



# City of Elk River Reserve Officer Position Description

<b>Department:</b> Police		<b>Immediate Supervisor:</b> Police Sergeant	
<b>Pay Grade:</b>	<b>FLSA Status:</b> Non-Exempt	<b>Last Updated: (date)</b> 10/29/02	
<b>Positions Supervised:</b> N/A			
<p><b>Position Summary</b></p> <p>The Reserve Officer is a civilian volunteer who works under the close supervision of a higher-ranking officer. Assists in the enforcement of local, state, and federal laws. Participates in law enforcement efforts that include police and patrol duties, crime prevention and investigation, emergency response, and public assistance.</p>			

## Essential Functions

1. Performs patrol duties.
  - A. Detects law violations and hazards to public safety and informs full-time officers.
  - B. Performs routine checks of businesses and residential areas for signs of vandalism.
  - C. Maintains high visibility and, when directed by a full-time officer, responds to emergency and non-emergency calls to support full-time officers.
  
2. Performs traffic law enforcement duties.
  - A. Observes and corrects hazards to motor vehicle and pedestrian traffic.
  - B. Assists disabled or distressed motorists.
  - C. Assists full-time personnel in investigating motor vehicle accidents.
  
3. Responds to crime scenes.
  - A. When directed by a full-time officer, responds to and secures crime scenes, directs other responding units, and identifies, obtains, and secures evidence.
  - B. Identifies and interviews witnesses, victims, and suspects as directed.
  - C. Prepares crime reports and assists the investigator as needed.
  - D. Assists prosecuting attorneys with the preparation of suit as directed, testifies, and coordinates the appearance of witnesses.
  
4. Performs administrative activities.
  - A. Assists in maintaining departmental equipment.
  - B. Compiles reports and statistical law enforcement data as directed.
  
5. Performs other essential job duties.
  - A. Regular and timely work attendance.
  - B. Follows all safety procedures.
  - C. Participates in safety training.

## **Required Knowledge, Skills, and Abilities**

- ❑ Knowledge, skill, and ability to effectively use departmental equipment.
- ❑ Skill to communicate effectively with a variety of groups such as youth, business people, and seniors.
- ❑ Skill in gathering appropriate information through interviewing victims, witnesses, and suspects and contacting other law enforcement agencies.
- ❑ Skill in operating a police vehicle in all kinds of weather conditions and situations.
- ❑ Ability to comprehend and apply federal, state, county, and city criminal, traffic, and other civil laws.
- ❑ Ability to prepare routine reports, case files, and correspondence.
- ❑ Ability to work under adverse conditions.
- ❑ Ability to work within the scope of this position's duties and authority.

## **Minimum Qualifications**

- ❑ High school diploma or equivalent.
- ❑ Valid MN driver's license.
- ❑ Must meet all state-mandated requirements and local policies such as a physical examination and criminal background check.

## **Preferred Qualifications**

- ❑ First responder certification.
- ❑ Experience in law enforcement.

This Position Description is not intended to be all-inclusive. It is within the City of Elk River's discretion to assign additional duties and responsibilities or remove duties and responsibilities at any time.

**This Position Description does not constitute a Contract of Employment.**



# POLICE RESERVE OFFICER PHYSICAL REQUIREMENTS

Physical Requirement	Frequency
<b>ESSENTIAL</b>	
Standing or Walking	Weekly or Monthly
Sitting	Weekly or Monthly
Bending or Stooping	Weekly or Monthly
Crouching or Kneeling	Weekly or Monthly
Pushing/Pulling	Weekly or Monthly
Repetitive Movements	Weekly or Monthly
Twisting/Turning	Weekly or Monthly
Working in Confined Spaces	Weekly or Monthly
Operating a Vehicle	Weekly or Monthly
Physically Grappling w/Others	Never or Rare
Running	Occasionally
Lifting Objects Above Shoulder	1-4 times per year
Lifting Objects Waist to Shoulder	1-4 times per year
Lifting Objects Knee to Waist	1-4 times per year
Lifting Objects Floor to Knee	1-4 times per year
Carrying Objects	1-4 times per year
Working at Heights	Never or Rare
Exposure to Temperature Extremes	Weekly or Monthly
Operation of Telephone/Radio	Weekly or Monthly
Machinery Operation	Weekly or Monthly
Equipment Operation	Weekly or Monthly
Computer/Typewriter Operation	Occasionally
Requires Good Vision	Daily
Requires Good Color Vision	Daily
Requires Good Night Vision	Daily
Requires Good Hearing	Daily
Requires Large Motor Skills	Daily
Requires Fine Motor Skills	Daily
Requires Depth Vision	Daily
Requires Peripheral Vision	Daily
Requires Far Vision	Daily
Requires Near Vision	Daily
<b>HIGHLY IMPORTANT</b>	
Balancing	Occasionally
Exposure to Irritants/Fumes	1-4 times per year
Requires Sense of Touch	Weekly or Monthly
Requires Sense of Smell	Weekly or Monthly
Requires Ability to Taste	Weekly or Monthly
<b>MODERATELY IMPORTANT</b>	
Exposure to Hazardous Chemicals	Rare



# APPLICATION FOR EMPLOYMENT

13065 Orono Parkway  
 Elk River, MN 55330  
 Phone and TDD 763.635.1000  
 Website: [www.ElkRiverMN.gov](http://www.ElkRiverMN.gov)

The City of Elk River considers applicants for all positions without regard to race, color, creed, religion, sex, age, national origin, sexual orientation, marital status, veteran status, status with regard to public assistance, physical or mental disability, ancestry, genetic information, familial status, membership on local human rights commissions, or any other status protected by state or federal law.

1. Title of specific position for which you are applying		2. Date of Application		3. Date available for work		
4. Last Name		First Name		Middle Name		
5. If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes <input type="checkbox"/> No <input type="checkbox"/>						
6. Street Address			7. City		8. State and Zip	
9. Residence Phone		10. Business Phone		11. Cell Phone	12. E-mail Address	
13. Employment condition desired: (check one) Regular <input type="checkbox"/> Full-Time <input type="checkbox"/> (check one) Temporary <input type="checkbox"/> Part-Time <input type="checkbox"/>			14. Have you previously been employed by the City? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, date _____ Position _____			
15. If position involves driving, please indicate driver's license number Number _____ State _____ Class _____						
16. Education. Did you graduate from high school or receive a GED? Yes <input type="checkbox"/> No <input type="checkbox"/> School Attended _____ How many years of education have you had? (circle one) 7 8 9 10 11 12 13 14 15 16 17 18 19 20						
Names and locations of colleges, universities, technical schools		Did you graduate?	Certificate/degree	Course of study		
		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"/>				
17. Relevant current professional memberships, registrations, or licenses. _____ _____ _____						
18. Job-relevant volunteer and unpaid work experience						
Kind of volunteer activity (do not specify organization)	Major responsibilities			# Hours per month	Years From	To

19. Describe any additional experience or training that qualifies you for this job \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**20. Employment History – List your present or most recent experience first. Attach additional sheets if necessary.**

Employer \_\_\_\_\_ Your Title \_\_\_\_\_  
Type of Business \_\_\_\_\_ Length of Employment:  
Street Address \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Total Years \_\_\_\_\_  
Phone number \_\_\_\_\_ Hours Per Week \_\_\_\_\_ Last Salary \_\_\_\_\_  
Supervisor's name \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
Supervisor's title \_\_\_\_\_  
May we contact this employer? Yes  No  If no, explain \_\_\_\_\_  
Number and type of positions you supervised: \_\_\_\_\_  
Principal Responsibilities - Be Complete: \_\_\_\_\_  
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Employer \_\_\_\_\_ Your Title \_\_\_\_\_  
Type of Business \_\_\_\_\_ Length of Employment:  
Street Address \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Total Years \_\_\_\_\_  
Phone number \_\_\_\_\_ Hours Per Week \_\_\_\_\_ Last Salary \_\_\_\_\_  
Supervisor's name \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
Supervisor's title \_\_\_\_\_  
May we contact this employer? Yes  No  If no, explain \_\_\_\_\_  
Number and type of positions you supervised: \_\_\_\_\_  
Principal Responsibilities - Be Complete: \_\_\_\_\_  
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Employer \_\_\_\_\_ Your Title \_\_\_\_\_  
 Type of Business \_\_\_\_\_ Length of Employment:  
 Street Address \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_ Total Years \_\_\_\_\_  
 Phone number \_\_\_\_\_ Hours Per Week \_\_\_\_\_ Last Salary \_\_\_\_\_  
 Supervisor's name \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
 Supervisor's title \_\_\_\_\_  
 May we contact this employer? Yes  No  If no, explain \_\_\_\_\_

Number and type of positions you supervised: \_\_\_\_\_  
 Principal Responsibilities - Be Complete: \_\_\_\_\_  
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Employer \_\_\_\_\_ Your Title \_\_\_\_\_  
 Type of Business \_\_\_\_\_ Length of Employment:  
 Street Address \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_ Total Years \_\_\_\_\_  
 Phone number \_\_\_\_\_ Hours Per Week \_\_\_\_\_ Last Salary \_\_\_\_\_  
 Supervisor's name \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
 Supervisor's title \_\_\_\_\_  
 May we contact this employer? Yes  No  If no, explain \_\_\_\_\_

Number and type of positions you supervised: \_\_\_\_\_  
 Principal Responsibilities - Be Complete: \_\_\_\_\_  
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21. Word Processing/Computer Experience: Number of Years \_\_\_\_\_  
 List Software and hardware you are familiar with \_\_\_\_\_  
 \_\_\_\_\_  
 CLERICAL APPLICANTS ONLY: Typing Speed \_\_\_\_\_ WPM

22. Give the names of four people other than relatives who can be contacted regarding your qualifications, work habits and character.

NAME	PRESENT ADDRESS	TELEPHONE	POSITION AND RELATION TO YOUR WORK

Answer this question only if applying for a position within our police or fire departments:

23. Have you ever been required to register as a predatory offender, convicted of a felony, or convicted under a narcotics or controlled substance law? Yes  No   
If 'Yes', attach a separate sheet with explanation.

**Note to all applicants:** All employment offers are conditioned upon the applicant passing a criminal background check. All applicants invited for an interview will be asked to provide the above information at the time of the interview. Convictions are not an automatic bar to employment. Each case is considered on its individual merits and the type of work sought. However, making false statements or withholding information will cause you to be barred from employment, or removed from employment.

24. If applying for Veterans' Preference points, please answer questions 24 & 25:  
Did you serve in the military service of this country and separate under honorable conditions from any branch of the armed forces of the U.S. after having served on active duty for 181 consecutive days or by reason of disability incurred while serving on active duty? Yes  No   
If 'Yes' to #24, are you a permanent resident of the State of Minnesota? Yes  No   
If 'Yes' to #24, were you disabled during your service in the military? Yes  No  If yes, you must provide proof of disability.

25. State your qualifications and provide a copy of form DD214. Failure to make the disclosure and to provide form DD214 will make you ineligible for Veterans' Preference.  
  
I have provided my qualifications for receiving Veterans' Preference Yes  No   
I have attached a copy of form DD214 to this application Yes  No

26. Where did you hear about this position? \_\_\_\_\_

### SIGNATURE

In connection with this application for employment, I authorize the City of Elk River and any agent acting on its behalf to conduct an inquiry into any job-related information contained in this application, including, but not limited to, my records maintained by an educational institution relating to academic performance such as transcripts. Moreover, I hereby release the City of Elk River and any agent acting on its behalf from any and all liability of whatsoever nature by reason of requesting such information from any person.

YES  YES, but not present employer until job is offered  NO (We may be unable to hire you without this information)

I understand that no management official other than the City Administrator, has the authority to make oral or written employment offers for a specified period of time or for specified conditions. I also understand that any document regarding my employment must be in writing and signed by me.

I understand that neither this document nor any offer of employment from the City constitutes an employment contract unless a specified document to that affect is executed by the City Administrator and me in writing. Unless a written document signed by the City Administrator and me is created, then my employment status is that of an employee at will who can quit or be terminated from work at any time for any reason. All City employees are employees at will unless covered by a labor contract or other written agreement.

The City has the right to verify information provided in the application. I certify that the answers given herein (and accompanying resume, if any) are true and complete to the best of my knowledge and I have not omitted any information. I further understand that false, misleading, or omitted information in my application form, interview(s), or resume (if any) may disqualify me for further consideration for employment or result in immediate discharge if discovered at a later date.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF APPLICANT (do not print)

*IMPORTANT FACTS ABOUT INFORMATION ON YOUR EMPLOYMENT APPLICATION*

This application is to assist in the process of referring you for possible employment. Certain information requested on the application is private; that is, it may be released only to you or to agencies where you may be considered for employment (to comply with M.S. 13.43, Subd. 2). If you become employed by the City, the data will be available to the Department of Finance, the Internal Revenue Service, and the Social Security Administration for payroll and tax purposes. If you disagree with the data we have about you, notify the Director of Personnel by letter.

<i>Private Data</i>	<i>Why We Ask For It</i>	<i>Are You Legally Obligated To Provide It?</i>	<i>What May Happen If You Don't Provide It</i>
Name	To distinguish you from all other applicants.	Yes	Failure to provide information may be cause for rejecting an application.
Date of Birth (when requested on a separate form)	To conduct a check of criminal records for certain positions.	No	Failure to provide information may be cause for rejecting an application.
Address	To be able to send you notices.	Yes	Failure to provide information may be cause for rejecting an application.
Home Telephone	To be able to contact you to determine availability for interview and to notify you when we need you to work on short notice.	No	We may not be able to employ you in certain jobs where you may be required to come to work on short notice.
E-mail Address	To be able to contact you with updates regarding the selection process.	No	You will not receive updates as we progress through the hiring process. All applicants will be notified by postal mail once the process is complete.
Sex, Racial/Ethnic Group, Handicapped Status, Veteran Status (This information is requested on a separate form)	To be able to make Equal Opportunity reports as required by law.	No	We will not be able to determine whether our selection processes result in unfair discrimination, or to take affirmative action in our hiring.
Conviction Record	To determine whether we may legally accept an application from you and to determine whether your record may be job-related consideration.	Yes	We will not be able to make determinations required by law. Failure to provide relevant conviction information may be grounds for dismissal.

*ALL OTHER INFORMATION ON THE APPLICATION IS PUBLIC; THAT IS, IT MAY BE GIVEN TO ANYONE FOR ANY PURPOSE.*



City of Elk River  
13065 Orono Parkway  
Elk River, Minnesota 55330  
763.635.1000

Tennessee Warning/Waiver of Claims

As an applicant for the position of Police Reserve Officer, I have voluntarily supplied data about myself that may be public and/or private in nature. Under Minnesota law the following information about you must be available to any member of the public who requests it: veteran status; relevant test scores; rank on eligibility list; job history; work availability; and education and training. Your name will not be made available to the public unless you are selected to be interviewed by the City.

I authorize the Elk River Police Department to conduct a criminal history background check to include adult and juvenile records and also a search of my driver's license record, as well as any other searches deemed necessary conditional to employment with the City of Elk River.

I understand that, as part of the selection process, I am requested to supply this information. I understand that failure to provide accurate and adequate data may disqualify me from further consideration.

I understand that, even if I am hired for this position, I may be subject to dismissal or other disciplinary action if I have made an intentional effort to provide deceptive or misleading information.

I understand that this data will be kept on file for a period of one year, even if I am not hired for this position. I understand that, if I am hired, this information will remain on file with the City of Elk River.

I further understand that this information will be used by the City to aid in the determination of my relative and/or specific suitability for employment for the position stated above.

Finally, I understand that the data that I have provided may be shared in whole, or in part, by other agencies within the criminal justice system, by other private and public entities, and by other persons for the purpose of conducting a background investigation, and by all individuals in the City who need to know this information.

I, therefore, waive my right to claim and hereby agree to hold harmless the City of Elk River and the Elk River Police Department, and any of its agents or employees for any injury or damage which I may experience as a direct or indirect result of the intended use of this information.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
*(Full name of applicant)*

Printed: \_\_\_\_\_  
*(Full name of applicant)*

Address: \_\_\_\_\_  
*Street Address City State and Zip*

Check here if you are less than 18 years old.

Any other names used in the past: \_\_\_\_\_

All addresses where you have lived in within the past ten years: \_\_\_\_\_  
\_\_\_\_\_

Driver's License Number: \_\_\_\_\_

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



**RELEASE - TYPE I**

**GENERAL AUTHORIZATION AND RELEASE  
PURSUANT TO MINNESOTA STATUTE 13.05, SUBD. 4  
MINNESOTA DATA PRACTICES ACT**

To: \_\_\_\_\_

I, \_\_\_\_\_, hereby authorize and grant my informed consent to permit you, \_\_\_\_\_, to release and make available to the City of Elk River and/or its agents and/or representatives data classified as private which concerns me and which may be in your possession. The data which I authorize to be released consists of private data, as defined by Minnesota Statute 13.02, subd. 12, and has been collected by you as a result of my contacts and associations with you and/or your agents and representatives. The information for which this release is authorized includes all data which has been collected, created, received, retained or disseminated in whatever form which in any way relates to my dealings with you or your agency. I understand that the purpose of permitting the City of Elk River to have access to this information is to determine my suitability for employment with the City of Elk River. I further understand that this information may subsequently be utilized for other purposes relating to my possible employment with the City of Elk River including verification of my records and analysis by consultants to the City of Elk River who may review my suitability for employment.

I hereby authorize and grant my informed consent to permit you to make photocopies for the City of Elk River of data which concerns me and is in your possession.

This authorization and release includes all data received as a result of criminal history checks.

This authorization shall be valid for a period of one year, but I reserve the right to, at any time prior to that expiration, cancel the written authorization by providing written notice to the City of Elk River or to you of that fact.

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**DATE**

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

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

