2020 POLICE OFFICER RECRUITMENT

IT IS IMPORTANT THAT YOU READ ALL INFORMATION INCLUDED & RETURN REQUIRED DOCUMENTS TO THE CITY’S HUMAN RESOURCES DEPARTMENT.

YOUR APPLICATION PACKET CONTAINS THE FOLLOWING INFORMATION:

1. JOB ANNOUNCEMENT
2. GUIDELINES FOR SELECTION OF POLICE OFFICER APPLICANTS
3. 2020 POLICE OFFICER TENTATIVE HIRING SCHEDULE
4. COOPER TEST INFORMATION (Physical fitness test)
5. POLICE OFFICER SELECTION TEST (POST) INFORMATION (Written exam)
6. POLICE OFFICER PHYSICAL CONDITIONING WAIVER FORM – Must be completed, submitted to and received by Human Resources no later than 5:00 p.m. on Thursday, March 26, 2020
7. AUTHORITY FOR RELEASE OF INFORMATION – Must be completed, signed, notarized, submitted to and received by Human Resources no later than 5:00 p.m. on Thursday, March 26, 2020
8. STATEMENT CONCERNING YOUR EMPLOYMENT IN A JOB NOT COVERED BY SOCIAL SECURITY – Must be completed, submitted to and received by Human Resources no later than 5:00 p.m. on Thursday, March 26, 2020
9. Not included in the packet, but required – ONLINE APPLICATION – Must be completed online at dsm.city/joinDMPD by 5:00 p.m. on Thursday, March 19, 2020

*Note: Please keep all applicant documents for your information. Please be sure to note, which documents are to be returned to the City of Des Moines Human Resources Department.

OTHER REQUIRED INFORMATION TO BE SUBMITTED

YOUR APPLICATION MUST BE SUBMITTED ONLINE BY 5:00 P.M., THURSDAY, MARCH 19, 2020 (YOU WILL RECEIVE A CONFIRMATION EMAIL ONCE YOUR APPLICATION HAS BEEN SUCCESSFULLY SUBMITTED). ALL ITEMS LISTED BELOW MUST BE ATTACHED TO YOUR ONLINE APPLICATION OR SUBMITTED SEPARATELY TO AND RECEIVED BY HUMAN RESOURCES NO LATER THAN 5:00 P.M. ON THURSDAY, MARCH 26, 2020 OR IT WILL BE CONSIDERED INCOMPLETE AND WILL NOT BE ACCEPTED WITHOUT PROOF OF SUBMISSION.

1. Photocopy of driver’s license
2. Proof of U.S. Citizenship (such as a photocopy of one of the following: U.S. Birth Certificate from state or county, U.S. Passport, Certificate of Citizenship, or Naturalization Certificate)
3. Police Officer Physical Conditioning Waiver
4. Authority for Release of Information (Must be notarized)
5. Statement Concerning Your Employment in a Job Not Covered by Social Security
6. High school diploma (or other proof of high school graduation) or G.E.D. and College transcripts, if any
7. References – names and contact information of 3 personal and 3 professional references
8. DD214 Form for military service, if any (If you are unable to submit your DD214 by March 26, 2020, please contact the City’s Human Resources Department with expectation of when it will be available)

**All of the above documents must be legible.**

REQUIRED DOCUMENTATION MAY BE HAND DELIVERED, MAILED, EMAILED OR FAXED TO HUMAN RESOURCES.

City of Des Moines
Attn: Human Resources Dept.
1551 E Martin Luther King Jr Pkwy
Des Moines, IA 50317

EMAIL: humanresources@dmgov.org

FAX: (515) 237-1680
THE SELECTION OF POLICE OFFICER APPLICANTS FOR THE CITY OF DES MOINES MEETS THE REQUIREMENTS OF IOWA CODE CHAPTER 80(B) AND ITS ADMINISTRATIVE RULES

CHARACTER:
An applicant must be of good moral character, which means they can be trusted and are considered by those who know them to be a person of good reputation and good standing in the community. When conduct is of a nature that would tend to discredit the applicant as a peace officer, the applicant will be disqualified from employment consideration.

The character of a person is determined by past and present behavior. Many factors are relevant in said assessment. The department seeks applicants whose histories show good judgment, maturity, a sense of responsibility and respect for others.

An applicant will not be considered for employment at any time if they have been convicted of any felony, domestic abuse, or a conviction involving moral turpitude. Moral turpitude can be, but not limited to any of the following acts: Income tax evasion, perjury, indecent exposure, sex crimes, conspiracy to commit a crime, defrauding the government and illegal drug sales.

Various factors, however, may cause an offense which is generally not regarded as constituting moral turpitude to be regarded as such. Examples of other potential disqualifying factors are:

Giving false information on the application, during the application process, or any attempts of deception or fraud during the examination process.
Addicted to alcohol and has not been rehabilitated for a period of one year or more, or is not presently undergoing treatment.
Current (past 12 months) or excessive use of marijuana.
Current (past 24 months) or excessive use of other illegal drugs.
Use of any illegal drug (including prescription drugs not prescribed to you) or conviction of a felony, or any other serious offense after becoming an applicant.

COSMETIC/VISUAL APPEARANCES
The Des Moines Police Department has a policy regulating tattoos. The policy states that any tattoos/branding/intentional scarring on the face, head, neck, and, in most cases, hands are prohibited. Any tattoos/branding/intentional scarring on exposed arms and legs must be covered by the authorized uniform issued by the Des Moines Police Department, approved on duty plain clothes dress, or approved sleeve type covering. Those applicants that can’t meet these requirements will be dismissed from the process.

BACKGROUND INVESTIGATION:
Applicants will be subject to a background investigation to include a review of their driving record. Information gained through the investigation will be used to determine if individual applicants meet certain guidelines. Applicants who do not meet these guidelines will not be given further consideration. All applicants who reach the final selection process must pass a polygraph exam, physical exam, drug screen and psychological screening.
Successful completion of these requirements will not guarantee appointment as a police officer.
79th Police Recruit Class
2020 Tentative Hiring Schedule
These are tentative dates and are subject to change

31 January 2020 Initial Job Posting

19 March 2020, 5:00 p.m. Online applications due (Application Deadline)

26 March 2020 All additional items due
APPLICATIONS WILL BE CONSIDERED INCOMPLETE AND WILL NOT BE ACCEPTED UNLESS ALL REQUIRED DOCUMENTS ARE SUBMITTED TO AND RECEIVED BY HUMAN RESOURCES BY 5:00 P.M.

18 & 19 April 2020* Cooper Tests

19 & 20 April 2020* Police Officer Selection Tests (POST)

May 2020* Conditional Offers

May-July 2020* Polygraph Exams and Background Investigations

August 2020* Civil Service Oral Exams

September 2020* Staff Interviews and MMPI

September/October 2020* Medical Examinations

October 2020* Final Job Offers

October 2020* Orientation

November 2020* Start of Academy

*These dates are tentative.

SPECIAL NOTES

1. Applicants must complete each section of the application/selection process as scheduled. Failure to submit required information or failure to appear and complete any part of the process as scheduled will result in automatic withdrawal from the selection process.

2. Due to the large number of applicants expected, and the requirements for special facilities and support personnel, it is not possible to accommodate requests for alternative examination dates.

3. Applicants may be removed throughout the examination and selection process based on such things as sub-standard testing performance, a felony or history of moral turpitude, driving record that does not meet City standards, not meeting requirements of the DMPD policy regulating tattoos, substance abuse, findings from a polygraph, psychological screening, or the physical examination.

4. If at any time, you wish to remove your name from further consideration, or if you have questions, please contact Human Resources at (515) 283-4213 for assistance.
PHYSICAL FITNESS TESTING (COOPER TEST) INFORMATION FOR
POLICE OFFICER APPLICANTS

The test consists of four (4) exercises. Applicants must pass ALL four (4) of the sub-parts to be considered further in the selection process.

**Sub-test 1: Sit-and-Reach:** This is a test of flexibility. The test consists of measuring how far an applicant can reach beyond their toes from a sitting, straight-leg, heels together position. Three (3) attempts are allowed.

**Sub-test 2: Sit Up:** This is a test of general body strength. The testing position is bent knee (knees elevated off the ground), rising from a reclining position to touch the back of the elbows to the top of the knees and return to a reclining position where your shoulders touch the mat before rising again. Hands with fingers interlocked behind the head or neck, the fingers must not come apart. You may not use your hips to thrust yourself up, your hips must remain on the mat. One attempt, with a one-minute time limit to reach the minimum.

**Sub-test 3: Push Up:** This is a test of upper body strength. Push-ups are "military style" with legs straight, hands positioned under the shoulders. The test begins with arms extended (body raised), then lower the body to within 3-4 inches of the ground and complete by returning to an extended arm position. One attempt, with a one-minute time limit to reach the minimum.

**Sub-test 4: 1.5 Mile Run:** This is a general test of endurance. Runner's aids, other than appropriate clothing/running shoes are not permitted. One attempt is allowed. The time limit is the maximum allowed.

It is highly recommended that each applicant visit with his/her/their physician prior to participating in the physical fitness test. Neither the City of Des Moines nor any other agency whose facilities might be used for the testing assumes any liability for injury affiliated with the examination. Applicants will be required to sign a hold-harmless waiver as a condition of participating in the testing.

**NOTES:**

For sub-test 1, the distance is measured with the bottoms of your feet resting against the front side of a box with a 24" ruler attached to the top. The ruler sticks out toward the candidate with the 15-inch mark flush with the front of the box. If your target distance is 16.5, you would have to reach past the 15 inches the ruler is sticking out toward you, plus an additional 1.5 inches past your toes to the 16.5-inch mark.

For sub-test 2, a proctor will hold your feet stable, and count successful repetitions.

For sub-test 3, the proctor will place their fist on the ground and you must lower your chest and touch the fist for the repetition to count. Again, the proctor will count only successful repetitions. Incorrect repetitions will not count toward the total. Proctors will count laps around the track during the run.

Warm-ups prior to testing are recommended.

Tables with the performance standards for your age and sex are printed on the next page.

**POLICE OFFICER APPLICANT TESTING RESOURCES FOR COOPER TEST:**

[Cooper Assessment Preparation Guide (physical fitness test)]
[Cooper Test Instructional Video]

If you have questions about the Cooper test or are unable to view the Cooper informational video or preparation guide, contact the Des Moines Police Regional Police Academy at (515) 323-8350.
## PERFORMANCE STANDARDS FOR PHYSICAL FITNESS TESTING

### MALES:

<table>
<thead>
<tr>
<th>SUB-TEST</th>
<th>AGE GROUPS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>18-29</td>
</tr>
<tr>
<td>SIT &amp; REACH</td>
<td>16.5</td>
</tr>
<tr>
<td>SIT-UPS</td>
<td>38</td>
</tr>
<tr>
<td>PUSH-UPS</td>
<td>29</td>
</tr>
<tr>
<td>1.5 MILE RUN</td>
<td>12:51</td>
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### FEMALES:

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<tbody>
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<td></td>
<td>18-29</td>
</tr>
<tr>
<td>SIT &amp; REACH</td>
<td>19.3</td>
</tr>
<tr>
<td>SIT-UPS</td>
<td>32</td>
</tr>
<tr>
<td>PUSH-UPS</td>
<td>15</td>
</tr>
<tr>
<td>1.5 MILE RUN</td>
<td>15:26</td>
</tr>
</tbody>
</table>

(* Females over age 49 may do push-ups from the knee. Normative data have not been established for these age groups.)

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### IMPORTANT INFORMATION TO KNOW ABOUT THE COOPER TEST

- 50% of APPLICANTS FAIL THE COOPER TEST because they have not prepared themselves. Even if you exercise regularly, you may not be able to pass. **The key is preparation.**

- 50% of MALE APPLICANTS FAIL ON THE SIT-UPS. Conditioning, preparation, and form are important in passing this and each part of the Cooper Test.

- 50% of FEMALE APPLICANTS FAIL ON THE PUSH-UPS. Females typically lack upper body strength. Upper body strength, conditioning, and form are important on this part of the test.

- **COME TO THE TEST IN LOOSE FITTING WORKOUT CLOTHES, INCLUDING RUNNING SHOES.** This is critical to ensure your top performance. You are the athlete at this event.

- Should you have questions about PROPER FORM, you may CONTACT THE DES MOINES POLICE ACADEMY at 515-323-8350.
1. There are four separate subtests in the exam. They are Math, Reading, Grammar, and Report Writing. Each part is timed.

2. **A passing score of 70% is required on each subtest in order to pass the entire exam.** Failing one of the subtests will eliminate an applicant from this recruitment process. Please know that only those applicants with the highest passing POST scores will proceed in the recruitment process, so it is important to prepare and put forth the best effort on this exam.

3. Prior POST Test Scores:
   a. Successful Iowa POST scores received after November 1, 2019, may be used in lieu of retesting. However, the applicant is encouraged to participate in our examination process in an attempt to improve their score.
   b. The applicant will not be penalized by retesting, and may use the higher of the valid examination scores for final consideration.
   c. Submitting of prior test scores is not necessary. Human Resources will obtain your scores from the testing authority.

**POLICE OFFICER APPLICANT TESTING RESOURCES FOR POST WRITTEN EXAM:**
POST Study Guide (written exam)
CITY OF DES MOINES

HUMAN RESOURCES DEPARTMENT

POLICE OFFICER PHYSICAL CONDITIONING WAIVER

MUST BE RETURNED WITH APPLICATION

I, ________________

PRINT NAME

_______________________

SSN

_______________________

EMAIL ADDRESS

PHONE NUMBER

_______________________

STREET ADDRESS

_______________________

CITY, STATE, ZIP CODE

hereby waive all causes of action for any personal injuries and/or damages which may exist against the City of Des Moines and its employees or as a result of my voluntary participation in the physical fitness test (Cooper Institute Examination) for the position of Police Officer with said City of Des Moines.

I am aware that the exercises may be strenuous and I accept full responsibility for any injuries or damages that may occur by their performance.

_______________________

SIGNATURE:

DATE:

Note: Must be returned to the City of Des Moines Human Resources Department by Thursday, March 26, 2020.
AUTHORITY FOR RELEASE OF INFORMATION

Print: Last Name    First Name    Middle Name

Address                        Phone Number

Sex             Race             Date of Birth (Month / Day /Year)    Social Security Number

Place of Birth                   County or City    State    Country

This release when signed by me and presented by a representative of the City of Des Moines Police Department is my consent and authorization to allow the examination and release of copies of any and all written and electronic records, statements, or information regarding me. Such records, statements, or information includes but is not limited to: Employment; Medical; Mental Health; Psychological; Selective Service; Police and Criminal; Military Service; Financial and Credit; Polygraph Examinations; and the UNDELETED copy of the separation document and medical records to the National Personnel Records and Military Personnel Records Centers.

My intent in giving this release is to provide to the City of Des Moines, Iowa, full and free access to the above-listed information.

I understand that any information obtained, directly or indirectly, from this release will be considered in determining my suitability for employment with the city. I further understand that all records, information, and statements that are released or obtained by the City of Des Moines become the property of the city and that such information will not be returned to me.

I agree to indemnify and hold harmless the person to whom this release is presented and his or her employees, agents or representatives, from and against all claims, damages, losses and expenses, including reasonable attorney’s fees, arising out of or by reason of the release of information pursuant to this release. I further understand that upon conclusion of the investigation for which these records have been requested, the sources of the confidential information shall not be released to me and shall remain confidential.

A photocopy of this release form containing my signature shall have the same force and effect as if an original.

____________________________________   __________________________________
(Signature)   (Date)

Subscribed and sworn before me this ____________ day of __________

My commission expires __________________________ 20________________________

________________________________________________________________________
Notary Public

This release shall expire one year from the date of my signature above unless I earlier revoke this release in writing.

Note: Must be returned to the City of Des Moines Human Resources Department by Thursday, March 26, 2020.
Statement Concerning Your Employment in a Job Not Covered by Social Security

Employee Name: ___________________________ Social Security #: ___________________________

Employer Name: City of Des Moines Phone #: ___________________________

Your earnings from this job are not covered under Social Security. When you retire, or if you become disabled, you may receive a pension based on earnings from this job. If you do, and you are also entitled to a benefit from Social Security based on either your own work or the work of your husband or wife, or former husband or wife, your pension may affect the amount of the Social Security benefit you receive. Your Medicare benefits, however, will not be affected. Under the Social Security law, there are two ways your Social Security benefit amount may be affected.

**Windfall Elimination Provision**
Under the Windfall Elimination Provision, your Social Security retirement or disability benefit is figured using a modified formula when you are also entitled to a pension from a job where you did not pay Social Security tax. As a result, you will receive a lower Social Security benefit than if you were not entitled to a pension from this job. For example, if you are age 62 in 2013, the maximum monthly reduction in your Social Security benefit as a result of this provision is $395.50. This amount is updated annually. This provision reduces, but does not totally eliminate, your Social Security benefit. For additional information, please refer to Social Security Publication, “Windfall Elimination Provision.”

**Government Pension Offset Provision**
Under the Government Pension Offset Provision, any Social Security spouse or widow(er) benefit to which you become entitled will be offset if you also receive a Federal, State or local government pension based on work where you did not pay Social Security tax. The offset reduces the amount of your Social Security spouse or widow(er) benefit by two-thirds of the amount of your pension.

For example, if you get a monthly pension of $600 based on earnings that are not covered under Social Security, two-thirds of that amount, $400, is used to offset your Social Security spouse or widow(er) benefit. If you are eligible for a $500 widow(er) benefit, you will receive $100 per month from Social Security ($500 - $400 = $100). Even if your pension is high enough to totally offset your spouse or widow(er) Social Security benefit, you are still eligible for Medicare at age 65. For additional information, please refer to Social Security Publication, “Government Pension Offset.”

**For More Information**
Social Security publications and additional information, including information about exceptions to each provision, are available at [www.socialsecurity.gov](http://www.socialsecurity.gov). You may also call toll free 1-800-772-1213, or for the deaf or hard of hearing call the TTY number 1-800-325-0778, or contact your local Social Security office.

I certify that I have received Form SSA-1945 that contains information about the possible effects of the Windfall Elimination Provision and the Government Pension Offset Provision on my potential future Social Security Benefits.

Signature of Employee ___________________________ Date _________________

Form SSA-1945 (01-2013)

Note: Must be returned to the City of Des Moines Human Resources Department by Thursday, March 26, 2020.