

North Liberty Police Department

340 N. Main St•PO Box 77•North Liberty, Iowa•52317•(319) 626-5724/Fax:5743

The following application is for the position of Patrol Officer. Please make sure you complete every section and attach the requested documents. If any part of the application is missing, it may result in your disqualification from the hiring process. Please utilize the checklist included in the packet to make your submission easier.

For those unfamiliar with the North Liberty Police Department. The department was founded in 1999 and currently has 24 full-time sworn officers and two civilian employees. As of July 2020, we are housed at our new station at 340 N. Main St. The 17,000 sq ft facility is 15,000 sq ft bigger than our former location and has such amenities as full kitchen, multiple reporting stations, multiple conference rooms, a large training room, evidence area, and workout facilities. We take pride in having the latest technology and equipment to do our job. We have the overall support from our community and city leaders and members embody the spirit of community policing civil servants. We also promote this internally with having access to the best practices and training available. To see our call volume and more information on the department, our end of year power points and monthly reports can be found on the City's website at https://northlibertyiowa.org/departments/police.

Thank you for your interest in working for the North Liberty Police Department. We look forward to going through the application process with you. If you have any questions, or need clarification on any portion of the application, please contact our administrative assistant at aruffcorn@northliberyiowa.org or at (319) 626-5724.

Employment Packet Checklist

Please review this checklist to ensure that all forms and documents are property completed and included with your application. If any items are missing, the application will be considered incomplete and may be removed from the process.

Items to Be Completed by Applicant

☐ North Liberty Employment Application
☐ Complete and Sign Background Questionnaire
\square Sign the North Liberty Authorization for Release of Information and Notarize
☐ Reviewed the ILEA Requirements for Testing, both Physical and Written
Include The Following Documents
☐ Resume and Cover Letter
☐ Military Release (if applicable)
☐ Copy of Birth Certificate
☐ Current Non-DL Photograph
☐ Transcripts from High School and Post High School Institutions

MAKE SURE ALL FORMS ARE COMPLETELY FILLED OUT AND SUBMITTED

Documents can be sent via email, mailed, faxed or dropped off to:

North Liberty Police Department 340 N Main St PO Box 77 North Liberty, Iowa 52317

 $Email: \underline{aruffcorn@northlibertyiowa.org}$

Fax: (319) 626-5743

North Liberty Police Department Schedule of Examinations

1. Written Examination

The written exam is required for non-certified applicants. Applicants who have taken the P.O.S.T test within the previous eight months and have a passing score of 80% or higher can transfer their score. The four (4) part written examination consists of seventy-five (75) questions which test mathematical, reading comprehension, grammar and report writing skills, and will take no more than one hour and twenty-three minutes to complete. Applicants wanting the study guide and/or practice exam can order one from Stanard and Associates. You order these items by visiting https://applytoserve.com/Study/

2. Brief Get to Know You Interview

Candidates will meet with a three-person panel for a brief interview prior to the physical testing. Candidates will be grouped together and each will be asked a couple of questions in which they will respond to the panel.

3. Physical Agility (Fitness) Testing

These tests consist of three (3) individual sections consisting of the one-minute sit-up test, one minute push-up test, and a 1.5 mile run test. Applicants must pass all three sections of the physical agility (fitness) testing in order to continue in the selection process. Results will be given to applicants immediately. If the applicant fails any portion of the physical testing, he/she will not be allowed to continue with the employment process. (See ILEA pamphlet page attached)

4. Oral Interview

Top applicants who have passed the written examination and the physical agility (fitness) testing will be contacted by the Personnel Committee to schedule an oral interview.

5. Background Investigation

Background investigations will be conducted on the top candidates

6. Conditional Offer of Employment

The Chief of Police will make a conditional offer of employment contingent upon the application passing a physical exam (including an eye exam and hearing test), a drug screen, a psychological examination and, for non-certified candidates, agreeing to a 4-year employment contract.

Job Description

Overview

Under general direction provides law enforcement duties to the City of North Liberty.

General Duties

Include but are not limited to the following:

- A. Perform duties of police officer engaged in patrolling in the enforcement of law and the prevention of crime and disorder.
- B. Respond to the scenes of crime, emergencies or accidents to provide assistance to the public.
- C. Inform supervisor of difficult problems and situations that arise during tour of duty if assistance is required.
- D. Participate in investigations of violations of federal, state and local laws.
- E. Receive complaints or reports of emergencies and determine need for police action based on emergency of call and number of complaints received.
- F. Responsible for understanding Departmental Policy and following said policy. If unsure of policy or law in certain situations, will attempt to contact supervisor for clarification. If contact with North Liberty supervisor is not obtained, will contact Johnson County Sheriff's supervisor on duty or Coralville's police supervisor on duty for guidance.
- G. Assist in departmental training programs and policy development.
- H. Interrogate witnesses and prisoners; collect and preserve evidence; apprehend and arrest law violators; assist in preparing complaints and warrants; handle correspondence for assigned cases; appear in court to testify and present evidence.
- I. Attend scheduled training or staff meetings held by department.
- J. Report activity of work and time worked on shift or special assignment.
- K. May be assigned specialized tasks or responsibilities by the Chief or Sergeant while maintaining the rank of Police Officer.
- L. Responsible for developing and maintaining a positive working relationship with the public and officers of the Police Department.
- M. Responsible for developing and maintaining a good working relationship with members of other local law enforcement agencies.

Related Duties

Other duties may be assigned as needed.

Oualifications

Education, Experience, Knowledge and Skills: College degree and previous experience preferred. Must possess the ability to acquire, within the probationary period, the knowledge of criminal law, investigations and crime prevention methods; knowledge of rules of evidence and the laws governing custody of persons; knowledge of the capabilities and limitations of operating units in the department; knowledge of police records; the ability to analyze law enforcement problems and adapt to current situations; ability to plan and coordinate with other law enforcement officers; ability to prepare accurate and comprehensive reports; ability to operate a motor vehicle safely and efficiently.

Licenses and Certifications: Must possess a valid Iowa driver's license, be certified by the Iowa Law Enforcement Academy and maintain firearm certification under all state and federal laws.

Physical, mental and environmental requirements: Position requires physical strength and stamina to bend, run, lift, and crawl into small spaces and to restrain suspects. Must be functionally literate in written and spoken English. Position requires exposure to possibly dangerous criminals on a daily basis; exposure to seasonal temperatures; exposure to potentially hazardous chemicals and diseases.

North Liberty Police Department Benefits Package

- ➤ The current salary range is \$58,156 to \$82,430, with 12 years of service. Applicants who are current certified law enforcement officers are eligible for a lateral transfer. The City may consider buying out employment contracts.
- Paid sick leave accrued at 8 hours a month
- > Three paid personal days per year
- ➤ Paid vacation
 - 40 hours upon completion of 6 months of service
 - 80 hours upon completion of 1 year of service
 - 120 hours upon completion of 5 years of service
 - 160 hours upon completion of 10 years of service
 - After 15 years of service, an additional 8 hours per year up to 20 years-200 max
- ➤ Eleven paid holidays
- ➤ Medical/Hospitalization Insurance
 - In addition to medical insurance, the City will reimburse up to \$2,000 per year, per covered member, out of pocket medical expenses
- ➤ Dental
- ➤ Vision
- Life and long-term disability
- > Flex spending plan
- Retirement savings through Social Security and IPERS; optional 457 Plan
- > Training, uniforms, duty gear and equipment provided

EMPLOYMENT APPLICATION

THE NORTH LIBERTY POLICE DEPARTMENT IS AN EQUAL OPPORTUNITY EMPLOYER

All questions must be answered in full. Resumes are also required. PLEASE TYPE OR PRINT USING INK. FALSE STATEMENTS ON THIS APPLICATION SHALL BE CONSIDERED SUFFICIENT CAUSE FOR LACK OF FURTHER CONSIDERATION OR DISMISSAL.

(Suffix)

Drivers License Number

Place of Birth (City, County, State)

(Middle)

(First)

Name

Street Address

(Last)

City State Zip Code	Home Phone	
E-Mail Address	Cell Phone	Work Phone
Code of Iowa, Chapter 80B, IAW, FISA and ADEA require that you be 18 or over to	apply for this position.	Are you 18 or over? No
Position You Are Applying For: POLICE OFFICER		
Minimum standards for law enforcement officers set by the lowa Law Enforcement person shall be selected or appointed as a law enforcement officer unless such person or intends to become a resident upon being employed.		
Are you a citizen of the United States? Yes No Are you a resident of	of the State of Iowa?	Yes No
If the answer to either of the questions is "no", would you be willing and able to becompon offer of employment? ☐ Yes ☐ No Explain:		ent of the State of Iowa
THE FOLLOWING QUESTIONS MUST BE ANS Responses are subject to inves	stigation.	ETELY!
 In the last 10 years have you ever been discharged or suspended from any endormous for disciplinary reasons or have you been asked to resign? If so, please explain 		s □ No
2. Have you ever been convicted of a felony? If so, please complete the following	ng: Yes	S 🗌 No
Date of Conviction Crime Convicted	City &	State Where Occured
Have you ever been convicted of a lesser crime? Please include misdemean automatically mean you cannot be appointed. What you were convicted of, and a second convicted of the convicted of		
Date of Conviction Crime Convicted And Disposition	City & State Wh	nere Occurred

EMPLOYMENT RECORD

Start with your present or last job and work back to high school jobs. Include paid or unpaid, full or part-time, military, summer jobs, periods of unemployment, etc. (Please put additional employment on separate sheet.) NOTE: We may contact any previous supervisors to verify your descriptions of past duties and dates of employment.

If you are currently employed, may	we check with your present supervis	or? Ye	s No	O
A Name of employer		Supervisor's name, title and phone number		
Address of employer		Type of Business	Starting Date	Ending Date
Your job title	Reason for leaving or wanting to leave	Hours per week	Starting Salary	Ending Salary
Description of duties and responsibilities		•		
B Name of employer		Supervisor's name,	title and phone nun	nber
Address employer		Type of Business	Starting Date	Ending Date
Your job title	Reason for leaving or wanting to leave	Hours per week	Starting Salary	Ending Salary
Description of duties and responsibilities				1
C Name of employer		Supervisor's name	, title and phone nun	nber
Address of employer		Type of Business	Starting Date	Ending Date
Your job title	Reason for leaving or wanting to leave	Hours per week	Starting Salary	Ending Salary
Description of duties and responsibilities	L	1		
D Name of employer		Supervisor's name,	, title and phone nun	nber
Address of employer		Type of Business	Starting Date	Ending Date
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Description of duties and responsibilities	I			
E Name of employer		Supervisor's name,	, title and phone nun	nber
Address employer		Type of Business	Starting Date	Ending Date
Your job title	Reason for leaving or wanting to leave	Hours per week	Starting Salary	Ending Salary
Description of duties and responsibilities				

Use separate sheet for additional places of employment.

4.	Please list all addresses where you have resided in the past ten years. (Please put additional addresses on separate sheet) Street Address City State County Date: From To
	State County Date. From 10
5.	List the names and relationship of <u>any</u> relatives working for the City of North Liberty.
6.	When requesting information vital to the background check, the requesting law enforcement agency is often times required to provide the individual's sex. Please indicate your sex for this reason. Male Female
7.	Do you possess a valid driver's license? Yes No If so, the state in which issued. Date issued.
	Your name and driver's license number EXACTLY as it appears on your license Name: DL#:
9.	If you do not currently hold an Iowa driver's license, are there any reasons why you would not be eligible to obtain one?
	Yes No Explain:
1(). Have you ever been involved in a traffic accident? Yes No Has your license ever been suspended or revoked? Yes No
- `	·
	If yes to either questions, explain: (Date, location, disposition, etc.)
11	1. If you feel there is additional information about yourself regarding your skills, experience, accomplishments, etc., that would aid us in evaluating your application, please use the space below to explain.

To properly evaluate your application, we need information concerning your education, skills and trades you have learned in addition to your work record. Please answer all questions as fully as possible. We may contact schools or institutes you attended to verify the information you provide.

EDUCATION

Are you a high school gradua	te or have an equivalent GED?		what was the last grade complete the following:	eted?
☐ Yes ☐ No		II TES	s, complete the following:	
Name of High School	Location	Credits	Diploma or	Last Year
Attended	City & State	Completed	Certificate	Attended
	g/education you received.	Please estimate the nur	mber of hours of training	you received.
Name of Colleges	Location	Credits	Certificate	When
Or Universities	City & State	Completed	or Degree	Attended
Additional Technical	Location	Credits	Certificate	
or Military Training	City & State	Completed	or Degree	

BACKGROUND CHECK

To assist in the collection of background information necessary for the selection process, please complete the following:

Give your full legal name (First, Middle, Last).						
2. Are there any other names you are known as (please include maiden name, previous married names, or names prior to a legal name change)? Please state when and under what circumstances.						
3. Are you a veteran of United States Military Service?	If so, what branch of Service?					
Yes No						
Date of Enlistment:	Date of Discharge:					
Type of Discharge:	If less than honorable, please explain.					

PERSONAL REFERENCES: Name: Occupation Years Known Address Telephone					
Name: Occupation Years Known Address Telephone	12. List special interests or a	ny honors or achievements rec	eived during the past five (5)	years:	
Name: Occupation Years Known Address Telephone					
Name: Occupation Years Known Address Telephone					
Name: Occupation Years Known Address Telephone					
Name: Occupation Years Known Address Telephone					
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Name: Occupation Years Known Address Telephone					
Name: Occupation Years Known Address Telephone	PERSONAL REFE	RENCES:			
The facts set forth above in my application for employment are true and complete. I authorize my former employers and educational institutions to give any information they may have regarding me, unless otherwise specified. I also hereby release them and their organizations from all liability for any damage whatsoever for issuing this information. I understand that if employed, false statements or omissions of information requested on this application shall be considered sufficient cause for dismissal. Signature			Years Known	Address	Telephone
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FOR OFFICE/INTERVIEW USE ONLY 1. Interview, no offer	institutions to give any in organizations from all liab	formation they may have re ility for any damage whatso	egarding me, unless other ever for issuing this inform	wise specified. I also here ation. I understand that if e	by release them and their
1. Interview, no offer				Signature	
1. Interview, no offer	FOR OFFICE WARE	E ONLY			
2. Interview, offer	1. Interview, no offer		able to contact	7. Other	
	2. Interview, offer	5. No interview, no	longer available/interested	ons	11

Background Questionnaire

Are you an Iowa certified peace officer?	☐ Yes ☐ No If yes,	dates you attended the a	academy	
Are you an out-of-state licensed peace office	cer? □ Yes □ No If	yes, name of agency		
Address, City, State, Zip				
Current Status of Peace Officer License/Ce	rtificate:			
☐ Valid/Active	□ Lapsed	☐ Surrendered	☐ Ineligible	
☐ Suspended	□ Revoked	☐ Other		
Have you tested for other agencies?		□Yes	□No	
If yes, which department(s)?				
Did you take the: Post-test □Yes	□ No	Physical: □Yes	□ No	
Did you pass the Post-test □Yes	□No	Physical: □Yes	□ No	
Have you had any contact with North Liberty PD? □Yes □ No				
Has anyone in your family had contact with the department? Yes □ No				
Reason for Contact?				
_				
Has anyone in your family been charged	with a crime?	□ Yes	□ No	
If Yes, Who and What Was the Charge				

Parent and Sibling Information (please use another piece of paper if necessary): Relationship: Street Address: Zip Code:___ _____ State: _____ City:_____ Name: Relationship: Street Address: City:_____ State: ____ Zip Code: Name: Relationship:_____ Street Address: State: _____ Zip Code: Name: ______Relationship: _____ Street Address: City:_____ State: _____ Zip Code: Name: Relationship: Street Address: City:_____ State: ____ Zip Code:_____ Relationship: Street Address: State: Zip Code: _____ Name: Relationship: Street Address: State: Zip Code: _____

Individuals You Have Lived with Over the Last Five Years (do not include family members). If Necessary, Use Another Piece of Paper.

Name:		Phone:		
Street Address:				
City:	State:	Zip Code:		
Name:		Phone:		
City:		Zip Code:		
Name:		Phone:		
City:		Zip Code:		
Name:		Phone:		
	State:			
Know Any Officers in J	the North Liberty Police Control of the North Liberty?	☐ Yes	□ No	
Do you have social med List All Accounts:	dia accounts?	□ Yes	□ No	
Why do you want to b	e a police officer for Nor	th Liberty?		

Signature Date

AUTHORIZATION AND RELEASE

I hereby certify that the answers and information given on this form and accompanying documents are true and correct. I agree to submit to a pre-placement/post-offer physical examination before hiring and/or anytime after hiring, if required, at the City's expense. I hereby acknowledge the North Liberty Police Department is notifying me of intent to conduct drug or alcohol testing in connection with my employment or workers compensation benefits.

I consent to the North Liberty Police Department retaining outside investigators, credit reporters, doctors, pathologists, investigators, labs, etc., to conduct this testing and/or investigation. I hereby authorize all corporations, employers, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county and federal courts and agencies, military services and any other persons to release all information they may have about me, including criminal and driving records. I release any and all of the above mentioned parties from any liability that may arise from such an investigation.

By my signature below, I authorize the North Liberty Police Department to obtain a Consumer Credit Report and/or a background report on me. This authorization is valid for purposes of verifying information given pursuant to employment or any other lawful purpose covered under the Fair Credit Reporting Act (FCRA).

It is understood that any information obtained may be used by the North Liberty Police Department and the City of North Liberty in determining my fitness for employment with the North Liberty Police Department.

By signing this application, I indicate my awareness that false statements or failure to disclose certain information may disqualify me for employment, or, if employed, may result in dismissal. This authorization is valid in original or copy form.

Applicant's Name	
Current Street Address	
City, State, Zip Code	
Driver's License #	State
	nessed in the presence of a Notary Public) /search/notary/search.aspx
Date:	
Notary Signature:	
Notary Position:	
	Signature of Applicant (Legal Name) DO NOT PRINT
Notary Public Imprint Seal Here	Other Names You Have Been Known As

NORTH LIBERTY POLICE DEPARTMENT AUTHORIZATION FOR RELEASE OF INFORMATION

NAME:	ADDRESS:_	_
PHONE #:	Driver's License #:	CELL PHONE #:
bearing this release to you to release such in all records, or any pa Department, whether give my consent for a provide full and free background investigating intent to provide accounts of a record, my background criminal history recounts of a record, whether rephave had an interest, and any internal affa	o obtain any information in your files per aformation upon request of the bearer. If art thereof, concerning myself, by and to a said records are of public, private, or confull and complete disclosure. I reiterate access to the background and history of ation that may provide pertinent data for east to personnel information, however person of any and all public and private infined and reputation, my military service reads, including any arrest records, any infined resenting me or another person in any capattendance records, polygraph examinat	epresentative of the North Liberty Police Department retaining to my employment records and I hereby direct do hereby authorize a review of and full disclosure of any duly authorized agent of the North Liberty Police onfidential nature. The intent of this authorization is to and emphasize that the intent of this authorization is to my personal life, for the specific purpose of pursuing a the North Liberty Police Department. It is my specific ersonal or confidential it may appear to be. Formation that you may have concerning me, my work ecords, educational records, my financial status, my formation contained in investigative files, efficiency records or recollections of attorneys at law, or other ase, either criminal or civil, in which I presently have, or ions, Minnesota Multi-Personality Inventory (MMPI), ng any files which are deemed to be confidential, and/or
information requeste I hereby release you, including its officers for damages of whate compliance with this to release such inforn Department regardle organization requesti if you refuse to discle	d, including any liability or damage pursuas the custodian of such records of (prince, employees, or related personnel, both in ever kind, which may at any time result authorization and request to release information upon request of the duly accredites of any agreement I may have made wing the information pursuant to this releases the information requested.	
employment, I agree all claims and liabilit whether or not to em	to hold the North Liberty Police Depart y associated with my application for em ploy me with the North Liberty Police D	ment, its agents and employees harmless from any and ployment or in any way connected with the decision Department. I understand that should information of a n, such information may be turned over to the proper
I understand my righ access and disclosure used by the North Li A photocopy or FAX	e of records, and I waive those rights wit berty Police Department in conjunction	as an original thereof, even though the said photocopy
I agree to pay any an listed on this form.	d all charges or fees concerning this requ	e, you may contact me at the address listed on this form. uest and can be billed for such charges at the address
-	claims, damages, losses and expenses, ir	his request is presented and his agents and employees, acluding reasonable attorney's fees, arising out of or by
Signature		_Date



IOWA LAW ENFORCEMENT ACADEMY PHYSICAL TESTING STANDARDS

The Iowa Law Enforcement Academy Council, in recognizing the importance of physical fitness in job performance, established the physical test regimen as a pre-employment standard effective February 15, 1993. Provisions were modified and effective August 6, 2020.

No person can be selected or appointed as a law enforcement officer without first successfully passing all of the elements of this test, as prescribed in 501 IAC 2.1(6), adopted pursuant to Section 80B 11(5), Code of Iowa)

Upon entry into the Academy, every recruit will be given the same test as an assessment for training purposes and to ensure that each recruit can undergo the physical demands of the Academy without undue risk of injury. If, at the time of entrance to the Academy, an officer does not meet minimum standards, he or she will not be admitted.

The physical fitness test established by the Council consists of three events:

1. 1 Minute Push-Up Test

The push-up event measures the endurance of the chest, shoulder, and triceps muscles. Recruits will have one minute in which to do as many push-ups as they can.

2. 1 Minute Sit-Up Test

The sit-up event measures the endurance of the abdominal and hip-flexor muscles. Recruits will have one minute to perform as many sit-ups as they can.

3. 1.5 Mile Run

The 1.5mile run is used to assess your aerobic fitness and your leg muscles' endurance. They must complete the run without any physical help. They are being tested on their ability to complete the course in the shortest time possible. Although walking is authorized, it is strongly discouraged.

STANDARDS

All recruits are required to meet the standards of the 40th percentile for each age and sex group.

Event	Age Group Repetitions/ Run Time											
	M	F	M	F	M	F	M	F	M	F		
	<20-29	<20-29	30-39	30-39	40-49	40-49	50-59	50-59	60-65	60-65		
PU	29	15	24	11	18	9	13	12*	10	5*		
SU	38	32	35	25	29	20	24	14	19	6		
1.5M Run	12:51	15:26	13:36	15:57	14:29	16:58	15:26	17:54	16:43	18:44		
*Females in excess of 49 years of age may conduct pushups on their knees.												



IOWA LAW ENFORCEMENT ACADEMY PHYSICAL TESTING STANDARDS

TEST ADMINISTRATION

At the beginning of each physical test, the grader will provide the following directions:

1 Minute Push-Up Test

On the command 'get set,' assume the front leaning rest position by placing your hands where they are comfortable. Your feet may be together or up to 12 inches apart. When viewed from the side, your body will form a generally straight line from your shoulders to your ankles. On the command 'go,' begin the push-up by bending your elbows and lowering your entire body as a single unit until your upper arms are parallel to the ground. Then, return to the starting position by raising your entire body until your arms are fully extended. Your body must remain rigid in a generally straight line and move as a unit while performing each repetition. If you fail to keep your body generally straight, to lower your whole body until your upper arms are parallel to the ground, or to extend your arms completely, that repetition will not count, and the scorer will repeat the number of the last correctly performed repetition. An altered, front-leaning rest position is the only authorized rest position. That is, you may sag in the middle or flex your back. When flexing your back, you may bend your knees, but not to such an extent that you are supporting most of your body weight with your legs. You must return to, and pause in, the correct starting position before continuing. You may not rest on the ground or raise either hand or foot from the ground. You may reposition your hands and/or feet during the event as long as they remain in contact with the ground at all times. You will have one minute in which to do as many push-ups as you can. Watch this demonstration.

1 Minute Sit-Up Test

The sit-up event measures the endurance of the abdominal and hip-flexor muscles. On the command "get set", assume the starting position by lying on your back with your knees bent at a 90-degree angle. Your feet may be together or up to 12 inches apart. Another person, or object, will hold your feet or ankles. The heel is the only part of your foot that must stay in contact with the ground. Hands must remain on or about the head. On the command "go", begin raising your upper body to the up position. In the up position, elbows should touch the knees or the upper portion of the thigh. In the down position, the back must come down so that shoulder blades touch the floor. Your arms and elbows need not touch the ground. A repetition will not count if you fail to reach the up position, fail to keep your hands on your head, arch or bow your back and raise your buttocks off the ground to raise your upper body, or let your knees exceed a 90-degree angle. If a repetition does not count, the scorer will repeat the number of your last correctly performed sit-up. The up position is the only authorized rest position. You may not stop and rest in the down position. You must make a continuous physical effort to sit up. You may not use your hands or any other means to pull or push yourself up to the up position or to hold yourself in the up position to rest. You will have one minute to perform as many sit-ups as you can. Watch this demonstration.

1.5 Mile Run

The 1.5mile run is used to assess your aerobic fitness and your leg muscles' endurance. You must complete the run without any physical help. At the start, line up behind the starting line. On the command 'go,' the clock will start. You will begin running at your own pace. To run the required 1.5miles, you must complete (describe the number of laps, start and finish points, etc.). You are being tested on your ability to complete the course in the shortest time possible. Although walking is authorized, it is strongly discouraged. You may not be physically helped in any way (for example, pulled, pushed, picked up, and/or carried) or leave the designated running course for any reason. Note: It is legal to pace during the run as long as there is no physical contact and it does not physically hinder others taking the test.

MINIMUM STANDARDS FOR IOWA LAW ENFORCEMENT OFFICERS

- 1. Is a citizen of the United States, and a resident of the State of Iowa or intends to become a resident upon being employed.
- 2. Has reached his or her eighteenth (18th) birthday at the time of appointment.
- 3. Has a current and valid driver's license issued by the State of Iowa.
- 4. Is able to read and write the English language.
- 5. Is not addicted to drugs or alcohol.
- 6. Is of good moral character as determined by a background investigation including a fingerprint search conducted of local, state, and national fingerprint files; and has not been convicted of a felony or a crime involving moral turpitude. Definitions of moral turpitude can be found in Iowa Administrative Code, Rule 501-2.1(5).
- 7. Is a high school graduate with a diploma, or possesses an equivalency certificate which meets the minimum score required by the State of Iowa as determined by the State Department of Public Information.
- 8. Has uncorrected vision of not less (worse) than 20-100 in each eye, corrected to 20-20; and has normal color vision as determined by an examining physician.
- 9. Has normal hearing in each ear as determined by an examining physician.
- 10. Meets the physical requirements necessary to fulfill the responsibilities of a law enforcement officer.
- 11. Is not by reason of conscience or belief be opposed to the use of force, when appropriate or necessary to fulfill duties.

12. I hereby	y certify that, to	o the best of m	y knowledge,	I fulfill the Mi	inimum Standa	ards for Iowa
Law En	forcement Off	icers.				

Signature of Applicant

Date

In addition to the foregoing, all applicants must satisfactorily complete a standard written test, a physical fitness test, and an oral interview.

More information can be found at https://ilea.iowa.gov/fags/