

# PEACE OFFICER RECRUITMENT



## TORRINGTON POLICE DEPARTMENT JOB APPLICATION PACKET

Torrington Police Department exists to make the City of Torrington a great place to live by maximizing public safety for all of our citizens.

### Our Core Principles:

**Integrity:** We believe that our role in this community is built upon the public trust and we commit to live by the highest standards in our personal and professional lives.

**Care for Others:** As a collective group, we are focused on prioritizing the needs of others in our community and our co-workers. We know that this does not mean thinking less of ourselves, but more of those we serve.

**Quality of Work:** We recognize that the work we do is critically important for the success of our community and for the lives of the many individuals who depend on us in some of the most challenging moments of their lives. We endeavor to do this work at the highest level so that we can save lives, protect the innocent, and preserve justice.

**Outlook:** We acknowledge that the careers we have chosen can impact our bodies and minds in unhealthy ways. We commit to finding the positives in our work, in our co-workers, and in our community so that we can be fulfilled in our profession and make a positive impact on those we serve.



## Torrington Police Department



### **DUTIES OF A TORRINGTON PEACE OFFICER:**

- Behaves with integrity and treats members of the Torrington community in a way that preserves the public trust.
- Responds to calls for service and renders aid to citizens by maintaining the peace, supplying information, and assisting citizens.
- Enforces applicable city, state, and federal laws and ordinances by apprehending, citing, and arresting violators as appropriate.
- Investigates criminal activity, gathers evidence, interviews victims, witnesses and suspects and takes appropriate action to solve cases and bring suspects before proper judicial process.
- Investigates traffic accidents, enforces traffic and parking violations; directs traffic and assists motorists as needed.
- Serves warrants, processes, notices, summons, subpoenas, and creates records of disposition.
- Completes detailed and accurate written work including: police reports, search warrants, arrest warrants, citations, accident reports, and others as needed.
- Presents evidence and testimony in court and other hearings as required.
- Operates a police vehicle and other department equipment in a safe and responsible manner.
- Maintains a visible presence to deter and prevent crime.
- Performs foot patrols in business, residential, and school areas to acquaint themselves with different areas of our community and build productive relationships with community members.
- Acts as an ambassador for Torrington Police Department in the community and represents the department by attending and speaking at public meetings and schools to learn about community problems, and to educate and inform citizens.
- Works with community stakeholders to find creative solutions for public safety concerns and to help members of our community overcome personal challenges related to mental health and crisis.
- Presents a professional image in appearance and demeanor.
- Performs other related duties as assigned.



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## APPLICATION PROCESS

1. Applicants who **do not** have prior sworn law enforcement experience must pass a written test administered by Wyoming Peace Officer Standards & Training before being considered for this position. Entry Level Testing is conducted by appointment on most Wednesdays at 2:00 p.m.
  - a. You can schedule your test online at: <https://post.wyo.gov/>
  - b. The cost is \$35.00 payable only in cash and a valid photo ID is required. No credit cards or debit cards are accepted.
  - c. The entry level exam takes about 2 hours. The exam tests your basic skills and is made up of math, spelling, grammar, writing skills, and punctuation. It is much like a high school proficiency exam. There are no study guides for this exam. Contact Wyoming POST to schedule a testing time.
  - d. Please complete the entry level test prior to submitting your application.
2. Submit your completed application in a neatly printed or typed format prior to the posted closing date in person at Torrington Police Department, or by mail at: 436 E. 22<sup>nd</sup> Ave. PO Box 250. Torrington, WY 82240.
  - a. The following documents must be included:
    - i. Your certificate from Wyoming POST documenting your successful completion of the Entry Level Test.
    - ii. If you are a certified law enforcement officer, who is not required to take the entry level test, provide a copy of your current law enforcement certification.
    - iii. A photocopy of your Driver's License or Identification.
3. Written applications will be screened, and candidates who meet our qualifications will be invited to an Assessment Center.
4. The one-day Assessment Center will include the following:
  - a. Candidates will complete a physical fitness test based on the standards necessary to successfully participate in the Wyoming Law Enforcement Academy's Peace Officer Basic Course. (40% for each category)
    - i. These standards can be found at: <https://www.wleacademy.com/fitness-standards>
  - b. Community based interview panel.
  - c. Law enforcement interview panel.
  - d. Writing skills assessment.
  - e. Communication and de-escalation assessment.
5. At the conclusion of the assessment center the performance of applicants will be assessed and conditional job offers will be made.
6. Applicants who receive a conditional offer will complete the following:
  - a. Background Investigation
  - b. Fingerprinting and NCIC Clearance
  - c. Credit Check
  - d. Psychological Check
  - e. Physician Assessment
  - f. CVSA (Computer Voice Stress Analysis) or Polygraph assessments will be conducted as necessary.
7. Applicants who successfully complete the required elements of the conditional offer will receive a final job offer and a start date will be determined.



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## NOTICE TO ALL APPLICANTS

This packet must be completely filled out. Your answer to any particular question may not necessarily eliminate you from consideration. Failure to answer questions will result in disqualification of this application. If a particular question does not apply to you write "N/A" in the space provided. At the end of each section, additional space is given for explanation. Indicate the number of the question to which you are referring when giving any explanation. Any falsification or obvious omission on this form will result in disqualification of your application; or if discovered after employment may be grounds for discharge. This application form must be printed or typed. Look over the form completely before beginning.

Legal Name: \_\_\_\_\_ SSN#: \_\_\_\_\_  
(Last) (First) (Middle)

Current Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_  
Mo/Day/Year

Are you a U.S. Citizen? \_\_\_\_\_

List any aliases, nicknames, maiden name other than you present legal name:  
\_\_\_\_\_

## MEDICAL DATA

Please circle your answer to the following questions:

1. Have you ever been a patient in a mental hospital? Yes / No
2. Have you ever been denied insurance or employment for medical reasons? Yes / No
3. Have you ever been deferred from Military Service for medical, emotional or health reasons? Yes / No
4. Have you ever been discharged from employment or military service? Yes / No
5. Have you ever received or applied for any pension or compensation for disability or injury? Yes / No
6. Are you presently under a Doctor's care for any condition? Yes / No
7. Do you have any injuries or disabilities that would prevent you from successfully completing the requirements of this position? Yes / No
8. Explain any yes answers 1 through 7 giving the name of the doctor who treated you, dates, and location:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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## VEHICLE OPERATION INFORMATION

Answer each question below:

1. Do you hold a valid driver's license? Yes / No
  - a. If yes, what state? \_\_\_\_\_
  - b. License Number \_\_\_\_\_
2. Have you had a driver's license from other states in the past ten years? Yes / No
  - a. If yes list state and dates held on line 6 below.
3. Have you received a traffic citation any place? Yes / No
  - a. If yes, complete the following. If more space is needed use additional sheet(s)

DATE	CHARGE	CITING AGENCY	DISPOSITON/PENALITY

4. Has your driver's license ever been suspended, revoked, or restricted? Yes / No
  - a. If yes, explain on line 6 below.
5. Have you ever been the driver of a vehicle involved in a motor vehicle crash, minor or major? Yes / No
  - a. If yes, explain on line 6 below and include date, location, and nature of crash.
6. Explanations of yes on items 1-5 above:

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## CRIMINAL HISTORY / COURT ACTIONS

Answer each question below:

1. Have you ever been convicted by any court of any crime? Yes / No
  - a. If yes, complete the following:
  - b. If more space is needed use additional sheet(s) labeled "Arrest Record/Court Actions."

DATE	LOCATION	CHARGE	DISPOSITON/PENALITY

2. Are you currently a party to any civil court action? \_\_\_\_\_



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3. Is there any criminal court action or investigation pending against you? \_\_\_\_\_
  4. Have you ever applied for and been denied bond or had one revoked? \_\_\_\_\_
  5. Have you ever sued anyone? \_\_\_\_\_
  6. Explanations of yes items 1-5 of arrest record/court actions:

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## **USE OF ILLEGAL OR CONTROLLED SUBSTANCES**

Answer each question below:

1. Have you ever used Marijuana? Yes / No
  - a. If yes, number of times: \_\_\_\_\_
  - b. If yes, list the last time used: \_\_\_\_\_
2. Have you ever used other controlled substances/narcotics without a doctor's prescription? Yes / No
  - a. If yes, indicate what type of controlled substance(s):  
\_\_\_\_\_
  - b. If yes, when did this occur:  
\_\_\_\_\_
  - c. If yes, circumstances surrounding each use: \_\_\_\_\_  
\_\_\_\_\_

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## **EDUCATION**

Last High School attended: \_\_\_\_\_ Dates: \_\_\_\_\_

Address: \_\_\_\_\_

Did you graduate from High School? Yes / No

Do you have a GED certificate? Yes / No



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College Attended: \_\_\_\_\_

Dates Attended: \_\_\_\_\_

Degree Earned: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

List other pertinent job related courses or training. Provide name and location of each school, dates attended, and subject studied. Attach additional sheets if necessary.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## MILITARY SERVICE

1. Enter information for each enlistment, appointment or period of active duty:

Date Entered	Date Separated	Type of Discharge	Branch of Service	Rank at Separation	Highest Rank Held

Military Service Number: \_\_\_\_\_

2. Were you rejected for military service, separated or discharged for any reason other than completion of normal term of service? Yes / No

3. Were you ever subject to military discipline? (Court Martial, Article 15, etc.) Yes / No

4. Explain any yes answer in items 2 and 3:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**EMPLOYMENT AND FINANCIAL SUMMARY**

1. Have you ever been dismissed from Employment? Yes / No
  - a. If yes please explain: \_\_\_\_\_
2. Have you ever applied for or collected unemployment compensation? Yes / No
3. Have you ever applied for or collected workman’s compensation? Yes / No
4. Have you ever filed for bankruptcy? Yes / No
5. Have you ever been subject to wage garnishments through your employer? Yes / No
6. Have you ever applied for a position with any other law enforcement agency? Yes / No
  - a. If yes what agencies: \_\_\_\_\_

Starting with the date you left high school, accurately account for all periods of employment and unemployment in date order, including your present employer and all seasonal, temporary, or part-time jobs you have held while furloughed or laid off from your permanent job.

**EMPLOYMENT INFORMATION**

Employer					Positon Held		
Address, City, State, Zip							
Supervisor & Phone Number					May we contact? Yes/No		
Co-Worker & Phone Number					May we contact? Yes/No		
Starting Salary		Per		Last Salary		Per	
From Mo/YR				To Mo/YR			
Tasks							
Reason for Leaving							





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**EMPLOYMENT INFORMATION CONTINUED**

Employer					Positon Held		
Address, City, State, Zip							
Supervisor & Phone Number					May we contact? Yes/No		
Co-Worker & Phone Number					May we contact? Yes/No		
Starting Salary		Per		Last Salary		Per	
From Mo/YR				To Mo/YR			
Tasks							
Reason for Leaving							

Employer					Positon Held		
Address, City, State, Zip							
Supervisor & Phone Number					May we contact? Yes/No		
Co-Worker & Phone Number					May we contact? Yes/No		
Starting Salary		Per		Last Salary		Per	
From Mo/YR				To Mo/YR			
Tasks							
Reason for Leaving							



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**EMPLOYMENT INFORMATION CONTINUED**

Employer					Positon Held		
Address, City, State, Zip							
Supervisor & Phone Number					May we contact? Yes/No		
Co-Worker & Phone Number					May we contact? Yes/No		
Starting Salary		Per		Last Salary		Per	
From Mo/YR				To Mo/YR			
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Employer					Positon Held		
Address, City, State, Zip							
Supervisor & Phone Number					May we contact? Yes/No		
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Starting Salary		Per		Last Salary		Per	
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Reason for Leaving							



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**EMPLOYMENT INFORMATION CONTINUED**

Employer					Positon Held		
Address, City, State, Zip							
Supervisor & Phone Number					May we contact? Yes/No		
Co-Worker & Phone Number					May we contact? Yes/No		
Starting Salary		Per		Last Salary		Per	
From Mo/YR				To Mo/YR			
Tasks							
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Employer					Positon Held		
Address, City, State, Zip							
Supervisor & Phone Number					May we contact? Yes/No		
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Starting Salary		Per		Last Salary		Per	
From Mo/YR				To Mo/YR			
Tasks							
Reason for Leaving							

If additional pages are needed, please copy, print, and attach in order.



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## RESIDENCES

Begin with your current address and work back. List all since age 16. Please use complete addresses. Attach additional sheets labeled "Residences" if necessary.

From Mo/YR	To Mo/YR	Street Address	City	State	Zip Code

## REFERENCES

List 3 persons over 21 years of age you have known for over 3 years and are not relatives or previous employers.

Name	Address	Position	Phone number	Years Known

## MISCELLANEOUS INFORMATION

Please circle your answer to the following questions:

1. Do you understand the risks of this position, including the exposure to dangerous people and circumstances, and are you willing to accept them? Yes / No
2. Do you understand that this position involves shiftwork that will require you to work overnight and on the weekends? Yes / No



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3. Do you harbor any prejudice, bias, hatred, or other strong opinion that would prevent you from treating **all** members of the Torrington Community with professionalism and respect? Yes / No
  4. Are you now or have you ever been a member of any organization or group of persons which engages in conduct or advocates for the overthrow, destruction, or alteration of the Constitutional form of government of the United States or of the State of Wyoming by revolution, force, violence or other unlawful means? Yes / No
  5. Are you willing to take an oath to support the Constitution of the United States and the Constitution of the State of Wyoming? Yes / No
  6. Are you willing to take a voice stress examination or polygraph (commonly referred to as a lie detector) if needed during the hiring process? Yes / No
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## PERSONAL

Married \_\_\_\_\_ Single \_\_\_\_\_ Divorced \_\_\_\_\_

Spouse or Partners Name (If applicable): \_\_\_\_\_

Children 1. \_\_\_\_\_ Age: \_\_\_\_\_

2. \_\_\_\_\_ Age: \_\_\_\_\_

3. \_\_\_\_\_ Age: \_\_\_\_\_

Mother's Name, Address & Phone: \_\_\_\_\_

\_\_\_\_\_

Father's Name, Address & Phone: \_\_\_\_\_

\_\_\_\_\_

Brother's Name, Address & Phone: \_\_\_\_\_

\_\_\_\_\_

Brother's Name, Address & Phone: \_\_\_\_\_

\_\_\_\_\_

Sister's Name, Address & Phone: \_\_\_\_\_

\_\_\_\_\_

Sister's Name, Address & Phone: \_\_\_\_\_

\_\_\_\_\_

Please attach additional sheets if necessary.



## Torrington Police Department



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### REQUIRED DOCUMENTATION

Be prepared to present the following documentation:

1. Birth certificate
2. High School Diploma or GED certificate
3. Official High School transcripts
4. Any college diplomas with official transcripts
5. Selective Service Registration form (SS Form 3A)
6. Form DD214, Separation or Release from the United States Armed Forces for each term of service
7. Valid Motor Vehicle Driver's License
8. Social Security Card

It will be necessary for you to provide the original copies of the above listed documents when requested as well as photocopies of each. All copied documents should be on 8½"X 11" paper.

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I hereby affirm that there are no intentional misrepresentations or falsifications in the forgoing statements and answers to questions. I am aware that should investigation through the FBI, other state, city and county law enforcement agencies, motor vehicle records, schools, hospitals, physicians, former employers, neighbors, etc. disclose misrepresentations or falsifications, my application shall be rejected or if already employed, my employment may be terminated.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date