

NORTH PEKIN POLICE DEPARTMENT

318 NORTH MAIN ST. NORTH PEKIN IL. 61554

DISPATCH (309) 382-3412 FAX (309) 382-6474

NORTH PEKIN POLICE APPLICATION

(PLEASE PRINT OR TYPE)

Date _____

Phone Number _____

Name _____

Last

First

Middle

Present Address _____

Height _____ Weight _____ Eye color _____ Date of Birth _____

Driver's License# _____ Has it ever been suspended or revoked _____

Have you ever been Arrested? If so, give details (date, agency, county):

(Copy of Social Security card needed if hired)

Email address _____

How often do you consume alcoholic beverages and to what degree _____

Give name, address and phone numbers of at least three References-Not related to you or former employers.

1. _____

2. _____

3. _____

VILLAGE OF NORTH PEKIN
POLICE DEPARTMENT APPLICATION FOR EMPLOYMENT

(Instructions)

PLEASE ANSWER EACH QUESTION TO THE TRUTHFULLY. AND FALSE STATEMENTS CAN CAUSE YOUR APPLICATION TO BE DISQUALIFIED. IF MORE SPACE IS NEEDED THEN ON A SEPARATE PAGE IDENTIFY THE INFORMATION BY THE QUESTION NUMBER.

QUESTIONS

1. Are you now or have you ever been under treatment for any mental or nervous order?
____yes____No
2. Are you now, or have you ever been under treatment for any of the following?
Heart trouble____High or low blood pressure____Diabetes____Epilepsy____
Hemophilia____Stroke____ If any of the above check and explain>
3. Do you have any physical disabilities which could hamper your effectiveness as a police officer?
____yes No____ If yes give details.
4. Have you ever been a member of any subversive organizations? ____Yes____No if yes give
name of organization. _____
5. Are you now or have you ever been a member of any armed forces. ____Yes____No if yes give
state branch____highest rank attained____Rank at time of
discharge____Type of discharge____(Be
Specific: Honorable, Ho, Conditions, Dishonorable, ect.)

6. Are you a member of an Armed Forces reserve unit?
If yes, is your status: ____Active____Inactive Your rank is _____
7. Education: High School Graduate____GED____
Name of high school____years attended____
8. College ____Yes____No if yes, name your Major, degree attained. _____

9. Do you have any other education that would benefit you as a Police Officer?

10. List any prior police experience you believe may be beneficial in the capacity as a Police Officer

11. Do you have a valid FOID card? Card Number _____ Expires _____

The state of Illinois requires each officer being hired to under go an intense background that includes:

1. Psychiatric /Mental Health evaluation.
2. Capable of passing the State standard power test
3. Fingerprinting
4. If you are a previous officer, a check of the Professional Conduct Database Request form must be filled out and submitted to the Illinois Law Enforcement Standards Board.
5. Verification of all information provided on the application.

Emergency and family contacts

Marital Status: _____ Married _____ Single _____ Divorced _____ Separated

Spouse' name _____ DOB _____

Dependent's Name _____ DOB _____

_____ DOB _____

_____ DOB _____

_____ DOB _____

Who to contact in case of emergency:

Name

address

phone number

Employment Experience

List each job held. Start with your Present or Last job. Include military service assignments and volunteer activities. (Exclude groups which indicate race, color, religion, sex or national origin.)

1	Employer	Dates		Work Performed
	Address	From	To	
	Job Title	Hrly. Rate/Salary		
	Supervisor	Starting	Final	
	Reason for Leaving			
2	Employer	Dates		Work Performed
	Address	From	To	
	Job Title	Hrly. Rate/Salary		
	Supervisor	Starting	Final	
	Reason for Leaving			
3	Employer	Dates		Work Performed
	Address	From	To	
	Job Title	Hrly. Rate/Salary		
	Supervisor	Starting	Final	
	Reason for Leaving			
4	Employer	Dates		Work Performed
	Address	From	To	
	Job Title	Hrly. Rate/Salary		
	Supervisor	Starting	Final	
	Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

Summarize Special Skills and Qualifications
Acquired From Employment Or Other Experience

VILLAGE OF NORTH PEKIN
POLICE DEPARTMENT
APPLICATION FOR EMPLOYMENT

RELEASE AUTHORIZATION

I, _____, hereby authorize the release of any Military, Medical, Employment, Credit, or School Records or Transcripts to the Chief of Police of the Village of North Pekin, Illinois, or his authorized representative.

I further authorize the Chief of Police of the Village of North Pekin, or his authorized representative, to investigate my character and background, and to solicit any information which may be used in evaluation of my employment potential with the North Pekin Police Department. I also authorize the investigation of any and all statements made in my application for employment with the North Pekin Police Department.

In making such authorization, I release both the contributor of any information, and the Village of North Pekin from all liability for any damage whatsoever arising therefrom, and I release both agents of the contributor and agents of the Village of North Pekin from any and all liability for any damage whatsoever arising therefrom.

Signature of Applicant

Date Signed

Signature of Witness

**Background Waiver Template from Sonya Massey Bill (SB 1953)
Effective Date January 1, 2026 Public Act 104-0158. It is
recommended to redact the Social Security number prior to
providing a copy of this waiver to an outside entity.**

CONSENT AND RELEASE FOR BACKGROUND INVESTIGATION

Acknowledgment of Consent

I, [Applicant's Name], acknowledge that I am seeking employment in a safety-sensitive field and that establishing my employment eligibility requires a thorough investigation into my background and character.

Furthermore, I acknowledge and agree that as a condition of being considered for employment with [Prospective Employer's Name] ("Employer"), or for maintaining my continued employment with the employer, it is required that I consent to a complete and thorough investigation of my background to determine whether I am a suitable candidate for the position of [Name of Job Title] with the employer.

Mandatory Background Investigation

I authorize the employer to conduct a background investigation of me, which shall include, but shall not be limited to, a:

- (1) a review of my complete employment history;
- (2) a review of my complete criminal history;
- (3) a review of driving records;
- (4) a background check with the Department of Children and Family Services;
- (5) interviews with my personal references;
- (6) a review of all internal investigation files from any previous employers;
- (7) a verification of academic credentials and licenses;
- (8) a review of my military service history, if any; and
- (9) a review of the Illinois Law Enforcement Training Standards Board's records and officer misconduct database.

Credit Check

I hereby consent to the employer obtaining and reviewing any credit and consumer reports, as permitted under the federal Fair Credit Reporting Act and local or state

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credit privacy laws, if applicable. I understand that the Fair Credit Reporting Act, 15 U.S.C. 1681, et seq., authorizes me to request a copy of any consumer credit report from the consumer reporting agency that compiled the report.

Consent to Release of Information

I hereby consent to the release of all employment records from my current and former employers, including, but not limited to:

- (1) job applications;
- (2) personnel files;
- (3) internal investigations;
- (4) separation agreements;
- (5) pre-employment evaluations;
- (6) tests;
- (7) questionnaires;
- (8) fitness-for-duty examinations; and
- (9) any other information obtained about me by the entity to whom this Consent is presented. Consent to Required Interviews and Evaluations I further agree to participate in a personal interview, testing process, polygraph examination, post-offer psychological evaluation and medical evaluation, or any combination of those examinations or tests, as determined by the employer.

Confidentiality

All information obtained by the employer under this background investigation shall be confidential and safeguarded against disclosure to all unauthorized persons as required by law. However, nothing prevents the employer from using the information obtained to evaluate my suitability for employment.

I specifically consent to the disclosure of information that may be covered by a settlement agreement or other confidentiality provision entered into with my former employers, and I waive any rights to enforce any prior confidentiality agreement against my former employer about this disclosure.

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Waiver of Privacy

I waive any right or claim to privacy in such information and consent to the disclosure of information that may be exempt from disclosure by law. I waive any right I may have to be notified by any individuals and organizations named in my

application for employment before the release of any information to the employer, including the release of information concerning any disciplinary action taken against me by former employers.

Indemnification

In exchange for this release of all of my personnel information, I, agree to release, discharge, and hold harmless any person, firm, or entity and their employees and agents that disclose information in response to receipt of this consent, from any liability for all claims, liabilities, causes of action, known or unknown, fixed or contingent, that arise from or that are in any manner connected to the disclosure of any personal information as described above. I further release and hold harmless the employer and the employer's respective personnel, employees, and agents from any liability resulting from or in connection with, the results of this background investigation concerning my fitness for employment or continued employment at the employer or the decision to hire me, not to hire me, or retain me in my position.

Signature

I agree to electronically sign this document and certify that I have read, understand, and agree to the terms and conditions set forth in this document and that this is a complete waiver under Section 10 of Employment Record Disclosure Act.

Signature_____ **Date**_____

Printed Name_____

Social Security No._____