



**SMITHFIELD POLICE DEPARTMENT**  
215 Pleasant View Avenue  
Smithfield, Rhode Island 02917-1799

William A. McGarry  
Chief of Police

Tel: (401) 231-2500  
Fax: (401) 233-1018

January 15, 2008

Dear Applicant:

Thank you for considering the Smithfield Police Department in your pursuit of a career in the field of law enforcement. The Department is currently accepting applications to establish an eligibility list for new police officers, effective July 1<sup>st</sup>, 2008. Attached to this letter is an *Application for Employment Form* and *Applicant Information Booklet*, which should provide you with minimum hiring requirements, a description of the various phases of the applicant selection process, recruit training requirements, salary and benefits, and other miscellaneous information. For your information, the recruitment and selection process takes approximately five months to complete, and previous candidates must reapply.

Additional application forms may be obtained from the Smithfield Police Department, 215 Pleasant View Avenue, Smithfield, Rhode Island, Monday through Friday, from 9:00 a.m. to 4:00 p.m. Application forms will be mailed to out-of-state residents and are also available on the Department's website [www.smithfieldpd.com](http://www.smithfieldpd.com). Completed applications must be returned to the Smithfield Police Department by 4:00 p.m. on Friday, February 29<sup>th</sup>, 2008.

If you have any questions or concerns, please feel free to contact me Monday through Friday, from 8:00 a.m. to 4:00 p.m. at (401) 231-2500, ext. 15.

Good Luck!

Sincerely yours,

Captain Robert W. VanNieuwenhuyze  
Director of Training

RWV /lad  
Enclosure



TOWN OF SMITHFIELD  
SMITHFIELD POLICE  
DEPARTMENT  
215 PLEASANT VIEW AVENUE  
SMITHFIELD, RHODE ISLAND  
02917



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TOWN OF SMITHFIELD  
SMITHFIELD POLICE  
DEPARTMENT  
215 PLEASANT VIEW AVENUE  
SMITHFIELD, RHODE ISLAND  
02917



The Town of Smithfield is seeking qualified candidates to establish an eligibility list for police officers. If you are interested in a rewarding career with the Smithfield Police Department, this Applicant Information Booklet will provide you with the minimum hiring requirements, various phases of the applicant selection process, recruit training requirements, salary and benefits, and other miscellaneous information. The recruitment and selection process takes approximately five months to complete. Previous candidates must reapply.

Application forms may be obtained from the Smithfield Police Department, 215 Pleasant View Avenue, Smithfield, Rhode Island, Monday through Friday from 9:00 a.m. to 4:00 p.m. Application forms will be mailed to out-of-state residents and are also available on the Smithfield Police Department's website [www.smithfieldpd.com](http://www.smithfieldpd.com). Completed applications must be returned to the police department by 4:00 p.m. on Friday, February 29, 2008.

## **MINIMUM HIRING REQUIREMENTS:**

To be considered for appointment to the police department, an applicant;

- Must be eighteen (18) years of age or older;
- Must be a citizen of the United States;
- Must possess a valid operator's license;
- Must possess a Bachelor's degree, preferably in the field of Criminal Justice or Law Enforcement, by June 30<sup>th</sup>, 2008.

## **APPLICANT SELECTION PROCESS:**

### **WRITTEN EXAMINATION**

Applicants must complete a written examination which measures verbal ability, the ability to learn and apply police information, remember details, follow directions, and use good judgment and logic. This examination was developed by an independent, professional management consultant.

### **PHYSICAL FITNESS TEST**

Applicants determined eligible for further processing must successfully complete a physical fitness test which encompasses the following events:

300 Meter Run -- This is a timed test, which measures the body's ability to perform during oxygen debt. The score is recorded in seconds.

Sit and Reach Test -- This test measures flexibility of the lower back and upper leg areas. Test results reflect the ability to perform tasks involving the range of motion. The test involves stretching to touch one's toes or beyond, with arms extended outward from the sitting position. The score is measured in inches.

One-Minute Sit-Up Test -- This test measures the muscular endurance of the abdominal muscles. Test results reflect the ability to perform police tasks that involve the use of force. The score is the number of bent leg sit-ups performed in one (1) minute.

One Repetition Maximum Bench Press -- This is the maximum weight pushed from the bench press position and measures the amount of force the upper body can generate. Test results reflect the ability to perform police tasks requiring upper body strength. The score is a ratio of weight pushed, divided by body weight.

1.5 Mile Run -- This is a timed run, which measures the heart and vascular system's capability to transport oxygen. Test results reflect the ability to perform police tasks involving stamina and endurance. The score is recorded in minutes and seconds.

## **APPLICANT BACKGROUND INVESTIGATION**

- Applicants will have an extensive background investigation conducted by the Smithfield Police Department, including but not limited to: past employment records, educational background, criminal history, consumer credit history, community reputation, military service, and overall character.

## **ORAL REVIEW BOARDS**

- Applicants eligible for further processing must appear before initial and final Oral Review Boards.

## **PSYCHOLOGICAL EXAMINATION**

- Applicants determined eligible for further processing will be administered a written psychological examination, along with a follow-up interview and evaluation by a licensed psychologist.

## **MEDICAL EXAMINATION**

- Applicants determined eligible for further processing must pass a medical examination and be found physically qualified by a physician approved by the Rhode Island Police Officer's Commission on Standards and Training. This examination consists of the following requirements:
  - An applicant must possess visual acuity of 20/30, corrected, in each eye;
  - An applicant must possess normal color and depth perception;
  - An applicant must possess normal hearing ability, without the use of mechanical or electronic aids.

## **RECRUIT TRAINING REQUIREMENTS:**

All applicants hired by the Town of Smithfield will be trained at the Rhode Island Municipal Police Academy located within the Flanagan Campus of the Community College of Rhode Island, Lincoln, Rhode Island. Each training academy class lasts fifteen (15) weeks. During the training process, recruits must:

- Successfully complete all academic courses, obtaining a minimum overall score of 70 percent in each course.
- Qualify with their department-issued service weapon, in accordance with Rhode Island State Law.
- Successfully complete a program of physical conditioning, including calisthenics, hand-to-hand combat, and defensive tactics.
- Successfully complete a progressive running program designed to strengthen the cardiovascular and cardio-respiratory systems, and increase aerobic capacity.
- Successfully complete a basic water safety course.
- Successfully complete a pursuit and defensive driving course and demonstrate a high level of proficiency during this course of training.

## **MISCELLANEOUS:**

- Uniforms and gear required by the Municipal Police Training Academy will be provided by the Smithfield Police Department.
- Recruits must provide their own transportation to and from the Training Academy.
- Upon appointment as sworn police officers of the Smithfield Police Department, officers begin a one (1) year probationary period.

## **DUTIES AND RESPONSIBILITIES**

The duties and responsibilities of Smithfield police officers include the protection of life and property, maintenance of public order, investigation of criminal and non-criminal activities, arrest of traffic and criminal violators, collection and preservation of evidence, delivery of crime prevention and community policing services, and other law enforcement related services.

## **SALARY AND BENEFITS:**

- A first year patrol officer will receive an annual salary of \$40,098.24 (\$771.12 per week).
- Health care benefits, with a 20% co-pay not to exceed \$1,400.00 annually, are provided.

- Paid premiums for life insurance in the amount of \$50,000.
- Annual cleaning and clothing allowances are provided.
- Educational reimbursement for law enforcement courses.
- A longevity supplement is paid at the beginning of the 6th year of employment and increases one-half percent, per year, at the beginning of the 9th and each subsequent year of employment.
- The schedule for the uniform patrol officer consists of 4 days on-duty, followed by 2 days off-duty.
- There are 13 paid holidays and 15 sick leave days per year.
- Annual vacation time is listed as follows:

1 - 5 years .....	(16) working days
6 - 10 years .....	(20) working days
11 - 15 years .....	(24) working days
15 years and over .....	(29) working days

- Membership in the Rhode Island Employees Retirement System.
- A member of the Smithfield Police Department may retire after 20 years of service.

Note: The above stated benefits are enumerated in the existing collective bargaining agreement between the Town of Smithfield and Smithfield Fraternal Order of Police, Lodge #17.



# TOWN OF SMITHFIELD SMITHFIELD POLICE DEPARTMENT

215 Pleasant View Avenue  
Smithfield, Rhode Island 02917-1799



## POLICE OFFICER APPLICATION FOR EMPLOYMENT

This application must be typed or clearly printed in ink. All items in this application must be filled in completely, correctly and truthfully, to the best of your knowledge, and signed by the applicant. Any applications that are incomplete and/or illegible may be rejected by the Town of Smithfield.

### SECTION I - PERSONAL HISTORY

NAME: Last		First	Middle	
PRESENT HOME ADDRESS		CITY	STATE	ZIP CODE
MAILING ADDRESS - If Different				
DATE OF BIRTH (MM/DD/YR)		SOCIAL SECURITY NUMBER		HOME TELEPHONE NUMBER
ARE YOU A RESIDENT OF R.I.? YES <input type="checkbox"/> NO <input type="checkbox"/>		IF NO, THEN WHAT STATE?		ARE YOU A CITIZEN OF THE U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
ARE YOU A LICENSED AUTOMOBILE OPEARTOR? YES <input type="checkbox"/> NO <input type="checkbox"/>		OPERATOR LICENSE NUMBER		STATE
HAS YOUR LICENSE EVER BEEN SUSPENDED OR REVOKED? IF YES, WHAT STATE AND REASON. YES <input type="checkbox"/> NO <input type="checkbox"/> STATE _____ REASON _____				
HAVE YOU EVER SUBMITTED AN APPLICATION FOR EMPLOYMENT WITH THE SMITHFIELD POLICE DEPARTMENT? IF YES, LIST DATES. YES <input type="checkbox"/> NO <input type="checkbox"/> DATES _____				
HAVE YOU EVER SUBMITTED AN APPLICATION WITH ANY OTHER LAW ENFORCEMENT AGENCY IN THE U.S.? IF YES, INDICATE THE AGENCY/S AND THE DATE/S OF THE APPLICATIONS. YES <input type="checkbox"/> NO <input type="checkbox"/>				
AGENCY			DATE	

## SECTION II - EDUCATION

DATES				SCHOOLS / COLLEGES			
FROM		TO					
MO.	YR.	MO.	YR.				
				HIGH SCHOOL	MAJOR	DIPLOMA OR DEGREE	
				ADDRESS	CITY / TOWN	STATE	
				COLLEGE OR UNIVERISTY	MAJOR	DIPLOMA OR DEGREE	
				ADDRESS	CITY / TOWN	STATE	
				COLLEGE OR UNIVERSITY	MAJOR	DIPLOMA OR DEGREE	
				ADDRESS	CITY / TOWN	STATE	
				OTHER EDUCATIONAL INSTITUTIONS	MAJOR	DIPLOMA OR DEGREE	
				ADDRESS	CITY / TOWN	STATE	

WERE YOU EVER SUSPENDED, DISMISSED, OR EXPELLED FROM ANY OF THE ABOVE SCHOOLS OR ANY OTHER EDUCATIONAL INSTITUTIONS, DURING YOUR SCHOLASTIC CAREER?

YES  NO  SCHOOL \_\_\_\_\_ DATE \_\_\_\_\_ TYPE OF ACTION \_\_\_\_\_

LIST ANY AWARDS, HONORS, CITATIONS, POSITIONS HELD IN SCHOOL ORGANIZATIONS, ATHLETIC ENDEAVORS, OR OTHER SPECIAL RECOGNITION YOU HAVE RECEIVED WHILE ATTENDING SCHOOL

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

### SECTION III - FORMER ADDRESSES

LIST CHRONOLOGICALLY ALL OF YOUR RESIDENCES IN THE PAST TEN YEARS, INCLUDING THOSE IN THE MILITARY (OFF BASE) AND THOSE WHILE AWAY FOR SCHOOL IF APPLICABLE. PLEASE ACCOUNT FOR ALL TIME. USE ANOTHER SHEET OF PAPER IF NECESSARY.

DATES				STREET ADDRESS	CITY	STATE	ZIP
FROM		TO					
MO.	YR.	MO.	YR.				

### SECTION IV - MILITARY SERVICE RECORD

Read and Answer **ALL BOXES** within this section, if applicable.

HAVE YOU EVER SERVED ON ACTIVE DUTY IN THE ARMED FORCES OF THE U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>	BRANCH OF MILITARY SERVICE	
HIGHEST RANK ATTAINED:      DATE COMMISSIONED (If applicable)	TYPE OF DISCHARGE	BASIS OF DISCHARGE
SERIAL NUMBER      DATES OF ACTIVE DUTY (MM/DD/YY)  FROM      /      /      TO      /      /	WAS ANY TYPE OF DISCIPLINARY ACTION TAKEN AGAINST YOU WHILE IN THE SERVICE? YES <input type="checkbox"/> NO <input type="checkbox"/>  ACTION:	
HAVE YOU OR ARE YOU NOW SERVING IN A MILITARY RESERVE UNIT? IF YES, THEN WHAT BRANCH?	YES <input type="checkbox"/> NO <input type="checkbox"/>	BRANCH:
HAVE YOU OR ARE YOU NOW SERVING IN A NATIONAL GUARD UNIT? IF YES, THEN WHAT UNIT?	YES <input type="checkbox"/> NO <input type="checkbox"/>	BRANCH:

### SECTION V - EMPLOYMENT HISTORY

LIST ALL EMPLOYMENT CHRONOLOGICALLY, INCLUDING SUMMER AND PART-TIME EMPLOYMENT, FOR THE LAST FIVE YEARS. BE SURE TO ACCOUNT FOR TIME WHILE UNEMPLOYED, IF APPLICABLE. ALL TELEPHONE NUMBERS ARE MANDATORY.

COMPANY NAME	NAME OF SUPERVISOR	TELEPHONE  (      )
ADDRESS / CITY / STATE		
SALARY / WAGES	TYPE OF WORK	POSITION
STARTING DATE  /      /	ENDING DATE  /      /	REASON FOR LEAVING

## SECTION V - EMPLOYMENT HISTORY (continued)

COMPANY NAME	NAME OF SUPERVISOR	TELEPHONE (     )
ADDRESS / CITY / STATE		
SALARY / WAGES	TYPE OF WORK	POSITION
STARTING DATE /   /	ENDING DATE /   /	REASON FOR LEAVING

COMPANY NAME	NAME OF SUPERVISOR	TELEPHONE (     )
ADDRESS / CITY / STATE		
SALARY / WAGES	TYPE OF WORK	POSITION
STARTING DATE /   /	ENDING DATE /   /	REASON FOR LEAVING

COMPANY NAME	NAME OF SUPERVISOR	TELEPHONE (     )
ADDRESS / CITY / STATE		
SALARY / WAGES	TYPE OF WORK	POSITION
STARTING DATE /   /	ENDING DATE /   /	REASON FOR LEAVING

COMPANY NAME	NAME OF SUPERVISOR	TELEPHONE (     )
ADDRESS / CITY / STATE		
SALARY / WAGES	TYPE OF WORK	POSITION
STARTING DATE /   /	ENDING DATE /   /	REASON FOR LEAVING

HAVE YOU EVER BEEN DISMISSED OR FORCED TO RESIGN FROM A POSITION?

YES     NO

IF YES, GIVE NAME OF EMPLOYER \_\_\_\_\_

## SECTION VI - CHARACTER REFERENCES

LIST THREE REFERENCES, WHO ARE REPUTABLE CITIZENS OF THEIR COMMUNITIES, AND ARE WILLING TO ATTEST TO YOUR CHARACTER AND REPUTATION. LIST THOSE WHO HAVE KNOWN YOU FOR AT LEAST FIVE YEARS, PREFERABLY THE LAST FIVE YEARS. (DO NOT INCLUDE ANY PRESENT OR PAST EMPLOYERS. ANY RELATIVES BY BLOOD OR MARRIAGE, OR SCHOOL TEACHERS).

COMPLETE NAME	OCCUPATION	NO. OF YEARS KNOWN	
RESIDENCE ADDRESS	CITY	STATE	TELEPHONE (    )
BUSINESS ADDRESS	CITY	STATE	TELEPHONE (    )

COMPLETE NAME	OCCUPATION	NO. OF YEARS KNOWN	
RESIDENCE ADDRESS	CITY	STATE	TELEPHONE (    )
BUSINESS ADDRESS	CITY	STATE	TELEPHONE (    )

COMPLETE NAME	OCCUPATION	NO. OF YEARS KNOWN	
RESIDENCE ADDRESS	CITY	STATE	TELEPHONE (    )
BUSINESS ADDRESS	CITY	STATE	TELEPHONE (    )

## SECTION VII - COURT RECORDS

HAVE YOU EVER PLED GUILTY, NOLO CONTENDRE, OR BEEN CONVICTED OF ANY MISDEMEANOR OR FELONY OFFENSE?

YES

NO

IF YES, LIST ANY CONVICTIONS BELOW.

DATE	PLACE AND DEPARTMENT	CHARGE (S)	FINAL DISPOSITION

## SECTION VIII - DRIVING RECORD

LIST ALL MOTOR VEHICLE VIOLATIONS YOU HAVE RECEIVED OVER THE LAST TEN YEARS.

DATE	VIOLATION	POLICE DEPARTMENT	DISPOSITION

LIST ALL ACCIDENTS YOU HAVE BEEN INVOLVED IN WHILE OPERATING A MOTOR VEHICLE OVER THE LAST TEN YEARS.

DATE	TYPE	POLICE DEPARTMENT	WERE YOU INJURED?	WERE YOU FOUND AT FAULT?
			YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

## PERSONAL QUESTIONNAIRE

LIST ANY SPECIAL SKILLS OR TRAINING YOU HAVE ACQUIRED THAT WOULD BE BENEFICIAL TO THE SMITHFIELD POLICE DEPARTMENT. (INCLUDE ANY LANGUAGE SKILLS, FIREARMS TRAINING, COMPUTER SKILLS, ETC.)

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LIST ANY AWARDS, CERTIFICATES, OR HONORS RECEIVED, OTHER THAN THOSE LISTED UNDER "SECTION II - EDUCATION" OF THIS APPLICATION.

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LIST ANY PUBLIC SERVICE OR COMMUNITY ACTIVITIES IN WHICH YOU ARE CURRENTLY INVOLVED OR HAVE BEEN INVOLVED IN PAST YEARS.

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## PERSONAL QUESTIONNAIRE (continued)

IS THERE ANYTHING IN YOUR BACKGROUND OR PERSONAL HISTORY THAT WOULD ADVERSELY AFFECT YOUR ABILITY TO PERFORM THE DUTIES AND RESPONSIBILITIES OF A POLICE OFFICER? YES  NO  IF YES, EXPLAIN BELOW.

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**EXPLAIN IN YOUR OWN WORDS WHY YOU ARE INTERESTED IN BECOMING A MEMBER OF THE SMITHFIELD POLICE DEPARTMENT. (PLEASE ATTACH A SEPARATE PIECE OF PAPER FOR THIS RESPONSE, WHICH SHOULD NOT EXCEED ONE PAGE.)**

I HAVE READ THIS APPLICATION AND THE ENTRIES MADE HEREIN, AND HEREBY STATE THAT ALL SUCH STATEMENTS MADE BY ME ARE TRUE. I UNDERSTAND THAT ANY FALSE OR MISLEADING INFORMATION GIVEN IN THIS APPLICATION MAY SERVE AS THE BASIS FOR DISMISSAL FROM THE RECRUIT SELECTION PROCESS.

I AGREE TO THESE CONDITIONS, AND I HEREBY CERTIFY THAT ALL STATEMENTS MADE BY ME ON THIS APPLICATION ARE COMPLETE, CORRECT AND TRUTHFUL TO THE BEST OF MY KNOWLEDGE.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_