# ACCELERATED ENTRY / LATERAL TRANSFER APPLICATION

Persons currently certified with the Illinois Law Enforcement Training and Standards Board may be considered for accelerated entry / lateral transfer. Certified accelerated entry / lateral transfer candidates must affirm to and provide proof of meeting the following requirements (attach to application email):

**Application Requirements:**

|  |  |
| --- | --- |
| * U.S. Citizen | * Past & Current Performance Evaluations |
| * Valid Driver’s License | * Past & Current Work Assignments |
| * Must not have certain misdemeanor convictions and no felony convictions | **Accelerated Process Consists of:** |
| * Good driving record | * Interview |
| * Good moral character | * Background Investigation |
| * ILETSB Certificate | * Polygraph |
| * Basic Training Certificate | **After Conditional Offer:** |
| * Documentation of at least 2 years Current Law Enforcement Employment | * Psychological Exam * Medical Exam with a Drug Screen |

**INSTRUCTIONS TO APPLICANT:**

1. Please fully and accurately complete this Application for Employment. Incomplete applications will not be considered.
2. You understand and agree that all information furnished in this application will be verified by the Village of South Barrington or its authorized representative. You waive any right you may have to notice from any individuals and organizations named or referred to in this application prior to the release of any employment information to the Village of South Barrington. You hereby authorize all individuals and organizations named or referred to in this application and any law enforcement organization to give the Village of South Barrington all information relative to such verification and hereby release such individuals, organizations, and the Village of South Barrington from any and all liability for any claim or damage resulting therefrom.
3. Save the completed application and email with the required documents attached titled Lateral Application to: mgarrison@southbarrington.org

### **PERSONAL INFORMATION**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| LAST NAME: | | FIRST NAME: | | | MIDDLE: | | | AGE: | | DATE OF BIRTH: |
| CURRENT HOME ADDRESS: | | | CITY: | | | | STATE: | | | ZIP CODE: |
| CELL PHONE: | | OTHER PHONE: | | | | EMAIL: | | | | |
| SOCIAL SECURITY #: | DRIVER’S LICENSE #: | | | DL STATE: | | LIST ALL SOCIAL MEDIA PROFILE (SMP) NAMES: | | | | |
| SMP NAME #2 | | SMP NAME #3 | | | | SMP NAME #4 | | | | |
| F.O.I.D. CARD # | | F.O.I.D. EXP: | CITY OF BIRTH: | | | STATE OF BIRTH: | | | U.S. CITIZEN? YES/NO | |
| ILLINOIS PTB# | |

**RESIDENCE HISTORY**

List all your addresses for the last ten years starting with your present address:

|  |  |  |
| --- | --- | --- |
| FROM (mm/yy): | TO (mm/yy): | ADDRESS, CITY, STATE, ZIP CODE: |
| FROM (mm/yy): | TO (mm/yy): | ADDRESS, CITY, STATE, ZIP CODE: |
| FROM (mm/yy): | TO (mm/yy): | ADDRESS, CITY, STATE, ZIP CODE: |
| FROM (mm/yy): | TO (mm/yy): | ADDRESS, CITY, STATE, ZIP CODE: |
| FROM (mm/yy): | TO (mm/yy): | ADDRESS, CITY, STATE, ZIP CODE: |

**EDUCATIONAL INFORMATION**

List all schools, colleges, technical schools, etc.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| SCHOOL/COLLEGE NAME: | ATTENDED FROM (mm/yy): | ATTENDED TO (mm/yy): | CREDITS AWARDED: | DEGREE: |
| ADDRESS, CITY, STATE, ZIP CODE | | | | |
| SCHOOL/COLLEGE NAME: | ATTENDED FROM (mm/yy): | ATTENDED TO (mm/yy): | CREDITS AWARDED: | DEGREE: |
| ADDRESS, CITY, STATE, ZIP CODE | | | | |
| SCHOOL/COLLEGE NAME: | ATTENDED FROM (mm/yy): | ATTENDED TO (mm/yy): | CREDITS AWARDED: | DEGREE: |
| ADDRESS, CITY, STATE, ZIP CODE | | | | |
| SCHOOL/COLLEGE NAME: | ATTENDED FROM (mm/yy): | ATTENDED TO (mm/yy): | CREDITS AWARDED: | DEGREE: |
| ADDRESS, CITY, STATE, ZIP CODE | | | | |
| SCHOOL/COLLEGE NAME: | ATTENDED FROM (mm/yy): | ATTENDED TO (mm/yy): | CREDITS AWARDED: | DEGREE: |
| ADDRESS, CITY, STATE, ZIP CODE | | | | |
| SCHOOL/COLLEGE NAME: | ATTENDED FROM (mm/yy): | ATTENDED TO (mm/yy): | CREDITS AWARDED: | DEGREE: |
| ADDRESS, CITY, STATE, ZIP CODE | | | | |

### **EMPLOYMENT HISTORY**

List all jobs you have held in the last ten years starting with your current employer:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| EMPLOYER NAME: | WORKED FROM (mm/yy): | | WORKED TO (mm/yy): | TITLE/POSITION: |
| ADDRESS, CITY, STATE, ZIP CODE | | | | |
| SUPERVISOR NAME & TITLE: | SUPERVISOR PHONE #: | | SUPERVISOR EMAIL: | |
| EXPLAIN WHAT YOUR DUTIES ARE/WERE: | | REASON FOR LEAVING: | | |
| EMPLOYER NAME: | WORKED FROM (mm/yy): | | WORKED TO (mm/yy): | TITLE/POSITION: |
| ADDRESS, CITY, STATE, ZIP CODE | | | | |
| SUPERVISOR NAME & TITLE: | SUPERVISOR PHONE #: | | SUPERVISOR EMAIL: | |
| EXPLAIN WHAT YOUR DUTIES ARE/WERE: | | REASON FOR LEAVING: | | |
| EMPLOYER NAME: | WORKED FROM (mm/yy): | | WORKED TO (mm/yy): | TITLE/POSITION: |
| ADDRESS, CITY, STATE, ZIP CODE | | | | |
| SUPERVISOR NAME & TITLE: | SUPERVISOR PHONE #: | | SUPERVISOR EMAIL: | |
| EXPLAIN WHAT YOUR DUTIES ARE/WERE: | | REASON FOR LEAVING: | | |
| EMPLOYER NAME: | WORKED FROM (mm/yy): | | WORKED TO (mm/yy): | TITLE/POSITION: |
| ADDRESS, CITY, STATE, ZIP CODE | | | | |
| SUPERVISOR NAME & TITLE: | SUPERVISOR PHONE #: | | SUPERVISOR EMAIL: | |
| EXPLAIN WHAT YOUR DUTIES ARE/WERE: | | REASON FOR LEAVING: | | |
| EMPLOYER NAME: | WORKED FROM (mm/yy): | | WORKED TO (mm/yy): | TITLE/POSITION: |
| ADDRESS, CITY, STATE, ZIP CODE | | | | |
| SUPERVISOR NAME & TITLE: | SUPERVISOR PHONE #: | | SUPERVISOR EMAIL: | |
| EXPLAIN WHAT YOUR DUTIES ARE/WERE: | | REASON FOR LEAVING: | | |

### **MILITARY SERVICE**

List all Military duty. If none indicate “N/A” and skip to next section:

|  |  |  |  |
| --- | --- | --- | --- |
| MILITARY BRANCH SERVED | SERVED FROM (MM/YY): | SERVED TO (MM/YY): | HIGHEST RANK HELD: |
| WHAT TYPE OF DISCHARGE DID YOU RECEIVE?  HONORABLE HONORABLE OTHER THAN BAD CONDUCT DISHONORABLE ENTRY LEVEL MEDICAL  CONDITIONS HONORABLE SEPARATION | | | |
| WERE YOU EVER CONVICTED AT A COURT MARTIAL?  YES NO IF YES DATE:\_\_\_\_/\_\_\_\_/\_\_\_\_ | IF YES, EXPLAIN: |  |  |
| LIST ANY DISCIPLINARY ACTION YOU RECEIVED: |  |  |  |
| ARE YOU NOW IN THE MILITARY RESERVES?  YES NO | IF YES, LIST BRANCH/STATE/UNIT: |  |  |

### **CRIMINAL HISTORY**

List all criminal and traffic arrests as an adult (18 and older):

|  |  |  |  |
| --- | --- | --- | --- |
| DATE OF ARREST (dd/mm/yyyy): | AGENCY NAME, CITY, STATE: | CHARGES: | DISPOSITION: |
| DATE OF ARREST (dd/mm/yyyy): | AGENCY NAME, CITY, STATE: | CHARGES: | DISPOSITION: |
| DATE OF ARREST (dd/mm/yyyy): | AGENCY NAME, CITY, STATE: | CHARGES: | DISPOSITION: |
| DATE OF ARREST (dd/mm/yyyy): | AGENCY NAME, CITY, STATE: | CHARGES: | DISPOSITION: |
| DATE OF ARREST (dd/mm/yyyy): | AGENCY NAME, CITY, STATE: | CHARGES: | DISPOSITION: |

### **REFERENCES**

List three adults, not related to you, that you have known for a minimum of 5 years:

|  |  |  |
| --- | --- | --- |
| LAST NAME, FIRST NAME, MI | ADDRESS, CITY, STATE, ZIP CODE: | PHONE #: |
| LAST NAME, FIRST NAME, MI | ADDRESS, CITY, STATE, ZIP CODE: | PHONE #: |
| LAST NAME, FIRST NAME, MI | ADDRESS, CITY, STATE, ZIP CODE: | PHONE #: |

## I certify that all the information submitted by me on this application is true and complete. I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

Entering your name, badge number and current Agency’s name shall serve as your electronic signature:

|  |  |  |
| --- | --- | --- |
| LAST NAME, FIRST NAME, MI | BADGE NUMBER: | CURRENT AGENCY NAME: |