

## **Greenville Town Marshal Basic Requirements and Application**

### **INTRODUCTION:**

No applicant or employee shall be discriminated against, or favored with respect as to the hiring, tenure terms, conditions, or privileges of employment or any matter directly or indirectly related to employment because of race, sex, religion, national origin or ancestry. Each applicant or employee will be limited only by his own abilities and qualifications, and the Department will endeavor to select, hire, and maintain in its employ only the best qualified persons available for any particular position.

### **OVERVIEW:**

In order for the Greenville Town Board to appoint the most qualified Marshal the Greenville Town Board has adopted to standardize the hiring process. The process has multiple steps to evaluate each applicant's physical strength, general aptitude, ability to handle stress and overall background information through a variety of means. A brief description of the hiring process has been provided.

- A. Application review
- B. Physician Fitness Test
- C. Written Exam
- D. Greenville Board Interview

Upon successful completion of the above steps, the applicant will have to successfully complete all or any part of the following conditions to become the Greenville Town Marshal.

- E. Background Investigation
- F. Psychological Examination
- G. Medical Examination
- H. Greenville Town Board Interview

### **PHYSICAL FITNESS TEST:**

If you fail any part of the physical fitness test you fail the entire test and will not need to continue. The minimum standards have been provided in this packet on page 13.

### **WRITTEN EXAM:**

The written exam is a general aptitude test and there will be no study materials given to the applicants by the Floyd County Sheriff's Department. The exams will be graded by an independent service. Once the Floyd County Sheriff's Department is notified of the scores each applicant will be notified if they passed or failed.

### **INSTRUCTIONS:**

No exceptions will be made for anyone not meeting all requirements. This form must be filled out in ink in handwriting of the applicant. All questions must be answered. If the question does not apply state: None, n/a or does not apply.

In the event you change your address or phone number after filling out application, mail notification to including new address and/or phone number to the Greenville Town Hall immediately.

Application will not be considered until complete in every aspect and any misrepresentation of facts will disqualify the applicant.

Complete application will be kept for three (3) years from date of selection process. After that time the application will be considered inactive and will be destroyed.

**COMPENSATION:**

- A. Life insurance will be provided by the Town of Greenville.
- B. Marshal's position is a part-time position. The pay is \$25,000 per year for thirty (30) hours of work per week.

**BASIC REQUIREMENTS:**

- A. Applicant must meet the following initial standards to be considered for the position of the Greenville Town Marshal:
  - 1. Must be a citizen of the United States.
  - 2. Must live within ten (10) minutes of the Greenville Town Hall.
  - 3. Must have a minimum of five (5) years law enforcement or four (4) years military police (MP) experience.
  - 4. Must be at least twenty-one (21) years of age upon appointment.
  - 5. Must not have a record of conviction of felony.
  - 6. Must have a high school diploma or its equivalency as accepted by the Superintendent of Public Instructions for the State of Indiana.
  - 7. Must agree to a thorough physical examination by a physician designated by the Town Board of Greenville. No recourse to a negative judgment of the physician is permitted.
  - 8. Must agree to a thorough psychological examination by a psychologist/psychiatrist designated by the Town Board of Greenville. No recourse to a negative judgment of the physician is permitted.
  - 9. Must have a non-negligent automobile Crash record.
  - 10. Must have a valid Indiana Driver's License.
  - 11. Must have a verifiable good record of previous employment.
  - 12. Must be in sound mental and physical health.
  - 13. Must take a physical fitness test.
  - 14. Must take a written test.
  - 15. Must be willing to appear for a Department interview with the Greenville Town Board.
  - 16. Must be willing to submit to a thorough character investigation by the Greenville Town Board.
  - 17. Must sign a loyalty oath.
  - 18. Must be willing to work a revolving shift schedule, if required.
  - 19. Must submit to being fingerprinted.
  - 20. Vision must be at least 20/100 uncorrected and at least 20/30 corrected in each eye.
  - 21. Meet minimum standards on a physical fitness test administered by a person designated by the Greenville Town Board or a Greenville Town Board member.
- B. Marshal shall be hired:
  - 1. By a majority vote of the Greenville Town Board.
  - 2. Satisfactory completion of the selection procedures prescribed by the Greenville Town Board.
  - 3. Probationary period of six (6) months, during which time the probationer may be discharged by a majority vote of the Greenville Town Board without the right of a hearing before the board.
  - 4. Marshal's compensation is listed above.
  - 5. Marshal is required to be on duty at the beginning and end of school when school is in session whenever possible.
  - 6. Become a member of the Indiana Marshals Association.

7. Must be able to attend monthly Greenville Town Board meetings.
8. Marshal will follow all aspects of the Marshal's Department Standard Operating Procedure (SOP).
9. Marshal will be required to maintain physician fitness requirements on page 13 and can be required to pass the physical fitness exam at any time during employment.

**Investigation of Applicant(s):**

The following format shall be utilized by investigators who are making investigations concerning applicants for the position of the Greenville Marshal. Every effort should be made to find positives about an applicant as well as negatives. All negative information discovered should be confirmed by the investigator. Investigator will make a complete report of the applicant in the following areas:

- A. Employment record
- B. References
- C. Neighborhood
- D. Credit check
- E. Criminal record check
- F. Verification of address
- G. Check of education
- H. Check of State of Indiana residence
- I. Interview with applicant

**Training:**

- A. Must complete Indiana Law Enforcement forty (40) hour basic course.
- B. Must complete Indiana Law Enforcement Academy (ILEA) Tier II Basic Training.
- C. If approved, participate in training and qualification courses with Floyd County Sheriff Department.

Office of the Marshal  
Greenville Marshal Department  
9706 Clark Street  
PO Box 188  
Greenville, IN 47124-0188  
812-923-3305

## Application for Greenville Marshal's Department

Check One:

Marshal: \_\_\_\_\_

Reserve: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle Maiden

Address: \_\_\_\_\_  
Street or Rural Apt. No.

\_\_\_\_\_  
City County State Zip

Telephone: \_\_\_\_\_  
Home Cell

**AUTHORIZATION TO RELEASE INFORMATION**

I, \_\_\_\_\_, hereby authorize any person, agency, partnership, or corporation having any information concerning my CREDIT RECORD, EDUCATIONAL RECORD, MEDICAL RECORD, EMPLOYMENT RECORD, MILITARY RECORD or SELECTIVE SERVICE RECORDS, to release such information to the Greenville Marshal's Office. This information is to be used for possible employment with the Greenville Marshal's Office and will not be available for public inspection.

I hereby release such person, agency, partnership, or corporation from any liability which may incur releasing this information to the Greenville Marshal's Office and/or Greenville Town Board, including liability under any Federal Law.

I am furnishing my Social Security Number on a voluntary basis with the understanding that such is not required by Federal Law or regulation. Should there be any questions as to the validity of the release, you may contact the Greenville Town Board.

\_\_\_\_\_  
FULL NAME (print)

\_\_\_\_\_  
FULL NAME (signature)

\_\_\_\_\_  
DATE OF RELEASE

\_\_\_\_\_  
SSN

\_\_\_\_\_  
TELEPHONE NUMBER

\_\_\_\_\_  
CURRENT ADDRESS

\_\_\_\_\_

\_\_\_\_\_  
WITNESS (print)

\_\_\_\_\_  
WITNESS (signature)

**PERSONAL INFORMATION:**

1. Are you a US Citizen? Yes / No

2. SSN: \_\_\_\_\_

3. Date of Birth: \_\_\_\_\_

4. Height:  
Feet: \_\_\_\_\_ Inches: \_\_\_\_\_

5. Weight: \_\_\_\_\_ lbs

6. High School Graduation Date: \_\_\_\_\_

7. Do you currently possess a valid automobile drivers license? \_\_\_\_\_

License Number: \_\_\_\_\_ State: \_\_\_\_\_

Is your license restricted? \_\_\_\_\_ If yes, for what reason? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Number of years driving experience? \_\_\_\_\_

8. Residences in the last ten (10) years:

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

9. Are you a proprietor or part owner of any business or firm? \_\_\_\_\_

\_\_\_\_\_  
10. What special skills have you developed through hobbies, occupation or other special interests? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**FAMILY INFORMATION:**

1. Marital Status (circle one):    Married        Single        Widowed  
  Divorced        Separated

2. Dependents:

Name	Age	Relationship

3. Father's Name

\_\_\_\_\_  
Name    Address

4. Mother's Name

\_\_\_\_\_  
Name    Address

5. Spouse's Name (if applicable)

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Name (include maiden name if applicable)                      Address

6. Is spouse employed? \_\_\_\_\_ If so where? \_\_\_\_\_

**EDUCATION INFORMATION**

School Name & Address	Course of Study	Last Year Completed	Graduate	Degree/ Diploma
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High School		1 2 3 4	Yes / No	
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College		1 2 3 4	Yes / No	
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Other		1 2 3 4	Yes / No	
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**Military History and Status**

1. Military History                      Organization: \_\_\_\_\_

Date of Service	Rank or Grade	Reason for Leaving Service?
From:              To:	_____	

Military Citation or other Awards Received: \_\_\_\_\_  
\_\_\_\_\_

Are you currently a member of organized reserve? \_\_\_\_\_ If so, rank \_\_\_\_\_  
\_\_\_\_\_



**PHYSICAL STATUS**

1. Have you visited or received treatment or surgical procedures from a physician or other practitioner during the last three (3) years? \_\_\_\_\_ if so, explain and give reason:

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2. Do you have any specific work limitations as the result of mental or physical problems? \_\_\_\_\_ If so, explain and give reasons on back of page

**EMPLOYMENT INFORMATION**

1. List your employment starting with graduation from high school

Dates	Employer Name	Address	Position Held	Ending Salary	Reason for Leaving
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2. Have you ever left a position because of ill health, the nature of which was either mental or physical? \_\_\_\_\_ If so, explain on back of page.
3. Have you ever been discharged from a position of employment? \_\_\_\_\_  
If yes, explain fully on back of page.
4. List four (4) non-relative references

Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

**MISCELLANEOUS**

1. List past or present membership to all clubs and/or organizations  
(Political, Fraternal, Social, Ect)

\_\_\_\_\_  
\_\_\_\_\_

2. Anything else that we should know about you? \_\_\_\_\_

\_\_\_\_\_

**VEHICLE ACCIDENT AND ARREST RECORD:**

1. List vehicle accidents in which you have been involved in as a driver.

\_\_\_\_\_  
Date                      Location                      What Happened

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Date	Location	What Happened
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Date	Location	What Happened
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Date	Location	What Happened
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2. Have you ever been arrested or received a ticket for a traffic offense? \_\_\_\_\_  
If yes, describe below:

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Date	Location	What Happened
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Date	Location	What Happened
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Date	Location	What Happened
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Date	Location	What Happened
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3. Have you ever been arrested for a criminal offense? \_\_\_\_\_  
If yes, describe below:

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Date	Location	What Happened
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Date	Location	What Happened
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Date	Location	What Happened
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Date	Location	What Happened
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Mount photo securely  
In this space.

Photographs to be front view, head and shoulders, 2 ½ inches square. Must be taken within the last six (6) months.

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The facts set forth in my application for employment with the Greenville Marshal's office are true and complete. I understand that false statements on this application shall be considered sufficient cause for elimination from further consideration.

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

Check application carefully to be certain all items are complete before submitting.

Mail to: Greenville Marshal  
PO Box 188  
Greenville, IN 47124

OR

Deliver to Town Hall in a sealed envelope.

AN EQUAL OPPORTUNITY EMPLOYER

**PHYSICAL FITNESS REQUIREMENTS**

<b>Test</b>	<b>Standard</b>
Vertical Jump	13.5 Inches
One Minute Sit-ups	24
300 Meter Run	82 Seconds
Maximum Push-ups	21
1.5 Mile Run	18 Minutes 56 Seconds