



Department of Public Safety

808 University Capitol Centre
Iowa City, Iowa 52242-5500
319-335-5022 Fax 319-335-5800

M E M O

TO: All Certified Patrol Officer Applicants
FROM: Scott Beckner, Assistant Vice President, University of Iowa Department of Public Safety
RE: REQUIREMENTS FOR THE CERTIFIED PATROL OFFICER

I am pleased that you are considering an opportunity for employment with our department. One of our functions among many is to provide law enforcement services to the greater university community. Upon successful completion of the selection process, I look forward to you becoming a member of our organization. Please take this opportunity to preview our web page: <http://police.uiowa.edu>

The following items must be provided to the University of Iowa Department of Public Safety, 200 So. Capitol St., Iowa City, Iowa, 52240, as soon as possible:

- 1) A notarized **Authorization for Release of Personal Information** form,
- 2) A copy of your **high school diploma** or certified **GED**,
- 3) A copy of your military form **DD-214** (if applicable),
- 4) A **certified** copy of your **college transcripts** (if applicable), and
- 5) Your cover letter and resume.

The next step will be that qualified applicants will be notified by the Department of Public Safety as to the scheduled date to complete a physical performance agility test, **if applicable**. Successful completion of this testing will be necessary in order to continue in the screening process for employment to this position. This required physical agility test consists of four prescribed events, timed and scored, as described in the attachment. Individuals taking the physical agility test should wear some type of loose fitting clothing and tennis shoes (sweatpants/shirts or warm-up suits are suggested).

IMPORTANT NOTE: An applicant's failure to satisfactorily meet all specified requirements or complete an event will result in disqualification.

Following will be the selection of candidates for oral interviews, after which the selected applicant must, prior to employment, satisfactorily complete the requirements of a psychological evaluation as prescribed by the Iowa Law Enforcement Academy as well as a polygraph test. Additionally, the selected applicant must complete a drug test and a medical/physical examination by a licensed physician or surgeon at his/her own expense.

It is important for applicants to report for scheduled tests at the appropriate date and time. **If an applicant fails to appear on the scheduled date and time for any test, the result will be disqualification.**

Thank you for your interest in employment with the Department of Public Safety. If you have any questions regarding these requirements or tests, please do not hesitate to contact us.

CDG/sjm

4/18

**BOARD OF REGENTS
STATE OF IOWA
REGENT MERIT SYSTEM**

Class Title: Police Officer

Class Code: 7511

Pay Grade: 313

GENERAL CLASS DESCRIPTION:

Under general supervision, patrols the university campus and outlying property in order to protect life and property. Responds to calls while on foot, on bicycle, or in a motor vehicle in order to prevent and detect law violations and apprehend violators. Maintains order in the university community through enforcement of policies of the Board of Regents and the universities. Exercises judgment in interpreting laws, ordinances, policies, and procedures. Promotes and maintains favorable university-community relations.

CHARACTERISTIC DUTIES AND RESPONSIBILITIES:

1. Patrols assigned zone by motor vehicle, bicycle, or on foot to prevent, discover, and deter the commission of crime; to enforce criminal and traffic laws and university rules and regulations; and to check the security of buildings, functioning of outdoor lighting and traffic signals, and road conditions. Monitors and directs vehicular and pedestrian traffic as required.
2. Responds to radio dispatched calls for a variety of services including investigation of alarms, animal control, assistance to motorists, building maintenance problems, domestic problems, thefts, and other acts against persons or property.
3. Investigates, reports, and records traffic violations and accidents by interviewing witnesses, measuring distances, sketching diagrams, taking photographs and conducting field sobriety tests to determine cause and fault.
4. Investigates harm, damage or threats of potential harm or damage to persons or property by interviewing witnesses and conducting visual or audio surveillance or searches; detects and collects evidence; travels to other jurisdictions to investigate crimes that occurred on university property as necessary.
5. Arrests violators or suspects by using minimum force. Processes arrested persons by taking photographs, obtaining fingerprints, and writing arrest reports; transports violators to jail.

The tasks listed under the heading of Characteristic Duties and Responsibilities are examples of the variety and general nature of duties performed by employees in positions allocated in the class. The list is descriptive only and should be used for no other purpose. It is not intended that any position include every duty listed nor is it intended that related duties cannot be required.

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6. Determines appropriate action to be taken by weighing evidence and applying knowledge of law to solve the problem and administer justice; prepares and processes documents such as citations, complaints, affidavits, and warrants.
7. Records information at scene of crime or accident by sketching diagrams, taking photographs, or taking notes. Prepares reports for use by department, university or social service agency, in court testimony or for insurance claims.
8. Testifies in court or by deposition to present information accumulated at scene and to give professional opinions for criminal justice and insurance purposes.
9. Performs rescue functions at accidents, emergencies and disasters to include directing traffic for long periods of time, administering first responder level service at the medical model level; lifting, dragging, and carrying people away from dangerous situations; and securing buildings and evacuating occupants.
10. Responds to fire and ambulance calls to direct traffic, escort fire and ambulance vehicles, and prevent crime.
11. Inspects and maintains law enforcement equipment by observing and cleaning to keep the equipment in reliable operating condition.
12. Transfers deposits between the university and banks by personal pick up and delivery to maintain security of funds.
13. Determines content for various public safety programs such as crime prevention, personal safety, playground safety, bike safety, and provides delivery to the university or community.
14. Assists other agencies in serving warrants by delivering and serving in person for timely disposition of cases, and any other assigned duties.
15. Provides advice and general information to students, staff, and campus visitors.

KNOWLEDGE, SKILLS, AND ABILITIES:

1. Knowledge of state criminal and traffic code and city ordinances; and university and departmental policy and operating procedures.
2. Knowledge of patrol, investigative, and arrest procedures.
3. Knowledge of the location of buildings and facilities, including fire and environmental emergency panels of the university and city.
4. Knowledge of location and services of various university departments and community agencies.
5. Knowledge of legal documents and processing procedures.

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6. Skill in oral communications as demonstrated by effective ability to provide general information and directions, mediate disputes, interview witnesses and suspects, testify as a witness in court, and make program presentations.
7. Skill in written communications to produce reports and documents in the English language with clearly organized thoughts using proper sentence structure, format, punctuation, and grammar.
8. Skill in administering first aid and cardiopulmonary resuscitation.
9. Skill in reconstructing accidents from interviews and physical evidence.
10. Skill in operating vehicles both day and night in emergency situations involving speeds in excess of posted limits, in congested traffic, and in unsafe conditions due to such factors as fog, smoke, rain, ice, and snow.
11. Skill in operating radios and other law enforcement equipment.
12. Skill in analyzing situations and using judgment to make appropriate decisions.
13. Ability to communicate effectively and coherently over law enforcement radio channels while initiating and responding to radio communications.
14. Ability to patrol on foot or bicycle; remain in standing or sitting position for long periods of time; pursue fleeing suspects; and perform rescue operations which may involve entering and exiting vehicles quickly, lifting, carrying or dragging heavy objects, climbing over and pulling oneself over obstacles, jumping down from elevated surfaces, climbing through openings, jumping over obstacles, ditches and streams, crawling in confined areas, balancing on uneven or narrow surfaces, and using bodily force to gain entrance through barriers.
15. Ability to use sufficient physical force in apprehension of law violators.
16. Ability to work and remain calm in stressful situations.
17. Ability to work outside in extreme weather conditions.
18. Ability to hear and see acutely during day and night time conditions.
19. Ability to enter and retrieve data from a computer terminal, personal computer or other keyboard device.

MINIMUM ELIGIBILITY REQUIREMENTS:

1. Possession of certification from the Iowa Law Enforcement Academy as a Law Enforcement Officer, or

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2. Possession of law enforcement certification in another state and successful completion of all application and examination requirements as outlined in Iowa Administrative Code 501-3.8(80B).

H:(hr/classdes)7511

REVISION EFFECTIVE: December 1, 2009

**The University of Iowa Department of Public Safety
Police Division
Background Investigation**

All statements are subject to verification and any incorrect or omissions may bar or remove you from further consideration. However, truthful statements to any item requested will not necessarily exclude you from consideration.

Personal History Statement

1. Name: _____
 First Middle Last

2. Nicknames or Aliases: _____

3. Social Security Number: _____ / _____ / _____

4. Present Mailing Address: _____
 Street & Number City

_____ State Zip Code

5. Permanent Mailing Address: _____
 Street & Number City

_____ State Zip Code

6. Telephone Number: Home: _____ Work: _____

7. Date of Birth: _____

8. Place of Birth: _____

9. Have you previously submitted an application for employment with this agency?
 [] Yes [] No Approximate Date: _____

Please list your place of residence for the last five years including phone numbers. Attach additional pages as needed.

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Relatives

All statements are subject to verification and any incorrect or omissions may bar or remove you from further consideration. However, truthful statements to any item requested will not necessarily exclude you from consideration.

All applicants must give complete information concerning their relatives. If you have been married more than once, give the requested information concerning each former husband/wife. Furnish similar information, including date and place of action, for any members of your immediate family (parents, brothers and sisters only) who have been divorced. Even though a relative is deceased, give all information requested, and indicate last residence and year of death. Include step-brothers and sisters, half-brothers and sisters, and if you or your wife/husband/domestic partner have step-parents, legal guardians or others who have raised you instead of your parents. If you are engaged to be married or contemplating marriage in the near future, complete information must be included under sections C, H, and I regarding your future husband/wife/domestic partner and future in-laws showing clearly that relationship is contemplated. Attach additional pages as needed to this document.

Please use the complete name (no initials).
Please use the complete address.

A. Father: _____
Address: _____

Phone Number: _____
Date/Place of Birth: _____
Occupation/Name and Address of Company Where Employed: _____

B. Mother: (Maiden Name) _____
Address: _____

Phone Number: _____
Date/Place of Birth: _____
Occupation/Name and Address of Company Where Employed: _____

C. Wife/Husband/Domestic Partner: _____
Address: _____

Phone Number: _____

Date/Place of Birth: _____

Occupation/Name and Address of Company Where Employed: _____

D. Children:

Name: _____

Address: _____

Phone Number: _____

Date/Place of Birth: _____

Occupation/Name and Address of Company Where Employed: _____

Name: _____

Address: _____

Phone Number: _____

Date/Place of Birth: _____

Occupation/Name and Address of Firm Where Employed: _____

Name: _____

Address: _____

Phone Number: _____

Date/Place of Birth: _____

Occupation/Name and Address of Company Where Employed: _____

E. Brothers:

Name: _____

Address: _____

Phone Number: _____

Date/Place of Birth: _____

Occupation/Name and Address of Company Where Employed: _____

Name: _____

Address: _____

Phone Number: _____

Date/Place of Birth: _____

Occupation/Name and Address of Company Where Employed: _____

Name: _____
Address: _____
Phone Number: _____
Date/Place of Birth: _____
Occupation/Name and Address of Company Where Employed: _____

F. Sisters:
Name: _____
Address: _____
Phone Number: _____
Date/Place of Birth: _____
Occupation/Name and Address of Company Where Employed: _____

Name: _____
Address: _____
Phone Number: _____
Date/Place of Birth: _____
Occupation/Name and Address of Company Where Employed: _____

Name: _____
Address: _____
Phone Number: _____
Date/Place of Birth: _____
Occupation/Name and Address of Company Where Employed: _____

G. Wives/Husbands of Brothers and Sisters:
Name: _____
Address: _____
Phone Number _____
Date/Place of Birth: _____
Occupation/Name and Address of Company Where Employed: _____

Name: _____
Address: _____
Phone Number: _____
Date/Place of Birth: _____
Occupation/Name and Address of Company Where Employed: _____

Name: _____
Address: _____
Phone Number: _____
Date/Place of Birth: _____
Occupation/Name and Address of Company Where Employed: _____

H. Father –In- Law:

Name: _____
Address: _____
Phone Number: _____
Date/Place of Birth: _____
Occupation/Name and Address of Company Where Employed: _____

I. Mother –In-Law:

Name: _____
Address: _____
Phone Number: _____
Date/Place of Birth: _____
Occupation/Name and Address of Company Where Employed: _____

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References

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Provide three (3) references who are responsible adults of reputable standing in their communities, such as homeowners, property owners, business or professional men or women including your family physician, who has known you well during the past five (5) years.

1. Complete Name: _____
Age/Sex: _____
Home Address: _____

Phone Number: _____
Occupation: _____
Number of Years Acquainted: _____
Business Address: _____

Phone Number: _____

2. Complete Name: _____
Age/Sex: _____
Home Address: _____

Phone Number: _____
Occupation: _____
Number of Years Acquainted: _____
Business Address: _____

Phone Number: _____

3. Complete Name: _____
Age/Sex: _____
Home Address: _____

Phone Number: _____
Occupation: _____
Number of Years Acquainted: _____
Business Address: _____
Phone Number: _____

Please provide us with three (3) social acquaintances of either gender.

1. Complete Name: _____
Age/Sex: _____
Home Address: _____

Phone Number: _____
Occupation: _____
Number of Years Acquainted: _____
Business Address: _____

Phone Number: _____

2. Complete Name: _____
Age/Sex: _____
Home Address: _____

Phone Number: _____
Occupation: _____
Number of Years Acquainted: _____
Business Address: _____

Phone Number: _____

3. Complete Name: _____
Age/Sex: _____
Home Address: _____

Phone Number: _____
Occupation: _____
Number of Years Acquainted: _____
Business Address: _____

Phone Number: _____

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Court Record

1. Have you ever been arrested or charged with any violation of law () No () Yes

Do not include traffic citations.

Explain: _____

2. Have you ever been convicted of a violation of law? () No () Yes

Explain: _____

3. List all traffic citations except parking tickets.

4. Have you ever been involved in a law suit? () No () Yes If yes, please explain below.

Do you have any other civil actions pending against you? () No () Yes

If yes, explain:

Note: For items, 1-4 please attach additional pages if necessary.

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Credit Record

1. Has your credit record ever been considered unsatisfactory, or have you ever been refused credit: () No () Yes

If yes, give dates, places, names or creditors and circumstances:

2. Are you indebted to anyone? () No () Yes

If yes, list all debts including amounts, creditor and address:

4. List all debts past due.

5. **Please attach a recent credit report to this form.**

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Certified Officer

Certified officer applicants from the State of Iowa and officers who have received certification from another state must provide the University of Iowa Police with the following documentation:

Previous Department Name and Address: _____

Phone Number: _____

Length of Service: _____

Supervisor: _____

Phone Number: _____

Name of Department Head: _____

Phone Number: _____

Please Attach Copies of Your Last Two Departmental Evaluations.

Law Enforcement Academy

Name and Address: _____

Phone Number: _____

Date of Graduation: _____

Please Attach Copies of Your Academy Records and Graduation Certificate.

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Define the following terms using your own words, and explain how these terms apply to the law enforcement profession.

Authority: _____

Honesty: _____

Integrity: _____

Para informacion en espanol, visite www.ftc.gov/credit o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identify theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.
- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Consumer Help (FRCH) P O Box 1200 Minneapolis, MN 55480 Telephone: 888-851-1920 Website Address: www.federalreserveconsumerhelp.gov Email Address: ConsumerHelp@FederalReserve.gov
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture

Office of Deputy Administrator - GIPSA
Washington, DC 20250

202-720-7051