

SOUTH KINGSTOWN POLICE DEPARTMENT

Recruitment Booklet



Entry Level Police Officer

Recruitment Period

June 14, 2022–July 24, 2022



**Alfred E. Bucco III
Interim Chief of Police**

ENTRY LEVEL POLICE OFFICER

The South Kingstown Police Department is seeking applicants for the position of police officer. The department focuses on community policing and providing its citizens with high-quality public safety services.

The Town of South Kingstown, Rhode Island is a coastal community covering 63 square miles with more than 30,000 full time residents. South Kingstown is home to the University of Rhode Island, South County Hospital, many popular tourist destinations and a bustling downtown business district.

South Kingstown Police Department has 58 sworn officers that serve in a variety of units within the Uniform, Detective, and Administrative Support divisions.

To be considered for a position with the South Kingstown Police Department, applicants must be a U.S. citizen; be 18 years of age or older; possess a high school diploma or equivalent; possess a valid driver's license; be able to speak, read and write the English language; be able to pass a physical examination given by a physician, a physical fitness/ agility examination, a written examination, an oral examination, a swim proficiency test, a drug screen, a psychological examination and a comprehensive background investigation.

The South Kingstown Police Department is an equal opportunity employer.

Patrol officers work a 4-2 rotating schedule on one of three shifts:

1 st shift	0700-1500
2 nd shift	1500-2300
3 rd shift	2300-0700

The department prides itself on the professional development and training of each officer by offering many training opportunities, and college tuition reimbursement for all sworn officers. Officers receive paid vacation days, paid holidays, sick leave, medical & dental insurance, and membership in the Rhode Island state pension system. The current salary breakdown is as follows:

<u>Entry level salary structure</u>	<u>Longevity pay</u>
Academy/probation \$51,012	5-10 years of service 4% base salary
After 1 st year \$53,140	10-15 years of service 6% base salary
After 2 nd year \$55,265	15-20 years of service 8% base salary
After 3 rd year \$57,986	20-25 years of service 10% base salary
After 4 th year \$60,808	25+ years of service 11% base salary
After 5 th year/top step \$71,375	
<ul style="list-style-type: none"> - Excellent healthcare (BC/BS) - Dental (Delta) - Eyewear reimbursement - Tuition reimbursement - Life insurance - 25 year RI MERS retirement - Uniforms provided/cleaned - Equipment provided 	
<ul style="list-style-type: none"> - 13 paid vacation days to start; up to 25 after 15 years of service - 15 paid sick days - 12 paid holidays - 2 personal days - 20 paid military leave days 	

APPLICATION PROCESS

STEP 1: Apply via the website www.policeapp.com/SKPD **before 11:59PM, Sunday, July 24, 2022:**

- 1) Complete application located on www.policeapp.com/SKPD
- 2) Sign Release and Waiver of Claim (page 6) and submit with application
- 3) Sign Fitness Test Medical Certificate/Physician's Statement (page 7) and submit with application
- 4) Obtain Informed Consent form (page 8) and submit with application

STEP 2: Bring the following items with you to the agility test in one large envelope:

- 1) Copy of birth certificate
- 2) Copy of valid motor vehicle operator's license
- 3) A copy of a high school diploma or GED certification

Submission of incomplete or improper paperwork at any stage in this process may result in disqualification. The Town of South Kingstown will retain all documents.

IMPORTANT: Notifications throughout this process will be made through PoliceApp.com

TESTING & APPLICANT SELECTION PROCESS

All applicants who submit their completed application prior to the deadline are invited to attend the physical agility test. **THIS IS YOUR INVITATION.** Only those applicants who pass the physical agility test will be allowed to take the written exam. Those who pass the written exam will be invited to an oral interview. A pool of candidates will be formulated after the results of the oral interview. Once certified, this pool of candidates will be valid for one year. Hiring for probationary patrol officer during the year will be considered from this pool of candidates. A candidate offered a position will have to pass pre-screening items to include a swim test, background investigation, medical examination (including drug screen and back screen) and psychological testing. Currently, the Rhode Island Municipal Police Training Academy (RIMPTA) holds two sessions per year; one starts in January, one starts in July/August. The first day of employment with the Town of South Kingstown will commence on **Day 1** of the police academy.

Below is the general time frame for this application process. The page following contains more details about the agility test. Please be sure to read all information. If you are late for any portion of the process, you may be eliminated.

PHYSICAL AGILITY TEST & WRITTEN EXAM

DATE: August 6th, 2022

You will be notified through PoliceApp.com of any date change (to a later date only).

TIMES AND LOCATIONS:

AGILITY – 9:00 am

Mackal Fieldhouse, University of RI, Kingston, RI

Bring driver's license, water bottle, and paperwork listed on page 3, step 2. Wait outside until directed inside. Applicants must wear a plain white tee shirt and dark blue or black gym shorts. NO sweat pants, yoga/compression pants/shorts will be allowed.

WRITTEN – 12:00pm

Mackal Fieldhouse, University of RI, Kingston, RI

You will be given time to change into proper business attire for the written exam. Bring your driver's license, #2 pencils and water. No food will be allowed in the exam room.

ORAL INTERVIEWS

DATES: Tentatively scheduled for the week of August 22nd – August 26th, 2022

TIMES AND LOCATION:

Scheduled between 9am and 4pm

SWIM PROFICIENCY TEST

To be given at a later date

The South Kingstown Police Department does not discriminate on the basis of age, sex, race, religion, national origin, color or disability in accordance with applicable Federal and State laws and regulations. Our agency is the sub-recipient of Federal grant funds administered by the Rhode Island Department of Public Safety Grant Administration Office (RIPSGAO). If you believe you have been discriminated against you should notify the Office of the Police Chief and the RIPSGAO.

PHYSICAL AGILITY TESTING

This is done according to the RI Municipal police Training Academy standards. Applicants Must score in the 40th percentile, or better, to pass the agility test. Your age will be the age you are on the day of the test.

One-Minute Push-up Test – a timed test that measures upper body muscular endurance. The score is the number of push-ups in one minute.

1.5 Mile Run – a timed run that measures the heart and vascular system’s capability to transport oxygen. Test results reflect the ability to perform police tasks involving stamina and endurance. The score is recorded in minutes and seconds.

One-Minute Sit-up Test – measures the muscular endurance of the abdominal muscles. The results reflect the ability to perform police tasks that involve the use of force. The score is the number of bent leg sit-ups performed in one minute.

300 Meter Run – a timed test that measures the body’s ability to perform during oxygen debt. The score is recorded in seconds.

PRESENT THIS SHEET TO YOUR PHYSICIAN FOR COMPLETION OF THE FITNESS TEST MEDICAL CERTIFICATE (page 7)

Physical Fitness Assessment					
40th Percentile					
1 Minute Push-ups					
	Age<20	20-29	30-39	40-49	50-59
Male	29	29	24	18	13
Female	15	15	11	9	n/d
1.5 Mile Run - Aerobic Power					
	Age<20	20-29	30-39	40-49	50-59
Male	12:38	12:38	13:04	13:49	15:03
Female	14:50	14:50	15:38	16:21	18:07
1 Minute Sit-ups					
	Age<20	20-29	30-39	40-49	50-59
Male	41	38	35	29	24
Female	32	32	25	20	14
300 Meter Run					
	Age<20	20-29	30-39	40-49	50-59
Male	59	59	58.9	72	83.2
Female	71	71	79	94	n/d



SOUTH KINGSTOWN POLICE DEPARTMENT

**1790 Kingstown Road
Wakefield, Rhode Island 02879**

(401) 783-3321 Fax: (401) 783-8139

THIS FORM MUST BE NOTARIZED

RELEASE AND WAIVER OF CLAIM

SOUTH KINGSTOWN POLICE DEPARTMENT

RECRUITMENT AND TRAINING

As a participant in the application, recruitment and training process with the South Kingstown Police Department, I, _____, do hereby remise, release and forever quitclaim unto the Town of South Kingstown, their heirs, executors, administrators, and assigns, any and all manner of actions, debts, dues, claims, and demands, both in law and equity, more especially arising out of my participation in recruitment exercises and training prior to employment by the South Kingstown Police Department or the Town of South Kingstown, which, against said above-named parties, I ever had, now have, or in the future may have for or by reason or means of any matter in connection with my participation.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this _____ day of _____, 20__.

Candidate Signature

WITNESSED:
Executed in the Presence of:

Notary Public

My Commission Expires: _____



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1790 Kingstown Road
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FITNESS TEST MEDICAL CERTIFICATE

Dear Physician:

The following named individual has submitted an application to become a Police Officer with the South Kingstown Police Department.

Candidate Name: _____	Date of Birth: _____
Address: _____	Town/City: _____ State: _____

The South Kingstown Police Department and the Rhode Island Department of Public Safety/Municipal Police Training Academy (RIDPS/MPTA) requires each candidate to bring a completed Physical Fitness Test Certificate to the Physical Fitness Test before he/she will be allowed to participate in the test. A statement must be obtained from a licensed physician that the candidate is of sufficient physical conditioning to undergo a Physical Fitness test. The Fitness Test Medical Certificate **must** be completed within six (6) months of the Physical Fitness testing date.

Attached to this form is a listing of the minimum physical fitness standards a candidate must attain. We ask that your evaluation be based upon these criteria. Thank you for your assistance.

PHYSICIAN'S STATEMENT

I have examined the above-named individual on ____/____/20____.

(This date **MUST** be within six (6) months of the Physical Fitness testing date of **August 6, 2022**)

After reviewing each of the four (4) events, I find him/her to be of sufficient physical conditioning to allow the candidate to participate in the South Kingstown Police Department and RIDPS/MPTA Physical Fitness Test.

Comments (if any): _____

Physician's Signature

(Please type or print :)

Physician's Name: _____

Address: _____

Telephone Number: _____



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INFORMED CONSENT PHYSICAL AGILITY TEST

The undersigned hereby gives informed consent to engage in a series of exercise tests relative to the South Kingstown Police Department physical agility examination. All exercise testing will be supervised by trained exercise technicians.

There exists the possibility that certain detrimental physiological changes may occur during exercise testing. These changes could include but are not limited to heat related illness, abnormal heart beats, abnormal blood pressure, and, in rare instances, heart attack.

I, the undersigned, have read this form and understand that there are inherent risks associated with any physical activity and recognize that it is my responsibility to provide accurate health information. Furthermore, it is my responsibility to monitor my individual performance during any activity. In the event of a medical problem, I further understand that any medical care that may be required is my personal financial responsibility.

YES

NO

- | | | |
|-------|-------|---|
| _____ | _____ | 1. Has a doctor ever said that you have heart trouble? |
| _____ | _____ | 2. Have you ever been told by a doctor that your blood pressure was too high? |
| _____ | _____ | 3. Do you often suffer from dizziness? |
| _____ | _____ | 4. Do you have any orthopedic problems that might be aggravated by exercise testing? |
| _____ | _____ | 5. Is there a good reason not mentioned here why you could not participate in a physical testing program even if you wanted to? |
| _____ | _____ | 6. Do you frequently have pain in your heart or chest? |

Explain any "YES" response: _____

Print Name: _____
FIRST MI LAST

Date: _____

Signature: _____