



# THE BOROUGH OF BRENTWOOD CIVIL SERVICE COMMISSION

MUNICIPAL BUILDING – 3624 BROWNSVILLE ROAD  
PITTSBURGH, PA 15227-3199  
Office 412-884-1500 FAX 412-884-1911  
[www.brentwoodboro.com](http://www.brentwoodboro.com)

## PUBLIC NOTICE BRENTWOOD BOROUGH POLICE OFFICER

Do you have what it takes to join the elite team of professional Full-Time Police Officers in the Borough of Brentwood? Do you have excellent communication and interpersonal skills? Do you want a career dedicated to helping others? The Civil Service Commission of the Borough of Brentwood will be accepting applications for the position of Police Officer for the Borough of Brentwood, Department of Police.

- Make a difference in the community.
- Be a part of a winning team in a growing and evolving community.
- Advancement Opportunities
- Excellent Salary + Benefits
- Residency is not a requirement
- **Zero** Application Fees

Applicants are required to pass a Physical Agility Test, Written Exam, and Oral Exam established for police officers by the Civil Service Commission of the Borough of Brentwood. At the time of application every applicant for a position in the police department shall possess the following qualifications:

- a) Possess a diploma from an accredited high school or a graduate equivalency diploma (GED).
- b) Be Act 120 certified under the Municipal Police Officers Education and Training Commission Act (Act 120), (MPOETC) 53 Pa. C.S.A. §2161 et seq., or be enrolled in a municipal police academy working towards completing their Act 120 Training and Certification. An applicant enrolled in the police academy at the time of application will not be placed on an Eligibility List, as defined in Section 3.15, until the Borough receives evidence that the candidate has attained Act 120 certification.
- c) Be a United States Citizen.
- d) Be physically and mentally fit to perform the full duties of a police officer.
- e) Possess a valid motor vehicle operator's license and be eligible to legally operate a motor vehicle in the Commonwealth of Pennsylvania.

Application forms are available at the Brentwood Municipal Building, Borough of Brentwood, 3624 Brownsville Road, Pittsburgh, PA 15227 during regular business hours from 8:00 A.M. to



4:00 P.M., Monday through Friday. Applications are also available on the Brentwood Borough website at [www.brentwoodboro.com](http://www.brentwoodboro.com). The application MUST be returned to the Administration Office no later than Thursday, June 13, 2019 at 4:00 P.M.

Civil Service Commission  
**BOROUGH OF BRENTWOOD**

Publish dates:

May 16, 2019 and May 23, 2019 South Hills Record  
Sunday, May 19, 2019 in the Pittsburgh Post-Gazette  
Craig's List  
Job



2019

# Police Officer Employment Test Application

**SUBMISSION DEADLINE: JUNE 13, 2019**





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## INSTRUCTIONS

1. This is a single application for the testing process which is being administered by the Borough of Brentwood Civil Service Commission.
2. At the time of application every applicant for a position in the police department shall possess the following qualifications:
  - a) Possess a diploma from an accredited high school or a graduate equivalency diploma (GED).
  - b) Be Act 120 certified under the Municipal Police Officers Education and Training Commission Act (Act 120), (MPOETC) 53 Pa. C.S.A. §2161 et seq., or be enrolled in a municipal police academy working towards completing their Act 120 Training and Certification. An applicant enrolled in the police academy at the time of application will not be placed on an Eligibility List, as defined in Section 3.15, until the Borough receives evidence that the candidate has attained Act 120 certification.
  - c) Be a United States Citizen.
  - d) Be physically and mentally fit to perform the full duties of a police officer.
  - e) Possess a valid motor vehicle operator's license and be eligible to legally operate a motor vehicle in the Commonwealth of Pennsylvania.
  - f) Must have reached their twenty-first (21<sup>st</sup>) birthday before the deadline for submitting completed applications.

The applicant should review the above information. It should be understood that these are the minimum qualifications and are not all-inclusive. Failure to meet these minimum requirements in the Borough of Brentwood, however, will automatically preclude employment in the Borough of Brentwood. Particular attention should be paid to the Act 120 Certification requirements. The applicant is responsible for securing the required training and certification by the stipulated time at his or her own expense. The Borough of Brentwood will not send an applicant to an academy.

3. Completed applications are to be returned in a SEALED envelope marked "Police Officer Application" and mailed or dropped off at the Borough of Brentwood, c/o Civil Service Commission, 3624 Brownsville Road, Pittsburgh, PA 15227 no later than 4:00 PM on Thursday, June 13, 2019. Applications may be mailed or delivered in person. Only the following three items are to be submitted to the Borough of Brentwood's Civil Service Commission:
  - a) the completed, signed and Notarized Application,
  - b) the signed Applicant's Release,
  - c) the signed Physician's Certification

Incomplete applications will be returned. No additional attachments or resumes are to be included with the submission.

4. The Physical Agility Test is scheduled to be conducted between 9:00 AM and 12:00 noon and the Written Examination will be administered between 1:00 PM and 3:00 PM on Tuesday, June 25, 2019 at the Allegheny County Police Academy, 700 West Ridge Drive, Allison Park, PA 15101. These times may be adjusted based on circumstances, with the written examination time possibly being moved up or back. Registration is from 8:00 AM to 8:45 AM on the day of the test. **Identification containing the applicant's photograph will be required at the test site to be admitted to the test.** The applicant must pass all elements of the Physical Agility Test to be eligible to take the Written Examination. Failure of any one of the events in the Physical Agility Test is a failure of the entire test. If one event is failed, the testing process is terminated for the applicant at that point.

Minimum Score Written Test	=	70% or higher
Physical Agility Test	=	Pass/Fail

5. Passing the Physical Agility Test and the Written Examination does not guarantee employment. Upon receipt of the test results, Brentwood Borough Civil Service will further process the applicant pursuant to their Civil Service Rules and Regulations and the Borough's hiring practices and policies.



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## Application for Examination

**Applicants must type all responses. All incomplete applications will be discarded.**

**Note: Fillable electronic version of this document may not function properly in all browsers. It is recommended that applicants save a copy of this file to a local drive before entering any responses.**

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

How long have you been at present address? \_\_\_\_\_

Are you legally qualified to work in the United States? YES NO

Have you previously worked for the Borough? YES NO If yes, when and what position? \_\_\_\_\_

Have you taken an examination for a position in this police department within the past six months? YES NO If yes, when? \_\_\_\_\_

Do you have a valid Motor Vehicle Operator's License? YES NO

Do you have any condition that may affect your performance on the job applied for? YES NO

If yes, please explain \_\_\_\_\_

List your places of residence for the past five (5) years, beginning with your present address:

From	To	Number and Street	City	State/Zip

(If you need additional space, use supplemental sheets and attach to form)

**Education**

(If you need additional space, use supplemental sheets and attach to form)

High School: \_\_\_\_\_ Address: \_\_\_\_\_

Did you graduate?      YES      NO  
            Diploma: \_\_\_\_\_

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

Did you graduate?      YES      NO  
            Degree: \_\_\_\_\_

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

Did you graduate?      YES      NO  
            Degree: \_\_\_\_\_

List any type of trade or professional license you have ever had.: \_\_\_\_\_

Do you hold a Pennsylvania Driver's License?      YES      NO      License No.: \_\_\_\_\_  
     

**Military Service**

Did you ever serve in the United States Armed Forces?      YES      NO  
     

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_



## Employment History

Beginning with your most recent position, please list all previous employers. You may add additional sheets if necessary.

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference?                      YES      NO  
        

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference?                      YES      NO  
        

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference?                      YES      NO

### References

Please list three persons, other than relatives and former employers, who may be contacted for information about your character and reputation?

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

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

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

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

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

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

### Additional Questions

**Indicate your answer to the following questions. Where your answer is "yes", explain under "remarks", prefixing remarks by the question number.**

- |   |                                 |                                |
|---|---------------------------------|--------------------------------|
| 1. Are you addicted to the habitual use of intoxicating liquors?  | YES<br><input type="checkbox"/> | NO<br><input type="checkbox"/> |
| 2. Do you use narcotic drugs?   | YES<br><input type="checkbox"/> | NO<br><input type="checkbox"/> |
| 3. Are you affiliated with any group whose policies or activities are subversive to the form of government set forth in the Constitution and Laws of the United States and the Commonwealth of Pennsylvania?  | YES<br><input type="checkbox"/> | NO<br><input type="checkbox"/> |
| 4. Since your 18 <sup>th</sup> birthday, have you ever been convicted, fined, or imprisoned or placed on probation, for the violation of any law, police regulation or Ordinance? (exclude minor traffic violations imposing a fine or forfeiture of \$25.00 or less) | YES<br><input type="checkbox"/> | NO<br><input type="checkbox"/> |
| 5. Have you ever been refused life insurance because of failure to pass a physical examination?   | YES<br><input type="checkbox"/> | NO<br><input type="checkbox"/> |
| 6. Have you had any illness or injuries within the past five (5) years that required the attendance of a physician or hospitalization?  | YES<br><input type="checkbox"/> | NO<br><input type="checkbox"/> |



**Certification**

*Please review this application prior to signing to ensure that you have answered all questions correctly and make certain that you have not omitted anything.*

I certify that the statements made by me in this application contain no falsifications, omissions, or concealment of material fact. I am aware that should investigation disclose any willful misstatement, falsification, or concealment, my application will be rejected, my name removed from the eligible list, and if already appointed, I may be dismissed from service.

Further, I waive my rights to privacy and release all individuals and organizations from any and all liability relative to the investigation conducted by the municipality or its agent, and do hereby permit all records and information concerning my personal life which pertain to determining my fitness as a police officer to be released.

Signature of Application \_\_\_\_\_  
(Sign name on line in the presence of the Notary Public)

Sworn to and subscribed before me this \_\_\_\_\_ day  
of \_\_\_\_\_ 20\_\_\_\_\_

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

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

**Please return completed, sign and notarized form in a SEALED envelope marked "Police Officer Application" to:**

**Borough of Brentwood  
c/o Civil Service Commission  
3624 Brownsville Road  
Pittsburgh, PA 15227**

**FOR BRENTWOOD BOROUGH CIVIL SERVICE COMMISSION USE ONLY:**

Date Received: \_\_\_\_\_ Time Received: \_\_\_\_\_ Received By: \_\_\_\_\_

**APPLICANT'S RELEASE**

**PHYSICAL AGILITY TEST**

As an applicant for the Examination for Entry Level Police Officer, I understand that I will be required to undergo a Physical Agility Test consisting of the following:

**300 METER RUN**

Cover the required distance of 300 meters within 72.0 seconds.

**SIT-UPS**

With legs bent at a 90-degree angle, heels on the mat or ground, fingers interlocked behind the head, lift the body, touch elbows to knees, and return to the starting position, shoulders touching the mat or ground, 29 times within one (1) minute. Feet may be together or apart and may be held but not knelt upon by another. Fingers must stay interlocked behind the head throughout the event. The back cannot be arched, and the buttocks cannot be lifted from the mat.

**PUSH-UPS**

From a front supported position, hands and feet (toes), lower body as a unit with shoulders, hips and legs in the same plane, lowering the body by bending the elbows until the upper arms are parallel to the ground, and return to a front supported position by straightening the arms, 21 times. Once commenced, the push up sequence must be continuous until the number of repetitions is reached or 1-minute lapse, whichever occurs first.

**1.5 MILE RUN**

Cover a measured distance of 1.5 miles on an assigned course within a sixteen (16) minutes and twenty-eight (28) seconds time frame.

Above Physical Fitness is a cumulative test. Each event is pass/fail, thus if one event is failed, the entire test is failed.

I have read and understand the requirements of the Physical Agility Test set forth above and knowing this, I believe myself to be in good health and physically fit to participate in this test. I represent that to the best of my knowledge and belief I have no physical condition that would likely cause physical injury, disability, or illness as a result of attempting to perform the elements of the test as described above. In consideration of processing my application, and intending to be legally bound, I hereby release, indemnify and hold harmless the Borough of Brentwood Civil Service Commission and their members, the Brentwood Borough Council, their appointed officials, where applicable, and the owners, custodians, directors and employees of the property on which the test is given from all claims, demands and suits which may arise or result from any injury or illness which is caused by or results from taking or attempting to take the test as set forth above.

Signature of Application: \_\_\_\_\_

Name of Application: \_\_\_\_\_  
(Typed)

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

**(RETURN WITH APPLICATION)**

**PHYSICIAN'S CERTIFICATION**

I, \_\_\_\_\_, M.D., have examined  
(Physician's Name, Typed or Printed)

\_\_\_\_\_ And understand that this applicant will have to complete a  
(Applicant's Name, Typed or Printed)

Physical Agility Test consisting of the following elements:

<u>Event</u>	<u>Required Time</u>
300 Meter Run	72.0 Seconds
29 Sit-Ups	1 Minute
21 Push-Ups	1 Minute
1.5 Mile Run	16 Minutes and 28 seconds

which are described in greater detail on the Applicant's Release - Physical Agility Test. Having examined the said

\_\_\_\_\_, I hereby certify that he/she is physically able to  
(Applicant's Name, Typed or Printed)

undertake the described Physical Agility Test.

\_\_\_\_\_  
(Physician's Signature)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Physician's DEA Number)

**(RETURN WITH APPLICATION)**