



## **Notification of Columbus Police Department Hiring Processes**

*Equal Opportunity Employer- Discrimination in employment because of race, religion, creed, color, natural origin, ancestry, disability, age, sex, sexual orientation, gender identity or liability for service in the Armed Forces of the United States is prohibited by City policy. In addition, the City employment policy requires compliance with national and state employment practices, laws and regulations. The City is an equal opportunity employer.*

### **Positions:**

1. Police Officer
2. Civilian Personnel

### **Processes:**

1. **Police Officer** - Offers for employment will be conditional offers subject to one or more of these requirements.
  - A. Applicants must pass a standardized written aptitude test.
  - B. Applicants must pass a standardized physical fitness test.
  - C. An oral interview board will be selected by the Chief of Police or his/her designee, and applicants will be interviewed by the board. Based on the interviews, the board will create a list, ranking the applicants they deem qualified.
  - D. Applicants must pass background investigation(s).
  - E. Applicants must pass polygraph examination(s).
  - F. Applicants must pass medical examination(s).
  - G. Applicants must pass emotional stability/psychological fitness examination(s).
  - H. Applicants must receive approval from the local and state pension boards.
  - I. Upon successful completion of all phases of the process, the applicant may be offered a position. If the applicant is offered a position, they will begin employment on a probationary period.
  - J. Upon successful completion of the probationary period, a person may be appointed to the position of Police Officer.
  
2. **Civilian Personnel** - Offers for employment will be conditional offers subject to one or more of these requirements.

- A. The Chief of Police or his/her designee will review the applications, and a list of most qualified applicants will be created.
- B. An oral interview board will be selected by the Chief of Police or his/her designee and the list of most qualified applicants will be interviewed by the board. Based on the interviews, the board will create a list, ranking the applicants they deem qualified.
- C. Applicants must pass background investigation(s).
- D. Applicants must pass polygraph examination(s).
- E. Upon successful completion of all phases of the process, the applicant may be offered a civilian position.

**Additional Information for All Process:**

All applicants who participate in the selection process who are determined to be ineligible for appointment during or after any phase of the selection process will be informed in writing that they are no longer eligible and/or have been eliminated from the selection process within 30 calendar days of the decision.

Only completed applications will be considered. Applications may be submitted in person to Human Resources, by mail, or email to [humanresources@columbus.in.gov](mailto:humanresources@columbus.in.gov) .



Dear applicant,

Thank you for your interest in a position with the Columbus Police Department. Applicants are informed of the hiring process in the attached Notice of Columbus Police Department Hiring Process document. Unless otherwise indicated, the following information outlines the adopted minimum requirements for Columbus Police Department candidates for all positions:

**Notice: Applicants who have used an illegal drug in the past two (2) years will not be considered for the position.**

1. For Police Officer Applicants only: Applicants must be at least 21 years of age.
2. For Police Officer Applicants only: Applicants must be no more than 36 years of age by date of hire to qualify for PERF.
3. Applicants must have a high school diploma or equivalent.
4. Applicants must have a valid driver's license and good driving record to allow for proper insurability.
5. Upon request, applicants must provide fingerprints that are subject to NCIC/IDACS clearance.
6. Applicants shall have no convictions that have not been expunged for operating a motor vehicle under the influence of drugs.
7. Applicants shall have no convictions that have not been expunged for operating a vehicle while intoxicated, or operating a vehicle with blood alcohol content of .08% or above.
8. Applicants shall have no felony convictions that have not been expunged.
9. Applicants shall have no convictions that have not been expunged for a misdemeanor crime of domestic violence.
10. For Police Officer Applicants only: Applicants must be able to pass the physical fitness exit standards adopted by the Indiana Law Enforcement Academy:

Test	Standard
Vertical Jump	16 Inches
One Minute Sit-ups	29
300 Meter Run	71 Seconds
Maximum Push-ups	25
1.5 Mile Run	16 Minutes 28 Seconds

Respectfully,

Jonathan L. Rohde,  
Chief of Police



## Application Form

*Equal Opportunity Employer- Discrimination in employment because of race, religion, creed, color, natural origin, ancestry, disability, age, sex, sexual orientation, gender identity or liability for service in the Armed Forces of the United States is prohibited by City policy. In addition, the City employment policy requires compliance with national and state employment practices, laws and regulations. The City is an equal opportunity employer.*

Date: [Click here to enter text.](#)

Last Name: [Click here to enter text.](#) First Name: [Click here to enter text.](#) M.I.: [Click here to enter text.](#)

Address 1: [Click here to enter text.](#)

Address 2: [Click here to enter text.](#)

City: [Click here to enter text.](#) State: [Click here to enter text.](#) Zip: [Click here to enter text.](#)

Day Phone: [Click here to enter text.](#) Cell: [Click here to enter text.](#)

Email: [Click here to enter text.](#) Social Security #: [Click here to enter text.](#)

Date of Birth: [Click here to enter text.](#) Position Applied For: [Click here to enter text.](#)

Have you ever worked for the City of Columbus? Yes  No

If yes, Name used when employed: [Click here to enter text.](#)

Department Worked In: [Click here to enter text.](#) Dates of Employment: [Click here to enter text.](#)

Is any member of your family employed by the City of Columbus? Yes  No

If yes, provide name, relation and Department: [Click here to enter text.](#)

Can you show proof of eligibility to work in the United States? Yes  No

Please complete the following list of questions. If you answer yes to any of the questions, please completely explain your answer in the space provided. Arrest information must include the offense, month and year, outcome/disposition and the law enforcement agency. Information that is omitted from this section may result in the application being discarded without notice to the candidate.

Have you ever had a conviction for operating a motor vehicle under the influence of drugs that has not been expunged?

[Click here to enter text.](#)

Have you ever had a conviction for operating a vehicle while intoxicated, or operating a vehicle with the blood alcohol content of .08% or above that has not been expunged?

[Click here to enter text.](#)

Have you had any felony convictions that have not been expunged?

[Click here to enter text.](#)

Have you ever had a conviction for a misdemeanor crime of domestic violence that has not been expunged?

[Click here to enter text.](#)

## Education

High School: [Click here to enter text.](#)

Address: [Click here to enter text.](#)

Received: Diploma  Certification of Completion  G.E.D.

College, University or Professional School:

Address: [Click here to enter text.](#)

Major/Minor Course of Study: [Click here to enter text.](#) Did you graduate? Yes  No

Type of Degree received? [Click here to enter text.](#)

## Experience

*Describe your work experience beginning with your current or most recent job. Use a space block to describe each position. Include volunteer work, if applicable. Indicate number of employees supervised. Provide an explanation of any gaps of employment. If needed, attach additional sheets, using the same format as on the application. Resumes are acceptable for the description of duties and responsibilities. All information in this section must be completed.*

**Name of present employer:** Click here to enter text.

Street/City/State/Zip: Click here to enter text.

Telephone: Click here to enter text. Job Title: Click here to enter text. Dates: Click here to enter text.

Supervisor's name: Click here to enter text.

Duties and responsibilities: Click here to enter text.

Reason(s) for leaving: Click here to enter text.

May we contact your employer? Yes  No  Later

Wage/Salary: \$ Click here to enter text. Part Time  Full Time

**Name of previous employer:** Click here to enter text.

Street/City/State/Zip: Click here to enter text.

Telephone: Click here to enter text. Job Title: Click here to enter text. Dates: Click here to enter text.

Supervisor's name: Click here to enter text.

Duties and responsibilities: Click here to enter text.

Reason(s) for leaving: Click here to enter text.

May we contact your employer? Yes  No  Later

Wage/Salary: \$ Click here to enter text. Part Time  Full Time

**Name of previous employer:** Click here to enter text.

Street/City/State/Zip: Click here to enter text.

Telephone: Click here to enter text. Job Title: Click here to enter text. Dates: Click here to enter text.

Supervisor's name: Click here to enter text.

Duties and responsibilities: [Click here to enter text.](#)

Reason(s) for leaving: [Click here to enter text.](#)

May we contact your employer? Yes  No  Later

Wage/Salary: \$ [Click here to enter text.](#) Part Time  Full Time

Comments including explanation of any gaps in employment:  
[Click here to enter text.](#)

### **Military Service**

Branch: [Click here to enter text.](#) Dates: [Click here to enter text.](#)

Rank at discharge: [Click here to enter text.](#) Type of discharge: [Click here to enter text.](#)

If other than honorable, explain: [Click here to enter text.](#)

### **Driver's License**

Issuing State: [Click here to enter text.](#) License number: [Click here to enter text.](#)

CDL Classification, if applicable: [Click here to enter text.](#)

With previous employment, within the last 2 years, have you participated in random testing for substance abuse? Yes  No

### **Other Licensure, Registrations, Certifications**

Type of license: [Click here to enter text.](#) Issuing State: [Click here to enter text.](#)

License or Certification number: [Click here to enter text.](#)

List experience, education or training you have which particularly qualifies you for the job for which you are applying.

[Click here to enter text.](#)

List clerical skills, interaction skills, organizational skills, computer skills and any other applicable skills:  
Click here to enter text.

### **Personal References**

*Please list three individuals who are not related to you and do not live with you*

Name 1: Click here to enter text.

Address: Click here to enter text.

Phone number: Click here to enter text.      Relationship: Click here to enter text.

How long have you known this reference? Click here to enter text.

Name 2: Click here to enter text.

Address: Click here to enter text.

Phone number: Click here to enter text.      Relationship: Click here to enter text.

How long have you known this reference? Click here to enter text.

Name 3: Click here to enter text.

Address: Click here to enter text.

Phone number: Click here to enter text.      Relationship: Click here to enter text.

How long have you known this reference? Click here to enter text.



I, \_\_\_\_\_, acknowledge that I have been advised and understand that my employment and/or continuation of employment by the City of Columbus Police Department is contingent upon, by not limited to, the following:

1. A complete background check that may include, but shall not be limited to investigation of my character, personal history, credit history and financial condition.
2. Verification that the application of the undersigned has not been falsified and/or no criminal record exists that has not been expunged by a court. I understand that any information gathered as a result of this waiver will be kept confidential, and will be used solely to determine my fitness as an applicant. I make this waiver knowingly and voluntarily.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date of Signature

Read the following statement carefully

I certify that the information contained in this form is correct and complete to the best of my knowledge. I realize that misrepresentation of facts is cause for rejection of my application or dismissal after appointment. I understand that final employment is contingent upon satisfactory completion of all phases of the applicant screening process. I hereby authorize and give my consent to the release of any and all background information and/or records about me, by any person, business, agency or other entity in possession of the same, to the City of Columbus Police Department, for the purpose of conducting a background check. I authorize the City of Columbus to make photocopies of this document, and such copies shall suffice in place of the original to notify persons or other entities in possession of information about me that I have freely and voluntarily agreed and consented to the matters herein. I hereby waive, release, and surrender any and all rights to claims which I may have against the City or County, or any of its officers, employees, or agents as a result of the release of such records.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date of Signature



**Columbus Police Department  
An Equal Opportunity Employer  
M/F/V/H**

*The following statistical information is required for compliance with Federal Laws. The information requested is voluntary and will remain separate from your employment application.*

**Position Applied For:**

**Department:**

**Category:**

- Exec / Sr. Lvl Officials and Mgrs.
- First / Mid Lvl Officials and Mgrs.

- Professional
- Technician
- Sales
- Office & Clerical
- Protective Services

- Craft Worker (Skilled)
- Operative (Semi-skilled)
- Labor & Helpers(Unskilled)
- Service Workers

**EEO Codes:**

Male

Female

- Non-Hispanic White
- Non-Hispanic Black
- Hispanic (Spanish Origin)

- American Indian/ Alaskan Native
- Asian or Pacific Island
- Other (Two or more)

**Are you a Veteran?**

Yes

No

**If yes, are you a Vietnam Era Veteran?**

Yes

No

**Referral Source:**

- Bulletin Board
- Walk-in
- Agency

- Advertising
- Website/Internet
- Friend/Employee

- Radio
- Other