



Dear Applicant:

The City of Logansport Police Department has an open application process. Pre-applications will be accepted anytime. Completed pre-applications will be kept on file for one (1) year. After that time, they will be considered inactive and will be destroyed. Some of the basic qualifications and selection procedures consist of but are not limited to the following:

**Mayor Chris Martin**  
(574) 753-2551  
mayormartin@cityoflogansport.org

**Deputy Mayor Jacob Pomsal**  
(574) 753-2551  
deputymayor@cityoflogansport.org

**Street Department**  
(574) 753-4610

**Mount Hope Cemetery**  
(574) 753-7082

**Fire Department**  
(574) 753-3102

**Police Department**  
(574) 753-4101

**Parks Department**  
(574) 753-6969

**Building Department**  
(574) 753-4381

**Code Enforcement**  
(574) 753-4381

**Planning & Zoning Department**  
(574) 753-7775

1. In order to be eligible to apply for appointment to the Logansport Police Department, an applicant must be a resident citizen of the United States, and must be a resident of Cass County, Indiana or contiguous county at the time of appointment.
2. Applicant must have reached his or her twenty-first (21<sup>st</sup>) birthday, but shall not have reached his or her thirty-sixth (36<sup>th</sup>) birthday as set forth by Indiana code 36-8-4-7. A person may be reappointed as a member of the department only if the person is a former member of the 1925, 1953, or 1977 fund and can complete twenty (20) years of service before reaching sixty (60) years of age as set forth by Indiana Code 36-8-4-7.
3. Applicant shall be a high school graduate as evidenced by a diploma issued by a high school accredited by the department or agency of a State authorized to accredit high schools. An equivalency diploma (G.E.D.) issued by such an accredited high school is acceptable.
4. Must possess or be able to acquire a valid Indiana driver's license.
5. A dishonorable discharge from the military service shall disqualify the applicant.
6. Applicants receiving compensation or pension benefits from military service are not disqualified from applying.
7. The applicant shall also possess the following Vision Standards: Corrected Vision – Binocular vision no worse than 20/30; worst eye vision no worse than 20/50; Uncorrected Vision – binocular vision no worse than 20/100 (with the exception for long-term successful users of soft contact lenses); Peripheral Vision – uncorrected field of vision no worse than 140 degrees in the horizontal meridian in each eye. The applicant shall also have the ability to distinguish the colors of red, green, and amber; and shall have no pathology of the eyes. (Minimum standards set forth by Indiana Law Enforcement Training Board.)
8. Applicants shall not have been convicted of a felony or domestic violence battery and have no misdemeanor convictions in the last 3 years.
9. Must be able to successfully complete both the extensive physical agility test and written aptitude examination.

12. No illegal delivery of drugs for monetary or material gain.
13. No illegal use of any type of drugs five (5) years prior to applying.
14. Applicants must be able to successfully complete the physical assessment upon the offer of employment and assignment to the Indiana Law Enforcement Academy.
15. Sign a three (3) year training agreement/employment contract (waived for ILEA certified officers.)
16. Must be willing to submit and successfully pass a pre-employment drug screen.

Any misrepresentation of the facts on the application will disqualify the applicant.

All applicants are required to assist and cooperate in obtaining past employment records, or personal history information.

**Failure to cooperate may be considered cause for disqualification.**

If it found that you have falsified your application, you will be automatically eliminated; or if employed, it may be grounds for immediate discharge.

Applications and test results become the exclusive property of the City of Logansport.

I have read and understand the above statement.

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Signature of Applicant

The Logansport Police Department will conduct testing. Any position vacated between the prescribed testing times may be filled from the eligibility list.

**The City of Logansport is an Equal Opportunity Employer**

# Logansport Police Department



## Selection Manual

## Physical Assessment

The physical assessment consists of the following five (5) components. All components must be successfully completed. An applicant who fails any component will be immediately disqualified from this process.

1. Pushups A minimum of twenty five (25) pushups must be completed.
2. Sit Ups A minimum of twenty nine (29) sit ups must be completed within one (1) minute to pass.
3. Vertical Jump The applicant must complete a vertical jump of at least sixteen (16) inches above his or her standard reach.
4. 300 Meter Run The applicant must run 300 meters in under seventy one (71) seconds.
5. 1.5 Mile Run The applicant must run/walk a one and one half (1.5) mile course in a time limit of sixteen minutes and 28 seconds (16:28).

## Written Examination

The written aptitude test is administered and scored by the Logansport Police Department Pension Board. The written test has been prepared by an independent testing agency. Applicants will be provided with a study guide for the examination prior to the test.

## Applicant Disqualification Review

Upon completion of each component in the application process, applicants will be notified of their results by mail or telephone within one week. Those applicants who do not successfully complete any of the components will be disqualified from the remainder of the current screening process and may reapply for participation in the next announced screening process.

## Applicant Notification

Those applicants who successfully pass each component of the application process will be notified of their results by mail or telephone within one week of testing. Also included in that letter will be the time and date of the next component for testing. Passing applicants will also be provided with a detailed application for employment at that time which will further assist in the

expected to take more than one-day.

4. The applicants will be rated based on their general appearance, demeanor, communication skills, and responses to the board's questions.

## Offer of Employment

1. Dependent upon Departmental vacancies, the Pension Board and the Chief of Police will select applicants from the final results of this hiring process. Those applicants selected will be given a conditional offer of employment.
2. The conditional offer of employment is based upon an applicant's ability to successfully complete a physical and psychological examination. Qualified persons in their respective field of practice will conduct these examinations.
3. If an applicant is unable to successfully pass either of these two examinations, the conditional offer of employment will be withdrawn.
4. Upon successful completion of these two examinations, the results will be made available to the Pension Board.
5. If recommended by the Pension Board, the applicant's completed information packet will be forwarded to the Public Employee Retirement Fund (PERF) Board for review.
6. If approved by the PERF Board, the Chief of Police may then present the name of the applicant to the City Board of Public Works and Safety with the recommendation that the applicant be hired as a probationary officer.

## BASIC ESSENTIAL JOB FUNCTIONS FOR POLICE OFFICERS

- Administers field sobriety tests
- Analyzes investigation/case information
- Answers media questions
- Assesses accident scene
- Assists citizens
- Assumes custody of arrested persons
- Attendance
- Attends training sessions
- Collects job relevant data/information
- Communicates in writing
- Conducts building searches
- Conducts interrogations
- Conducts preliminary investigations
- Conducts surveillance
- Contacts outside agencies for assistance
- Coordinates job-related events
- Directs traffic
- Documents crime/accident scenes
- Establishes positive police-community relations
- Follows criminal law and procedures
- Gathers and collects evidence
- Handles hostile contacts
- Informs appropriate personnel of events
- Interacts with other agencies
- Interacts with other department personnel
- Maintains equipment and work area
- Maintains grooming and attire
- Maintains personal physical fitness
- Maintains safety
- Monitors radio
- Observes for and attends to hazardous conditions
- Operates firearms
- Orally communicates with other members of the Department
- Operates motor vehicles
- Participates in meetings
- Participates in neighbor programs
- Patrols in vehicle
- Performs related duties as assigned
- Performs crowd control duties
- Performs parking control duties
- Performs traffic enforcement duties
- Prepares for duty
- Prepares reports
- Provides positive role model
- Punctuality
- Pursues fleeing suspects
- Receives and processes citizens' complaints
- Receives/processes non-emergency telephone calls
- Responds to critical incidents
- Responds to injured persons
- Responds to radio runs/provides backup
- Serves as field training officer
- Serves search and arrest warrants
- Speaks to groups
- Testifies in court
- Types letters, reports and other documents
- Uses informants
- Uses radio

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## ENVIRONMENTAL FACTORS THAT AFFECT JOB FUNCTIONS FOR POLICE OFFICERS

The essential job functions for a police officer are performed in and affected by the following environmental factors. An officer must:

1. Operate both as a member of a team and independently at incidents of uncertain duration.
2. Face exposure to infectious agents such as hepatitis B or HIV.
3. Perform complex tasks during life-threatening emergencies.
4. Work for long periods of time, requiring sustained physical activity and intense concentration.
5. Face life or death decisions during emergency conditions.
6. Tolerate exposure to grotesque sights and smells associated with major trauma.
7. Make rapid transitions from rest to near maximal exertion without warm-up periods.
8. Use firearms, self-defense equipment and body armor.
9. Be able to physically protect him/herself.
10. Be able to communicate with people effectively.



**Logansport Police Department  
Pension Board  
Physical Agility Test Medical Waiver**

**Mayor Chris Martin**  
(574) 753-2551  
mayormartin@cityoflogansport.org

**Deputy Mayor Jacob Pomsal**  
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I, Doctor \_\_\_\_\_, a Board Certified  
Physician in the State of Indiana, do hereby attest that I know of no known medical  
or physical condition(s) that would prevent the applicant,  
\_\_\_\_\_, from participating in the Logansport Police  
Department's Pension Board physical agility test.

\_\_\_\_\_  
Physician's Signature & Date

\_\_\_\_\_  
Applicant's Signature & Date



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I, the undersigned, will not hold the City of Logansport, the Logansport Police Department or the Logansport Pension Board Liable for any injuries or difficulties incurred while participating in the Physical Agility Test prior to being accepted as an applicant for the Logansport Police Department.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Time and Date

\_\_\_\_\_  
Witness

Authority of \_\_\_\_\_

Travis Yike  
Chief of Police  
Logansport Police Department





# PRE-APPLICATION FOR EMPLOYMENT FOR THE LOGANSPORT POLICE DEPARTMENT

## An Equal Opportunity Employer

**TO APPLICANT:** You may request any needed accommodation to participate in the application process. Please furnish complete and accurate information. Applications will be verified. Incomplete applications will not be considered. In addition to completing this form, you may attach a resume detailing your professional, educational, and social activities. If there are any other experiences, skills, or qualifications which you feel would especially fit you for the work with the department, you may attach an additional sheet. Applicant is responsible for notifying this office of any changes of address or telephone number.

DATE: \_\_\_\_\_ POSITION(S) APPLIED FOR: \_\_\_\_\_

### I. PERSONAL DATA

NAME \_\_\_\_\_ SOCIAL SECURITY NO. \_\_\_\_\_  
Last First Middle Initial

PRESENT ADDRESS \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_  
Number Street City State Zip Code

Have you ever been previously employed by the city? \_\_\_\_\_ If yes, in what department?

\_\_\_\_\_ Name of Supervisor \_\_\_\_\_

What date are you available for work? \_\_\_\_\_ What shifts? \_\_\_\_\_

Would you work: Full time \_\_\_\_\_ Part time \_\_\_\_\_ Specify days and hours if part time

Expected Rate of Pay \_\_\_\_\_ Date of Birth \_\_\_\_\_

### II. EDUCATIONAL INFORMATION

| School      | Name and Address of School | Course of Study | Circle highest grade completed | Did you graduate    | List diploma or degree |
|-------------|----------------------------|-----------------|--------------------------------|---------------------|------------------------|
| Elementary  |                            |                 | 5 6 7 8                        | ____ yes<br>____ no |                        |
| High School |                            |                 | 1 2 3 4                        | ____ yes<br>____ no |                        |
| College     |                            |                 | 1 2 3 4                        | ____ yes<br>____ no |                        |
| Technical   |                            |                 | 1 2 3 4                        | ____ yes<br>____ no |                        |

List any other relevant training received:

### III. WORK HISTORY

List below all present and past employment, beginning with your most recent.

|   | Company name and location               | From                      | To                        | Duties | Salary | Reason for leaving | Name of Supervisor |
|---|---|---------------------------|---------------------------|--------|--------|--------------------|--------------------|
| 1 | _____<br>_____<br>_____<br>Phone: _____ | Month _____<br>Year _____ | Month _____<br>Year _____ |        |        |                    |                    |
| 2 | _____<br>_____<br>_____<br>Phone: _____ | Month _____<br>Year _____ | Month _____<br>Year _____ |        |        |                    |                    |
| 3 | _____<br>_____<br>_____<br>Phone: _____ | Month _____<br>Year _____ | Month _____<br>Year _____ |        |        |                    |                    |
| 4 | _____<br>_____<br>_____<br>Phone: _____ | Month _____<br>Year _____ | Month _____<br>Year _____ |        |        |                    |                    |
| 5 | _____<br>_____<br>_____<br>Phone: _____ | Month _____<br>Year _____ | Month _____<br>Year _____ |        |        |                    |                    |

### IV. MILITARY SERVICE RECORD

Have you ever served in the U.S. Armed Forces?    yes \_\_\_\_\_    no \_\_\_\_\_    If yes, what branch? \_\_\_\_\_

Dates of duty:    From \_\_\_\_\_ To \_\_\_\_\_  
month       day       year               month       day       year

Rank at discharge \_\_\_\_\_

List duties in the service including special training \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### III. WORK HISTORY

List below all present and past employment, beginning with your most recent.

| Company name and location                    | From                            | To                              | Duties | Salary | Reason for leaving | Name of Supervisor |
|--|---------------------------------|---------------------------------|--------|--------|--------------------|--------------------|
| 1<br>_____<br>_____<br>_____<br>Phone: _____ | Month<br>_____<br>Year<br>_____ | Month<br>_____<br>Year<br>_____ |        |        |                    |                    |
| 2<br>_____<br>_____<br>_____<br>Phone: _____ | Month<br>_____<br>Year<br>_____ | Month<br>_____<br>Year<br>_____ |        |        |                    |                    |
| 3<br>_____<br>_____<br>_____<br>Phone: _____ | Month<br>_____<br>Year<br>_____ | Month<br>_____<br>Year<br>_____ |        |        |                    |                    |
| 4<br>_____<br>_____<br>_____<br>Phone: _____ | Month<br>_____<br>Year<br>_____ | Month<br>_____<br>Year<br>_____ |        |        |                    |                    |
| 5<br>_____<br>_____<br>_____<br>Phone: _____ | Month<br>_____<br>Year<br>_____ | Month<br>_____<br>Year<br>_____ |        |        |                    |                    |

### IV. MILITARY SERVICE RECORD

Have you ever served in the U.S. Armed Forces?    yes \_\_\_\_\_    no \_\_\_\_\_    If yes, what branch? \_\_\_\_\_

Dates of duty:    From \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year    To \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year

Rank at discharge \_\_\_\_\_

List duties in the service including special training \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

V. Are you able to perform the essential functions of the job for which you are applying with or without accommodations? \_\_\_\_\_

VI. Please answer the following questions if checked:

1. Do you have a valid Indiana driver's license? \_\_\_\_\_
2. Do you have a valid Indiana public passenger license? \_\_\_\_\_
3. Do you have a valid Indiana commercial driver's license (CDL)? \_\_\_\_\_  
If yes, what endorsements? \_\_\_\_\_
4. Have you ever been convicted of a felony? \_\_\_\_\_

**VII. PERSONAL REFERENCES**  
*(Not Former Employers or Relatives)*

| Name and Occupation | Address | Telephone |
|---------------------|---------|-----------|
|                     |         |           |
|                     |         |           |
|                     |         |           |

We offer equal employment opportunities to all persons without regard to race, color, creed, religion, age, marital or veteran's status, sex, national origin, disability or any other legally protected status.

**VIII. PLEASE READ AND SIGN BELOW**

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal, educational, or work history except where I have specifically indicated otherwise in this application. In the event that I am employed by the Logansport Police Department, I agree to comply with all of its orders, rules and regulations.

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

**APPLICANT - Do not write on these spaces  
FOR POLICE PENSION BOARD USE ONLY**

| INTERVIEW | DATE | COMMENTS |
|-----------|------|----------|
|           |      |          |
|           |      |          |