



SAULT STE. MARIE POLICE SERVICE

APPLICATION FOR POSITION OF CIVILIAN EMPLOYEE

*To be considered as a Civilian Employee 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 along with other conditions as set out in the information sheet accompanying this application.*

ALL APPLICANTS FOR THE POSITION OF CIVILIAN EMPLOYEE MUST:

1. Be a Canadian citizen or permanent resident of Canada and be legally entitled to work in Canada.
2. Be of good moral character and habits.
3. Be able to type at a minimum speed of 35 words per minute.
4. Never have been convicted of a Criminal Offence committed in any jurisdiction for which a pardon has not been granted and provide proof of date of birth in order to verify this information.
5. Be prepared to undergo and successfully complete a structured interview, along with medical testing, vision field-testing, auditory standard testing and any other job-appropriate tests as set by the Police 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.

INSTRUCTIONS TO APPLICANTS

1. Review the minimum qualifications required for the position of Civilian Employee as noted above and on the information page included with this application.
2. Complete the Application Form and Career Profile set out on the following three pages in your own handwriting and in ink.
3. Return the completed Application Form 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: Human Resources Coordinator. The completed application form, resume, and cover letter can also be submitted electronically to humanresources@ssmps.org
4. **PLEASE INCLUDE A RESUME AND COVER LETTER WITH YOUR APPLICATION.**
5. Only those candidates who successfully meet the requirements of each step in the selection process will succeed to the next level. Due to the high level of expected response, we are only able to contact candidates who reach the next level in the selection process. Please do not contact us to determine the status of your application.
6. Candidates who are selected for a conditional offer of employment will be subject to an extensive background and satisfactory reference check.

CIVILIAN 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 along with the conditions set out on the information page included with this application. **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 NAMES(S)	HOME PHONE
		BUSINESS/OTHER
MAILING ADDRESS & POSTAL CODE		

2. EDUCATION

SECONDARY SCHOOL COMPLETED Grade 12 Equivalent OAC (Grade 13) **Include copy of diploma/certificate**

OTHER INSTITUTIONS (College, University, Business, Trade, Technical School etc)

1. <i>Name of Institution</i>	<i>Name of program or major subject area</i>	<i>Certificate/Degree/Diploma granted (include copy if yes)</i> Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Length of program (years/months)</i>	<i>If you have not completed this program provide explanation in the area below "Programs not Completed"</i>
2. <i>Name of Institution</i>	<i>Name of program or major subject area</i>	<i>Certificate/Degree/Diploma granted (include copy if yes)</i> Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Length of program (years/months)</i>	<i>If you have not completed this program provide explanation in the area below "Programs not Completed"</i>
3. <i>Name of Institution</i>	<i>Name of program or major subject area</i>	<i>Certificate/Degree/Diploma granted (include copy if yes)</i> Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Length of program (years/months)</i>	<i>If you have not completed this program provide explanation in the area below "Programs not Completed"</i>
4. <i>Name of Institution</i>	<i>Name of program or major subject area</i>	<i>Certificate/Degree/Diploma granted (include copy if yes)</i> Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Length of program (years/months)</i>	<i>If you have not completed this program provide explanation in the area below "Programs not Completed"</i>

Programs Not Completed (Use corresponding numbers to programs above)

1. Currently enrolled Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Number of months/years completed</i>	<i>Anticipated completion date</i>	<i>Contact person at institution for verification (name & phone number)</i>
2. Currently enrolled Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Number of months/years completed</i>	<i>Anticipated completion date</i>	<i>Contact person at institution for verification (name & phone number)</i>
3. Currently enrolled Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Number of months/years completed</i>	<i>Anticipated completion date</i>	<i>Contact person at institution for verification (name & phone number)</i>
4. Currently enrolled Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Number of months/years completed</i>	<i>Anticipated completion date</i>	<i>Contact person at institution for verification (name & phone number)</i>

3. EMPLOYMENT (Ensure list is complete and contains every employer. Begin with most recent employment and continue in reverse chronological order)

1. Employer Name & Address	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 currently employed please indicate if you prefer that this person not be contacted PRIOR to any offer of employment. Please do not contact <input type="checkbox"/>	
2. Employer Name & Address	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 currently employed please indicate if you prefer that this person not be contacted PRIOR to any offer of employment. Please do not contact <input type="checkbox"/>	
3. Employer Name & Address	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 currently employed please indicate if you prefer that this person not be contacted PRIOR to any offer of employment. Please do not contact <input type="checkbox"/>	
4. Employer Name & Address	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 currently employed please indicate if you prefer that this person not be contacted PRIOR to any offer of employment. Please do not contact <input type="checkbox"/>	

Do you possess additional licenses, certificates, training programs, career-related workshops etc. for any other specialized skill not previously mentioned? If yes, please list and include dates of completion.

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Have you been involved in community or volunteer activities in which you gave up of your time for a purpose that benefited an individual, group or organization? If yes please list and include name of the organization, position and dates of participation.

Organization	Position	Currently Active	Hours per week/month	Start Date	Contact person for verification Name and Phone#
1)					
2)					
3)					
4)					

4. COMPUTER SKILLS

Please rate yourself on your proficiency with the following software packages. You may list and rate yourself on similar or other career-related software packages below.

NOTE: 1= HAVE NOT USED 2=MINIMAL KNOWLEDGE 3=GOOD WORKING KNOWLEDGE

1) MICROSOFT OFFICE	1	2	3
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) WORD	1	2	3
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) EXCEL	1	2	3
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) ACCESS	1	2	3
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) INTERNET	1	2	3
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PLEASE LIST AND RATE YOURSELF ON ANY SIMILAR OR CAREER-RELATED SOFTWARE WITH WHICH YOU HAVE EXPERIENCE			
6)	1	2	3
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7)	1	2	3
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8)	1	2	3
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9)	1	2	3
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10)	1	2	3
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. WORK-RELATED SKILLS

Please list those job-related skills you possess over and above the basic skills you believe are required for your applied position. List those skills you would like to discuss in an interview which best describe your capabilities as they relate to the applied position.

1. _____

2. _____

3. _____

IF OFFERED A POSITION WITH THE SAULT STE. MARIE POLICE SERVICE AS A CIVILIAN EMPLOYEE I AGREE TO ABIDE BY AND BE SUBJECT TO ALL RULES, REGULATIONS OR OTHER SUCH DIRECTION ESTABLISHED BY THE SAULT STE. MARIE POLICE SERVICES BOARD, OR THE CHIEF OF POLICE, AS IT RELATES TO THE DUTIES OF A MEMBER OF THE SAULT STE. MARIE POLICE SERVICE.

I understand that I may be required to provide legal proof of my ability to work in Canada and submit to a medical examination, if a conditional offer of employment is made. I certify that the information contained in this application is true and complete, to my knowledge. I understand that a false statement may disqualify me from my employment or cause my dismissal. I authorize any person, educational institution, or organization I have listed as a reference to disclose in good faith any information they may have regarding my qualifications for employment. I will hold you and any of my former employers, educational institutions and any other persons giving references, free of liability for providing this information and any other reasonable and necessary information related to my application for employment.

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 HUMAN RESOURCES COORDINATOR, SAULT STE. MARIE POLICE SERVICE, 580 SECOND LINE EAST, SAULT STE. MARIE, ONTARIO, P6B 4K1, (705) 949-6300 EXT. 327.