



Incorporated in 1869

## Rochester Police Department

Thank you for your interest in the Rochester Police Department. We ask that you type or print your responses as neatly as possible to help us process your information. You must include with your application a copy of your College/University Transcripts or Diploma, and or a copy of your DD214 form if a Veteran. Include a telephone number for all Education and Employment Historical Information. We are committed to selecting only the Best Possible Applicant (s) to become Rochester Police Officers.

The Selection Process will consist of a Written Examination, an Oral Interview, as well as a Background Check. This process will determine our Hiring Selection which will be used to fill current and upcoming vacancies within the Department.

Candidates chosen to become Recruits will be given a Conditional Offer of Employment contingent upon their successful completion to the satisfaction of the Rochester Police Department of a Medical Examination, a Psychological Screening, as well as a Comprehensive Drug Screening test. Recruits must pass the Illinois P.O.W.E.R. Test (Police Officer's Wellness Evaluation Report) prior to their Basic Training.

Please visit our web site at [www.RochesterILPolice.com](http://www.RochesterILPolice.com) to learn more about the Department. Once again, thank you for your interest in the Rochester Police Department.

You must complete the Application accurately and completely in order to be considered. Applications must include DD-214 for former military, and college transcripts.

William D. Marass  
Chief of Police





**Incorporated in 1869**

**Affidavit**  
*For Rochester Police Application*

I hereby swear that there are no willful misrepresentations or omissions in, or falsifications of, the foregoing statement and answers to questions. I am aware that should an investigation disclose such willful misrepresentations, falsifications, or omissions, my application will be rejected and I will be disqualified from applying in the future for any position in the service of the Village of Rochester. If after my acceptance for employment, subsequent investigation should disclose omissions, misrepresentations, or falsifications, it will be just cause for my immediate dismissal.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Sworn to and Subscribed Before Me

This \_\_\_\_\_ Day of \_\_\_\_\_ in the Year \_\_\_\_\_

Notary Public: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

SEAL



**Incorporated in 1869**

**Authority to Release Information**  
*For Rochester Police Application*

To whom it may concern:

I hereby authorize any authorized representative of the Village of Rochester bearing the release or copy thereof, within one year of its date. To obtain any information in your files pertaining to my employment; military, credit, residential, criminal, or educational records including but not limited to, academic achievement, attendance, athletic, personal history, disciplinary, arrest, and conviction records. I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information released is for official use by the Village of Rochester and may be disclosed to such third parties as necessary in the fulfillment of official responsibilities.

I hereby release you, as the custodian of such records, and any educational institution or business establishment, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me because of compliance with this authorization and request to release information, or any attempt to comply with it. Should there be any questions as to the validity of this release, you may contact me at the address or telephone number below.

Applicant's Signature (Full Name): \_\_\_\_\_

Date: \_\_\_\_\_

Type or carefully print the following:

Full Name: \_\_\_\_\_

Other Names Used: \_\_\_\_\_

Current Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

# Rochester Police Department

## **BENEFITS:**

### **14.2 Health Insurance**

The Village provides medical insurance for all permanent full time employees. Employees may purchase additional insurance for their dependents.

Health insurance website: [www.Benefitschoice.IL.gov](http://www.Benefitschoice.IL.gov)

### **14.3 Physical Training and Equipment**

It is in the Village's interest to encourage employee health and fitness, in order to maintain productivity, efficiency and moral. For that reason, physical training facilities and equipment are made available to employees for personal use.

*Officers will perform a quarterly P.O.W.E.R. Test during paid department training hours.*

### **14.4 Retirement Plan**

**The Village of Rochester is a participant of the Illinois Municipal Retirement Fund (IMRF).**

**The Village and employees are subject to the policies, procedures and rules of the IMRF.**

**An employee that is expected to work 1,000 or more hours per year must participate in the IMRF. IMRF website: [www.IMRF.ORG](http://www.IMRF.ORG)**

**The Village of Rochester contributes additional 16.7% of salary to IMRF along with the employee contribution.**

### **Holiday/Vacation/Sick/Personal Days Off:**

- 12 paid Holidays annually
- 12 paid Sick Days annually
- 5 Vacation Days 1<sup>st</sup> Year
- 10 Vacation Days 2-10 Years
- 15 Vacation Days 11-15 Years
- 20 Vacation Days 16+
- 3 Paid Personal Days annually

## **ANCILLARY BENEFITS:**

### **Uniform and Equipment**

- All uniform items and equipment including leather gear, and individual body armor are provided by Rochester Police Department.
- Each officer issued a laser quipped .45 Glock sidearm, AR-15 rifle, and Motorola portable radio.
- Paid membership at local pistol/shotgun/rifle shooting club.
- 24/7 use of Department's fitness training room.
- Access to the Lost Bridge Trail, a 5.7 mile asphalt running/bike trail that originates at the Police Station. Department patrols on marked patrol bike.
- Equipment available to all officers:  
Night Vision Devices, Digital Cameras, Laser Radar Units, In-Car Computers, Portable Breath Testers, In-Car Cameras, Moving Radar Units, Super Benelli M1 Shotgun.

# Rochester Police Department



An Equal Opportunity Employer

## Application for Employment

(Please print or type)

### Applicant Questionnaire Instructions

Fill out this application completely and accurately. All statements in your application are subject to verification. Incorrect or incomplete statements may bar or remove you from employment. If writing space provided is inadequate, use the continuation sheet at the end of this application and identify additional information by page number and question. Use the term "DNA" if the question does not apply.

Position Desired: \_\_\_\_\_ Date Application Returned: \_\_\_\_\_

Name: \_\_\_\_\_ Sex: \_\_\_\_\_

Address: \_\_\_\_\_ Weight: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Height: \_\_\_\_\_

Phone: (home) \_\_\_\_\_ Eye Color: \_\_\_\_\_

(work) \_\_\_\_\_ Hair Color: \_\_\_\_\_

(cell) \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Are You A U.S. Citizen?

Yes  No

Are you currently at least 21 years of age?

Yes  No

Are You Naturalized?

Yes  No

**Date of Birth** \_\_\_\_\_

List any other names and/or aliases you have used or been known by. Please indicate maiden name if applicable.

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

List any scars, birthmarks, tattoos, etc. that you may have.

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

Rochester Police Officers are required to pass regular physical fitness tests. Additionally, Police Officers may be required to physically overpower and control combative subjects. To your knowledge, are there any physical limitations that you possess that may prevent you from performing these required functions?

Yes  No

Currently Rochester Police Officers work 12 hour shifts, both day and night. Additionally, officers may be called upon to work irregular schedules to cover open shifts. Scheduled shifts include weekends and holidays. Are there any reasons that would prevent you from working such a schedule?

Yes  No

Due to the costs involved in training and equipping new officers, the Village of Rochester requires new officers sign a three (3) year service contract with the Village. This contract stipulates that training and equipment expenses be reimbursed to the Village by officers leaving prior to the expiration of their contract. Would you have a problem fulfilling such a contract?

Yes  No

**Residence Information**

List your addresses for the last ten years, starting with your present address.

Address: \_\_\_\_\_ From: (Month & Year) \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ To: (Month & Year) \_\_\_\_\_

Address: \_\_\_\_\_ From: (Month & Year) \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ To: (Month & Year) \_\_\_\_\_

Address: \_\_\_\_\_ From: (Month & Year) \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ To: (Month & Year) \_\_\_\_\_

Address: \_\_\_\_\_ From: (Month & Year) \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ To: (Month & Year) \_\_\_\_\_

Address: \_\_\_\_\_ From: (Month & Year) \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ To: (Month & Year) \_\_\_\_\_

**Educational Information**

High School: \_\_\_\_\_ Grade Point Average: \_\_\_\_\_  
Address: \_\_\_\_\_ Dates Attended: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

College/University: \_\_\_\_\_ Grade Point Average: \_\_\_\_\_  
Address: \_\_\_\_\_ Dates Attended: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Did you graduate from this school?  Yes  No  
Degrees Earned:  Associates  Bachelors  Masters

College/University: \_\_\_\_\_ Grade Point Average: \_\_\_\_\_  
Address: \_\_\_\_\_ Dates Attended: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Did you graduate from this school?  Yes  No  
Degrees Earned:  Associates  Bachelors  Masters

College/University: \_\_\_\_\_ Grade Point Average: \_\_\_\_\_  
Address: \_\_\_\_\_ Dates Attended: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Did you graduate from this school?  Yes  No  
Degrees Earned:  Associates  Bachelors  Masters

Have you ever been expelled or suspended from school?

Yes  No

If yes, explain: \_\_\_\_\_

List other formal education beyond high school that you may have, including training courses:

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

**Criminal History Information**

Have you ever been convicted of an offense against the law or are you now under charges for any offense under the law?

(You may omit: (a) Traffic violations for which you paid a fine of \$100.00 or less and (2) any offense committed before your 17th birthday

which was finally adjudicated in a juvenile court or under a youth offender law) .....  Yes  No

Have you ever been placed on probation? .....  Yes  No

Are there any warrants (traffic or otherwise) now pending against you? .....  Yes  No

Have you ever been the victim of a crime? .....  Yes  No

Was the crime reported to the police? .....  Yes  No

Have you ever been fingerprinted by a police agency for a reason other than an arrest? .....  Yes  No

If yes, explain: \_\_\_\_\_

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

### Employment History Information

Starting with the most recent, describe ALL paid, military, and applicable voluntary experience from the last ten years.

Employer's Name: \_\_\_\_\_ Duties: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Type of Business: \_\_\_\_\_ Salary: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_  
Title of Supervisor: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
Job Title: \_\_\_\_\_

Employer's Name: \_\_\_\_\_ Duties: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Type of Business: \_\_\_\_\_ Salary: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_  
Title of Supervisor: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
Job Title: \_\_\_\_\_

Employer's Name: \_\_\_\_\_ Duties: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Type of Business: \_\_\_\_\_ Salary: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_  
Title of Supervisor: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
Job Title: \_\_\_\_\_

Employer's Name: \_\_\_\_\_ Duties: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Type of Business: \_\_\_\_\_ Salary: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_  
Title of Supervisor: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
Job Title: \_\_\_\_\_

Have you ever submitted an application for employment to another police department?

Yes  No

If yes, list the agency and date of submission: \_\_\_\_\_

Have you ever been a law enforcement officer or held a similar position?

Yes  No

If yes, list the agency and dates of employment: \_\_\_\_\_

Have you ever been forced to resign from a job because of unsatisfactory service or misconduct?

Yes  No

If yes, explain: \_\_\_\_\_

Are you now, or have you ever been, self employed?

Yes  No

If yes, explain in detail: \_\_\_\_\_

**Driving History Information**

Do you possess a valid operator's or commercial driver's license from Illinois? .....  Yes  No  
Drivers License Number \_\_\_\_\_ Expires \_\_\_\_\_

Do you possess a valid operator's or commercial driver's license from any other state? .....  Yes  No  
Drivers License Number \_\_\_\_\_ Expires \_\_\_\_\_

Have you ever been refused an operator's or commercial license by this or any other state? .....  Yes  No  
Has your license ever been suspended or revoked? .....  Yes  No

**Military Service Information**

Have you ever served in any military organization in the United States? .....  Yes  No  
If Yes, which branch? \_\_\_\_\_ Service Number: \_\_\_\_\_  
Highest Rank Held \_\_\_\_\_ Rank at Discharge: \_\_\_\_\_  
Were you ever convicted before any military court of an offense while in the service of your country? .....  Yes  No

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**Continuation of Answers**



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



# Rochester Police Department

One Community Drive  
Rochester, Illinois 62563  
217-498-7125  
police@rochesteril.org



## RIDE-ALONG REQUEST FORM AND RELEASE OF LIABILITY

Dear ride-along applicant:

1. If you are at least 18 years of age, you are welcome to apply for a ride-along with the Rochester Police Department by reading, completing, and signing this Ride-Along Request Form. Ride-alongs are limited to one (1) time per calendar year, unless the rider is enrolled in the Department's Internship Program, or in cases where the rider is a sworn police officer with another agency, or otherwise authorized by the Chief of police. In the cases of Internship or sworn police officer, the Request Form will be considered valid for a period of one (1) year, at which time it will expire and must be renewed. The Rochester Police Department may revoke validity at any time, without notice or cause.
2. Return this form to the Department - normally two weeks in advance. Call the Department to check the status of your request twenty-four (24) hours in advance.

Please note: There is no promise or guarantee that your request will be granted. In addition, your ride-along could be canceled with minimal notice.

3. As part of this program, you agree to undergo a comprehensive police records check.
4. Your basic responsibilities as a ride-along are to:
  - a. Remain in or return to the police vehicle in dangerous or sensitive situations (i.e., homicide, sex crimes, deaths, etc.),
  - b. Comply with all directions given by a police officer,
  - c. Not operate any equipment, unless an officer's safety is at risk, or you receive an officer's prior permission,
  - d. Be an observer only. Do not become involved verbally or physically unless the officer's safety is at risk, or you are directed to do so. The Village of Rochester will not be liable for a ride-along's unauthorized interventions.
5. You must be in civilian clothing.
6. You may not carry a firearm or other weapon unless you are a sworn police officer.
7. The personal safety of the officer and the Department's responsibilities to the community will be considered at all times. Therefore, an officer may terminate your ride-along at any time, without explanation or advance notice. In addition, if emergency circumstances dictate, you may be dropped off at a safe location other than the police station.
8. Affiliation: Intern \_\_\_\_\_ Police Officer \_\_\_\_\_ Explorer \_\_\_\_\_ Neighborhood Rep. \_\_\_\_\_  
Spouse \_\_\_\_\_ Child \_\_\_\_\_ Citizen \_\_\_\_\_ Other \_\_\_\_\_

9. What is the reason for your ride-along request? (School/class, interested citizen, etc.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Date Requested \_\_\_\_/\_\_\_\_/\_\_\_\_ Time \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_ - \_\_\_\_\_

DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Emergency Contact \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Have you been arrested or convicted for a crime? \_\_\_\_\_ If yes, for what? \_\_\_\_\_

\_\_\_\_\_

Have you been on a ride-along in the last 12 months? \_\_\_\_\_ If yes, with what Officer? \_\_\_\_\_

**HOLD HARMLESS AGREEMENT**

I, the undersigned, have read and understand this form and ask the Rochester Police Department for permission to ride, as an observer only, in a Rochester Police Department squad car. This observation is for the purpose of my educational benefit. If permission is granted, I agree to obey all instructions, orders, and commands given to me by Officer(s) at a scene or in command of any squad car in which I may be riding. I realize and appreciate the nature of law enforcement work, and know that I might encounter violence, uncertainty, danger and criminality during a ride-along. I understand that I may encounter situations during a ride-along that expose me to a risk of physical harm or injury, including, but not limited to, motor vehicle accidents. I freely and voluntarily accept these risks. I further agree to keep confidential my observations when requested to do so by a member of the Rochester Police Department. I further understand I will be a guest passenger in the squad car in which I ride. I have not offered any payment to the Police Department or any of its employees for the opportunity to ride in a squad car and observe law enforcement activity.

WHEREFORE, in consideration of the educational benefit I will gain by riding-along with a police officer, I hereby agree to hold the Village of Rochester, Illinois, it's elected and appointed officials, the Rochester Police Department and its Chief, employees, agents and servants harmless from any and all liability to me for death, personal injury, or property damage, whether proximate or remote, sustained while I ride-along and observe law enforcement activity.

\_\_\_\_\_  
Signature of Rider (regardless of age)      Date Signed

Witnessed by Officer \_\_\_\_\_

Approved by Chief of Police \_\_\_\_\_



# Rochester Police Department

One Community Drive  
Rochester, Illinois 62563  
217-498-7125  
police@rochesteril.org



## SALARY STRUCTURE

05-02-08

### SALARY RANGE

**Hire to End of Training (ACADEMY/FTO)**

\$28,290.00

### MEDIAN

**Probationary Period**

\$30,553.00

**STEP 1** (End of Probation Through end of 3<sup>rd</sup> year)

\$32,692.00

**\$34,983.00**

\$37,275.00

**STEP 2** (End of 3<sup>rd</sup> year Through end of 5<sup>th</sup> year)

\$35,136.00

**\$38,497.00**

\$41,858.00

**STEP 3** (End of 5<sup>th</sup> year Through end of 7<sup>th</sup> year)

\$40,025.00

**\$42,927.00**

\$45,830.00

**STEP 4** (End of 7<sup>th</sup> year Through end of 8<sup>th</sup> year)

\$41,552.00

**\$44,608.00**

\$47,663.00

**STEP 5** (End of 8<sup>th</sup> year Through end of 10<sup>th</sup> year)

\$42,774.00

**\$46,135.00**

\$49,496.00

**STEP 6** (End of 10<sup>th</sup> year Through end of 12<sup>th</sup> year)

\$43,691.00

**\$47,357.00**

\$51,024.00

**STEP 7** (End of 12<sup>th</sup> year Through end of 14<sup>th</sup> year)

\$45,876.00

**\$49,725.00**

\$53,575.00

**STEP 8** (End of 14<sup>th</sup> year Through end of 16<sup>th</sup> year)

\$48,169.00

**\$52,211.00**

\$56,254.00

**STEP 9** (End of 16<sup>th</sup> year Through end of 18<sup>th</sup> year)

\$50,578.00

**\$54,712.00**

\$59,066.00

**STEP 10** (End of 18<sup>th</sup> year Through end of 20<sup>th</sup> year)

\$53,107.00

**\$57,448.00**

\$62,020.00