

Police Department Hiring Information for Applicants:

This is a summarization of the hiring process. It outlines the basic requirements as set forth by the State of South Dakota for law enforcement personnel and includes the basic process used by the City of Canton Police Department.

MINIMUM STANDARDS FOR EMPLOYMENT:

Subsequent to October 1, 1971, a person may not be temporarily or permanently employed or certified as a law enforcement officer or continue to be employed or certified as a law enforcement officer unless he meets the following requirements:

- (1) Is a citizen of the United States;
- (2) Is at least 21 years of age at time of appointment;
- (3) Has his fingerprints taken by a qualified law enforcement officer;
- (4) Is of good moral character;
- (5) Is a graduate of an accredited high school or has a high school equivalency certificate acceptable to the commission;
- (6) Is examined by a licensed physician who certifies, on forms prescribed by the commission, that the applicant is able to perform the duties of a law enforcement officer;
- (7) Is interviewed in person by the hiring agency or its designated representative before employment. The interview shall include questions to determine applicant's general suitability for law enforcement service, appearance, personality, temperament, ability to communicate, and other characteristics reasonably necessary to the performance of the duties of a law enforcement officer;
- (8) Takes the oath of office as required by SDCL 9-14-7 or 3-1-5. The oath may be taken before the nearest available judge of a court of records;
- (9) Has not unlawfully used any prescribed drug, controlled substance, or marijuana within one year before the time of application for certification;
- (10) Is eligible to reapply for certification, if the person has for any reason failed to successfully complete the basic law enforcement training program and;
- (11) Has not had his certification revoked, voluntarily surrendered certification, had an application for certification refused, or been dismissed from the basic training program, unless the commission upon application declares eligible for employment or certification.
- (12) Has not become ineligible for employment or certification as a law enforcement officer in any other state, as a result of any proceedings involving any revocation, suspension, surrender of, or resignation or dismissal from certification, employment or training, unless the commission, upon application, declares the person eligible for employment or certification in South Dakota.

The City of Canton is an Equal Opportunity Employer. It is the policy of the City of Canton to recruit, hire, train, promote, discipline and discharge all applicant and employees equally and without regard to race, religion, creed, color, national origin, sex, age, disability, political affiliation, marital or veteran status, or any other basis prohibited by State or Federal law. Violation of this policy by any municipal employee may be cause for immediate disciplinary action, including termination.

Each applicant must complete the CANTON POLICE DEPARTMENT EMPLOYMENT APPLICATION herein, according to the instructions.

Each applicant is required to provide a copy of their driver's license, social security card, and DD214 (if applicable).

After receipt of the application, the applicant's background will be checked and this process shall include: Verification of applicant's responses in the written application; Applicant's driving history; Criminal history of applicant including checks in all former states of residency.

In the event an applicant is offered a Conditional Offer of Employment, a polygraph examination, and a Medical examination (including drug screening) will be required. Psychological testing may also be required.

Applicants with questions may direct them to City Hall at 605-987-2881.

CANTON POLICE DEPARTMENT EMPLOYMENT APPLICATION

Fill out in your own handwriting using ink.

Applications not properly filled out will not be accepted. You will be judged in part on the neatness and completeness of this application.

Name: _____
(Last) (First) (Middle)

Address: _____
(Street) (Apt. or P.O. Box)

_____ Home Phone: _____
(City) (State) (Zip)

How long have you lived at your present address? _____

Addresses for past ten years. (Do not include your present address)

Street and Number	City and State	From (Mo. & Yr.)	To (Mo. & Yr.)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are you a United States citizen? Yes No

Height: _____ Weight: _____ Hair Color: _____ Color of Eyes: _____

Social security number: _____

Driver's license number: _____ State of issue: _____

Are you a certified law enforcement officer in the state of S.D.? _____

Are you a certified law enforcement officer in another state? _____ Where _____

Are you applying for Full Time Part time Either

Vehicle operators license: (List operators, chauffeur, CDL, etc.)

Type of License

Date of Expiration

Restrictions

Have you ever had automobile insurance withdrawn or revoked? Yes No.

If yes, explain _____

Have you ever been denied issuance of a license or had a license suspended or revoked? Yes No

If yes, explain _____

Have you ever been denied insurance? Yes No

If yes, explain: _____

Give the name and address of the insurance company with whom you now have insurance:

Name: _____ Address: _____

Arrest, detention and litigation: show all arrests to include juvenile and traffic citations:

1.) _____

2.) _____

3.) _____

Have you ever been arrested by a law enforcement agency? Yes No

If yes, explain _____

Have you ever been found guilty of a criminal offense? Yes No

If yes, explain _____

Have you ever been fingerprinted for any reason (Arrest, job application, etc.)? Yes No

If yes, explain _____

Education: List Elementary, Junior and Senior High School(s).
Name/Location/Dates Attended/Years Completed/Graduate

A.) _____

B.) _____

C.) _____

D.) _____

Military service: Yes No. If prior Service, Attach DD Form 214.

Branch of Service

From-To

Type of Discharge

A.) _____

B.) _____

Other schools or training (Include Trade, College, Vocational, Business, Military, etc.) State name, location of school, dates attended, subjects studied, certification or degree, and any other pertinent information.

Employment: (Starting with present or most recent, list all employment in last seven years.)

Name of Employer: _____

Telephone No. _____

Address: _____

City, State, Zip: _____

Job Title: _____

Supervisor: _____

Dates From: _____ to _____

Description of duties:

Name of Employer: _____

Telephone No. _____

Address: _____

City, State, Zip: _____

Job Title: _____

Supervisor: _____

Dates From: _____ to _____

Description of duties:

Name of Employer: _____

Telephone No. _____

Address: _____

City, State, Zip: _____

Job Title: _____

Supervisor: _____

Dates From: _____ to _____

Description of duties:

Name of Employer: _____

Telephone No. _____

Address: _____

City, State, Zip: _____

Job Title: _____

Supervisor: _____

Dates From: _____ to _____

Description of duties:

SHOULD ADDITIONAL SPACE BE REQUIRED FOR ANY AREA OR QUESTION, THE REVERSE OF THE FORM MAY BE USED. ADDITIONAL PAGES MAY ALSO BE ATTACHED IF NECESSARY.

If you wish to attach significant documents of training, or a resume, they will be reviewed and considered.

IF NOW EMPLOYED, ARE YOU WILLING FOR US TO ASK YOUR PRESENT EMPLOYER ABOUT YOUR WORK? YES NO

References: (Give the names of three responsible persons, NOT relatives or previous employers. Include address, telephone number and occupation)

A.) _____

B.) _____

C.) _____

We request that we be allowed to check juvenile and adult criminal records in reference to arrests. All information will be kept confidential for Police Department use only in your evaluation. Your signature indicates your approval.

(Signature)

(Date)

I hereby certify that there are no willful misrepresentations in, or falsifications of, the above statements and answers to questions. I am aware that should investigation disclose any misrepresentations or falsifications, my application will be immediately rejected without further cause or hearing.

(Signature)

(Date)

I hereby certify that I am not now, nor have I been in the past, the subject of domestic restraining or protective order and I have not been previously convicted of a domestic violence related offense and I am not currently under investigation for a domestic violence related offense.

(Signature)

(Date)

**LETTER OF RELEASE OF
CONFIDENTIAL MATERIALS**

Date: _____

TO WHOM IT MAY CONCERN:

I have made application for employment with the Canton Police Department, State of South Dakota.

This letter is to authorize the Canton Police Department or its representative and/or agent, to obtain and review any, or all, of my employment, wage, medical, psychological, credit, education and criminal history records for the purpose of determining suitability for employment in said organization.

A copy of this authorization shall serve in its stead.

(Signature)

(Witness)