US Reserve	e Forces or National Gu	uard? YES / NO	
			rd:	
SECURITY: Have you ever been convicted If YES, please provide details (•	gency, charge, disposit	ion, case and court docket numbers):	
		0		
Have you ever been placed or	probation? YES / NO			
If YES, please explain:				
Have you ever been required	to pay a fine in regards t	o any law enforcemen	t contact? YES / NO	
If YES, please explain:				

Have you ever been reported as a missing	person or as a runaway? YES / NO	
If YES, please explain:		
Have you been the victim of a crime? YES	/ NO	
To whom was the crime reported? (provid	e law enforcement agency and case numbe	er):
Have you ever been fingerprinted? YES / I	NO	
If YES, provide details (date, agency, purpo	ose):	
Are there any arrest warrants against you		
DRIVING RECORD: Do you hold a valid driver's license? YES / If YES, provide driver's license number and		
Driver's license number:	Expiration d	ate:
If NO, please explain:		
List all other states in which you hold or h	ave held a driver's license:	
State	Driver's License Number	Expiration Date
Have you ever been refused a driver's lice If YES, please explain:	nse in any state or country? YES / NO	

Has your driver's licer	ise ever been suspended, revok	ed, or placed on probatio	nary status? YES /	NO
If YES, please provide	details (date, agency, purpose):			
List all traffic tickets y		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Discoulity of Con-
City/State	Date	VIOI	ation	Disposition of Case
			·	
	ntact information of five profess for five years or longer who car			
Reference 1				
Name:		Address:		
Homo Phono: ()	Occupation:		Voars kr	oown:
nome mone. (Occupation		Tears ki	10W11.
How do you know this	s person?			
Deference 2				
Reference 2				
Name:		Address:		
Home Phone: ()	Occupation:		Years kr	nown:
How do you know this	s person?			
The was you who we am				
Reference 3				
Namo		Addross		
name:		Auuress:		
Home Phone: ()	Occupation:		Years kr	nown:
How do you know this	s person?			

Reference 4			
Name:		Address:	
Home Phone: ()	Occupation:	Year	s known:
How do you know this person?			
Reference 5			
Name:		Address:	
Home Phone: ()	Occupation:	Year	s known:
How do you know this person?			
I hereby certify that this application falsifications or misrepresentation	·	tely, information given is correct and tr nowledge.	rue, and there are no
I understand that omission or fals application, and/or dismissal from		on by me on this application is sufficier I be hired.	nt reason for dismissal of this
and to contact any references	given by me. I here	all information given, to receive additieby release from liability the Village all other people, businesses, and orga	of South Holland and its

Signature: ______Date: _____

Affirmative Action – Voluntary Information

Completion of information below is voluntary

We consider all applicants without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

This form is to be completed by the applicant on a voluntary basis and not for interview purposes, and is filed separately from the application. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable laws and regulations. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

Position applied for			Date	//_
REFERRAL SOURCE (please	se circle):			
Walk-in	Government Employment Age	ency	Private Employme	nt Agency
Employee	Relative		School	
Advertisement (Source):		_	Other:	
Name of person who referred y	ou (ifapplicable)			
APPLICANT INFORMATIO	ON:			
Name	rst Middle	Telephone # ()	Male / Female
Last Fir	st Middle			
AddressStreet		City	State	Zip Code
	owing Equal Opportunity Ide	ntification Grou	ps:	·
American Indian/Alaskan Native		o (White race only	-	ın American
Native Hawaiian/Other Pacific Is	slander Hispanic/Latino	o (all other races)	Asian	White
FOR ADMINISTRATIVE US	SE ONLY:			
Position Applied for: Avai	lable Not Available	Other		
Other positions considered for:				
Hired? Yes No				
Position hired for:		Dat	te of Hire:	
From the EEO job classificat	ions listed below, which one	best describes	the position filled	d (circle one)?
Officials and Managers	Sales Workers	(Operatives (semi-sl	killed)
Professionals	Office and Clerical Wor	kers i	Laborers (unskilled))
Technicians	Craft Workers (skilled)	:	Service Workers	
Notes:				
Completed by:			Date:	

AUTHORIZATION TO CONDUCT BACKGROUND CHECK

I authorize the Village of South Holland, or a reporting agency on its behalf, to conduct a background inquiry through a fingerprint check in order to verify the statements and information provided by me, included on my application, and to determine other background facts, including prior employment, criminal convictions, motor vehicle history, consumer credit record, and any and all public records to the extent permitted by law. I authorize all previous employers or other persons who have knowledge of me, or my records, to release such information to the Village of South Holland. I hereby release any individual, agency, and the Village of South Holland from all claims or liabilities whatever that may arise from the disclosure of such information.

My signature certifies that I have read, understand and agree with the above statements. Criminal convictions are not an absolute bar to employment, but will be considered with respect to the specific requirements of the job for which you are applying.

Date of Birth (for identification purposes only)			
Print Full Name_ (Please include maiden or former names, if used in the last seven years)			
(Please include maiden or former names, if used in the last seven years)			
Address			
City, State, Zip Code			
Day time phone number			
Day time phone number			
Driver's License #			
Signature	Date		

NOTE: Please complete this form and return with your completed and properly filled out application.

RESIDENCY ACKNOWLEDGMENT

acknowledge that I have read the residency requirement listed in this packet, and that if hired by the Village of South Holland Police Department, a condition of remployment with the Village is that I must reside within a twenty-mile radius of South Holland's Village Hall of municipality whose border is touched by the twenty-mile radius, within one (1) year of employment.	
My signature below certifies that I understand and agree v	with the above statement.
Signature	Date

NOTE: Please complete this form and return with your completed and properly filled out application.

TRAINING REIMBURSEMENT AGREEMENT

THIS AGREEMENT made and entered into thisday of, by		
and between the VILLAGE OF SOUTH HOLLAND (hereinafter referred to as the "Village")		
and (hereinafter referred to as the "Officer").		
RECITALS:		
WHEREAS, the Village makes a substantial investment in terms of time and money in		
providing for the training of newly hired officers to the Police Department; and		
WHEREAS, the Village is entitled to expect a reasonable return on such investment, in terms of		
the commitment and devotion to duty of the prospective officer; and		
WHEREAS, it has become more prevalent, for officers to leave the Police Department and		

NOW, THEREFORE, IT IS AGREED AS FOLLOWS:

- **1.** The Officer agrees to participate in training, which may consist of any or all of the following:
 - (a) Attendance at a state certified academy for the mandated number of weeks; and
 - (b) In-house training (on the job training).

community which has provided for their training and equipment prior to a reasonable

commitment of time.

The Officer further agrees to successfully complete such training and obtain the necessary and appropriate certification. The Officer then agrees to serve as a Probationary Patrolman, and subsequently, as a Police Officer in the Village in

any duty assignment prescribed. Said Officer does further agree to devote fulltime to the training and subsequent service and to perform all assignments in a satisfactory manner.

- 2. The Village agrees to make available to the Officer the law enforcement training set forth above, and to be responsible for and pay for all related expenses in connection therewith, including equipment and salaries on the premises while the Officer is in training, if required, and further, to provide in-house training for the Officer during those periods of time that said Officer is employed with the Village, but not attending the training academy.
- **3.** In as much as the cost and expenses related to the training and equipping of the Officer are difficult to ascertain with any degree of certainty, due to the continual change and increase in expenses, so that the cost of a breach of this Agreement by the Officer would be difficult to assess, said Officer agrees to pay the Village the sum of:

With less than 12 months of service:

\$4,000.00;

Over 12 months of service and less than 24 months of service:

\$3,000.00;

Over 24 months of service and less than 36 months of service:

\$2,000.00

not as a penalty, but as agreed upon liquidated damages, in the event that said

Officer terminates said employment with the Village during training or within the

first 36 months subsequent to taking the oath of office.

- **4.** In no event shall liquidated damages, as set forth above, be assessed if the Officer fails to satisfactorily complete the Police Academy, or terminates his or her employment during the first 36 months, due to disabling illness or injury, verified by a physician of the Village's choice.
- **5.** The exceptions as set forth in paragraph 4 above shall not apply in the event that there is substantial evidence that the Officer has been dismissed as a result of misrepresenting his or her basic qualifications for employment, or has caused his or her dismissal, failure, illness or injury in an attempt to avoid payment of liquidated damages set forth above.
- **6.** Said Officer acknowledged that he or she meets the basic qualifications for employment as set forth below:
- (a) Must be a U.S. citizen;
- (b) Must be 21 years old;
- (c) Must have successfully completed a minimum of 30 hours of college level course work at an accredited college or university;
- (d) Must have no felony convictions;
- (e) Must have a valid Illinois driver's license;
- (f) Must pass written test;
- (g) Must pass oral interview;
- (h) Must pass an extensive background investigation;
- (i) Must pass extensive medical examination;
- (j) Must pass a drug screening test;
- (k) Must comply with all requirements as set forth in the Illinois Compiled

Statutes and the Ordinances and rules of the Village of South Holland and the Rules and Regulations of the Village of South Holland Police

Department.

- **7.** Said Officer also states that the information placed on his or her formal application and given to personnel conducting any background investigation is accurate and complete to the best of his or her knowledge and belief.
- **8.** In the event that the Officer is called to active military duty, or has his or her probationary period extended for any reason whatsoever, or is granted a leave of absence during any period of time contemplated by this Agreement, the period of said Agreement shall be extended accordingly.
- **9.** This Agreement shall become effective upon Officer's official starting date and shall remain in full force and effect for 36 months following administration of the oath of office, unless extended as provided in paragraph 8 above.
- **10.** This Agreement is to be construed in accordance with the laws of the State of Illinois, and embodies the entire agreement between the parties hereto, and each party acknowledges that there are no inducements, promises, terms, conditions or obligations made or entered into other than those contained herein.

IN WITNESS WHEREOF, the parties have hereunto set their hands and seals this	
day of	
	POLICE OFFICER
	VILLAGE OF SOUTH HOLLAND
	By:
STATE OF ILLINOIS)) SS COUNTY OF COOK)	
Before me the undersigned, a No	tary Public for Cook County, State of Illinois, personally
appearedand	dhe being first duly sworn by me upon hoath,
says that the facts alleged in the foregoir	ng instrument are true. Signed and sealed thisday
of	
	Notary Public

CONTINUATION SHEET Please indicate the section heading and the question you are continuing, then complete your answer.