



## SAULT STE. MARIE POLICE SERVICE APPLICATION FOR THE POSITION OF POLICE CONSTABLE

To be considered for employment as a Police Constable with the Sault Ste. Marie Police Service you must meet, at a minimum, all of the following basic requirements. You are encouraged before applying to conduct a self-appraisal using the following criteria:

### **ALL APPLICANTS TO THE SAULT STE. MARIE POLICE SERVICE MUST:**

1. Be a Canadian citizen or permanent resident of Canada.
2. Be at least eighteen years of age.
3. Be of good moral character and habits.
4. Produce copies of transcripts of marks showing successful completion of at least four years of secondary school education or its equivalent.
5. Produce a current "Certificate of Results" awarded by the Ontario Association of Chiefs of Police through a licensed vendor.
6. Be able to meet the colour vision and visual field standards as set out by Applicant Testing System Inc.  
\*\* Any corrective surgery will only be recognized with the approval of a Police Service physician.
7. Never have been convicted of a Criminal Offence committed in any jurisdiction for which a pardon has not been granted.
8. Have a valid Ontario Driver's License with no more than 6 demerit points.
9. Be qualified in Cardio Pulmonary Resuscitation (CPR) and First Aid prior to any offer of employment being made.
10. Be prepared to undergo a thorough structured interview, as well as medical and psychological tests as set by the Service.

The Sault Ste. Marie Police Service Selection Standards are high. If you are not presently able to minimally meet all of these standards this may not be the most appropriate time for you to apply. You may want to consider taking time to improve your level of readiness by working towards improving those areas in which you are deficient.

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### **INSTRUCTIONS TO APPLICANTS**

1. Review the minimum qualifications for employment.
2. Complete the Application Form set out on the following three pages in your own handwriting in ink.
3. Return the completed Application Form, along with the Certificate of Results, in a sealed envelope to the attention of the Sault Ste. Marie Police Service, 580 Second Line East, Sault Ste Marie ON P6B 4K1, Attention: Personnel Coordinator.
4. It is strongly recommended that applicants who are unable to deliver their applications to the Police Service in person forward the application by registered mail or private courier to ensure delivery.
5. Successful candidates will be able to produce, before being offered employment, evidence of current CPR and First Aid certification.
6. It is the responsibility of each applicant to contract directly with a licenced vendor (Applicant Testing Systems Inc 1-800-429-7728 or (519) 659-8686) to obtain a current "Certificate of Results."
7. **DO NOT INCLUDE A RESUME WITH YOUR APPLICATION.**

**POLICE CONSTABLE APPLICATION FORM**

**Please read instructions carefully**

Applicants will ensure that they have read and meet the requirements set out the cover page of this form.

All questions must be answered. Where Not Applicable mark N/A appropriately.

If extra space is required, use a separate blank sheet and number answers appropriately.

**1. PERSONAL**

LAST NAME	GIVEN NAME(S)	PHONE Home _____ Business/Other _____
FULL MAILING ADDRESS & POSTAL CODE		

**2. EDUCATION**

SECONDARY SCHOOL COMPLETED	Grade 12 <input type="checkbox"/> Equivalent <input type="checkbox"/> OAC (Grade 13) <input type="checkbox"/>	Include copy of diploma/certificate
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OTHER INSTITUTIONS (College, University, Business, Trade, Technical School etc)

1.	name of institution	name of program or major subject area	certificate/degree/diploma granted (include copy if "yes") yes <input type="checkbox"/> no <input type="checkbox"/>	length of program (years/months)	If you have not completed this program please provide explanation in area below "Programs Not Completed"
2.	name of institution	name of program or major subject area	certificate/degree/diploma granted (include copy if "yes") yes <input type="checkbox"/> no <input type="checkbox"/>	length of program (years/months)	If you have not completed this program please provide explanation in area below "Programs Not Completed"
3.	name of institution	name of program or major subject area	certificate/degree/diploma granted (include copy if "yes") yes <input type="checkbox"/> no <input type="checkbox"/>	length of program (years/months)	If you have not completed this program please provide explanation in area below "Programs Not Completed"
4.	name of institution	name of program or major subject area	certificate/degree/diploma granted (include copy if "yes") yes <input type="checkbox"/> no <input type="checkbox"/>	length of program (years/months)	If you have not completed this program please provide explanation in area below "Programs Not Completed"

Programs Not Completed (Use corresponding numbers to programs above)

1.	currently enrolled yes <input type="checkbox"/> no <input type="checkbox"/>	number of months/years completed	anticipated completion date	contact person at institution for verification (name & phone number)
2.	yes <input type="checkbox"/> no <input type="checkbox"/>			
3.	yes <input type="checkbox"/> no <input type="checkbox"/>			
4.	yes <input type="checkbox"/> no <input type="checkbox"/>			

**3. EMPLOYMENT** (list most recent employment and continue in reverse time order)

Name & Address of Employer	Type of Business	Position held	Hours Worked per week/month	Employment Dates
				From _____ To _____
Reason for leaving	Contact person for employment verification name & phone number		If still employed with this firm please indicate if you would prefer that this person not be contacted prior to any offer of employment. Please do not contact. <input type="checkbox"/>	

Name & Address of Employer	Type of Business	Position held	Hours Worked per week/month	Employment Dates
				From _____ To _____
Reason for leaving	Contact person for employment verification name & phone number		Be advised that this person may be contacted.	

Name & Address of Employer	Type of Business	Position held	Hours Worked per week/month	Employment Dates
				From _____ To _____
Reason for leaving	Contact person for employment verification name & phone number		Be advised that this person may be contacted.	

Name & Address of Employer	Type of Business	Position held	Hours Worked per week/month	Employment Dates
				From _____ To _____
Reason for leaving	Contact person for employment verification name & phone number		Be advised that this person may be contacted.	

Do you possess additional licenses, certificates etc. for any other specialized skill not previously mentioned? If yes please list.

- 1) \_\_\_\_\_ 2) \_\_\_\_\_  
3) \_\_\_\_\_ 4) \_\_\_\_\_

Do you possess a valid driver's license? Yes  No

Have you in the last three years applied to any other police service (force)? If yes please list.

- 1) \_\_\_\_\_ 2) \_\_\_\_\_  
3) \_\_\_\_\_ 4) \_\_\_\_\_

Have you received a "Conditional Offer of Employment" for the position of Constable from any other police service (force)? If yes please list.

- 1) \_\_\_\_\_ 2) \_\_\_\_\_

#### 4. COMMUNITY INVOLVEMENT

*This section requires you to list all activities that you have volunteered (did not receive remuneration) for and where, by volunteering, you gave up of your time for a purpose or cause that benefited a particular individual, group or society as a whole.*

Name of Organization	Your position	Currently Active	Hours per week/month	Total Volunteer Hours To date	Start Date With Organization	Contact Person for verification (Name & Phone)
1.						
2.						
3.						
4.						
5.						

#### IF OFFERED EMPLOYMENT

I AGREE TO ABIDE BY, AND BE SUBJECT TO:

- THE RULES AND REGULATIONS OF THE SAULT STE. MARIE POLICE SERVICES BOARD
- POLICIES AND PROCEDURES ISSUED BY THE CHIEF OF POLICE
- THE TERMS AND CONDITIONS DESCRIBED IN THE APPROPRIATE COLLECTIVE AGREEMENT
- ENROLMENT IN THE ONTARIO MUNICIPAL EMPLOYEES RETIREMENT SYSTEM

I HEREBY DECLARE THAT THE FOREGOING INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE STATEMENT MADE BY ME ON THIS APPLICATION MAY DISQUALIFY ME FROM EMPLOYMENT, OR RESULT IN MY DISMISSAL IF ALREADY EMPLOYED BY THE SAULT STE. MARIE POLICE SERVICE.

DATE \_\_\_\_\_

\_\_\_\_\_  
signature of applicant

*PERSONAL INFORMATION WHICH MAY INCLUDE ACADEMIC, EMPLOYMENT, MEDICAL, PHYSICAL, FINANCIAL, CHARACTER AND OTHER PERSONAL DATA IS BEING COLLECTED DURING THE RECRUITMENT PROCESS UNDER THE AUTHORITY OF THE POLICE SERVICES ACT SECTIONS 38, 43 AND 53, FOR THE PURPOSE OF ADDRESSING YOUR SUITABILITY FOR EMPLOYMENT. QUESTIONS ABOUT THIS COLLECTION SHOULD BE DIRECTED TO THE PERSONNEL CO-ODINATOR, SAULT STE. MARIE POLICE SERVICE, 580 SECOND LINE EAST, SAULT STE. MARIE, ONTARIO, P6B 4K1, (705) 949-6300 Ext. 327.*