Detention Deputy

Please submit a complete application packet to be considered for the position of Detention Deputy. A complete “packet”** consists of the following documents:

- Cover letter
- Resume
- Kootenai County Application
- Form DD214** (if applicable)

All applicants must pass a written exam that is conducted on the third Tuesday of each month. The Human Resources Department must receive your packet by the first Friday of the month in order to be considered for testing within the same month. You will receive a letter with specific testing information once your packet is received. Please submit your packet to the following address:

Kootenai County Human Resources Department
451 Government Way
PO BOX 9000
Coeur d'Alene, Idaho 83816-9000
(208) 446-1640
(208) 446-1621 (fax)

Applicants passing the written exam must also pass an oral board interview, physical agility test, background investigation, polygraph test, psychological evaluation, and pre-employment drug test, in order to be considered for employment. The physical agility requirements are attached.

Thank you for your interest in employment with Kootenai County. We look forward to receiving your completed packet.

Enclosures: Kootenai County Application
Job Description
Physical Agility Requirements

* A separate packet is required for each position of interest.
** If you are a veteran, you must submit a copy of your DD214 (Separation from Active Service) with your application in order to be given the additional veterans points at the completion of oral board interviews.
KOOTENAI COUNTY SHERIFF’S DEPARTMENT
JOB DESCRIPTION
DETENTION DEPUTY – ENTRY LEVEL

SALARY: $13.29 PER HR (plus .25 Hr Shift Differential) (Eff. 1/12/03)

NATURE OF WORK:
Processing, care, transportation and maintenance of inmates incarcerated in the Kootenai County Public Safety Building, to include booking process, medical, work release, property, commissary/inventory etc. Direct contact and handling of inmates is required. Rotational shifts required. Uniform required, furnished by the Department.

MINIMUM QUALIFICATIONS:
IDAHO P.O.S.T. STANDARDS FOR EMPLOYMENT APPLY: Must be a citizen of the United States, High School graduate or hold a GED certificate AND a minimum of two years of full time responsible work experience following High School graduation. No past criminal history and no convictions of DUI or suspended driver’s license within the five years prior to the date of application. Must possess a valid driver’s license and have no more than four (4) moving violations in the three (3) years preceding the application. Must be of good moral character as determined by a background investigation. The background investigation will include a polygraph examination and a psychological evaluation. Weight must be in proportion to height or meet minimum body fat requirements. Must be able to meet minimum vision and hearing standards. Be free of any physical, emotional, or mental conditions which might adversely effect performance as an officer as determined by a medical and psychological exam. Must pass the Idaho P.O.S.T. physical agility test (qualifications enclosed) with at least minimum standard in each of the five (5) categories. Basic keyboarding required. Ability to pass written entrance examination and oral board. Additional information on Idaho P.O.S.T. Detention Academy available at www.idaho-post.org web site.

EXAMINATION PROCESS:
Written test with a minimum score of 80% in order to advance to oral board. The number of applicants advancing to the oral board may be limited. Scoring of passed written along with Oral Board scoring, plus Veterans Preference (per Idaho Code 65-502) added to factored total of written and oral board score for final eligibility list is as follows:
40% Written
60% Oral Board
+5 Bonus – Veterans Preference Points – DD214 MUST BE SUBMITTED WITH APPLICATION

MUST ACHIEVE A FINAL SCORE OF 80% OR HIGHER TO BE PLACED ON ELIGIBILITY LIST

Five (5) member Oral Board. High and low score will be discounted, middle three (3) averaged for final Oral Board score.
Upon the offering of employment, applicant must pass the Idaho POST physical fitness examination. This test includes vertical jump, sit-ups, pushups, and running.

**MINIMUM REQUIREMENTS MUST BE ACHIEVED IN EACH CATEGORY.**

**DETENTION DEPUTIES** are primarily concerned with the supervision of inmates within the jail facility. They are responsible for events occurring in the facility during his/her tour of duty, and will implement measures, within the policies and procedures of the jail bureau, to maintain a high level of security while insuring a safe and humane living environment for inmates and staff.

**DUTIES AND RESPONSIBILITIES OF A DETENTION DEPUTY ARE AS FOLLOWS:**

1. Completes the receiving and processing of all new inmates and maintains pertinent records.
2. Makes periodic checks of all inmates living areas and reports any damage of jail property to the watch sergeant.
3. Conduct inspections of inmate living areas on an irregular basis for the purpose of detecting contraband.
4. Insures that inmates are provided with the necessary equipment to maintain cleanliness in their living areas and insures that inmates practice acceptable personal hygiene.
5. Performs any additional duties assigned by the watch sergeant.

Assignments and duties may be assigned as follows:

**ROVER DEPUTY:**

1. Receive prisoners from the arresting officer when they enter the booking area. Duties linked to this process will include a pat search, inventory all property and monies, remove handcuffs, and directing the prisoner to holding cell. Fingerprinting and photography of prisoner, issue jail clothing, and complete file prior to escorting inmate to main housing in a safe and secure manner.
2. To release prisoner, file must be completed, the cell inspected and check all issued items with inmate. In booking, bond or bond monies must be verified along with the ID of the person posting bail.
3. Other duties include supervising the trustees in the service of meals and in the cleaning and sanitizing of the cells. Disburse items on service cart and conduct cell checks and checks on all security cells and log. Shakedowns of pods are done and rover will conduct visiting and all jail activities involving moving of inmates. Check work release inmates in and out, conduct search of all incoming work release, and issue personal items. Inmates are to be escorted to the library and supervised. Requests from inmates must be signed and dated and incoming mail must be distributed. Bailiff slips are processed by the Rover designee.

**TRANSPORT DEPUTY:**

1. Responsible for inmate preparation and escort to court. Maintain all court transport logs and assist in co-op transports when required.
2. Responsible for maintenance and service of vehicle assigned to transport.
3. Assist with the court proceedings and act as bailiff when court is held at the jail via closed circuit TV.
DEPUTY SHERIFF APPLICANT:

Please read the following information and thoughtfully consider its contents. The process for eventual hire as a Kootenai County Deputy Sheriff is involved and thorough. The first step in the process is the completion of an eligibility testing. Based upon the numeric results of that test, your name will be placed on a list from which the Kootenai County Sheriff's Department selects applicants for further processing. The steps in the process for possible hire are listed below in order:

1. Eligibility testing.
2. Physical agility assessment
3. Completion of Personal History Form, which includes credit history, criminal and traffic record checks, employment verification, and past-employer reference forms.
4. Background investigation
5. Oral Board interview panel
6. Completion of background interview(s)
7. Conditional offer of employment
8. Polygraph
9. Psychological testing
10. Medical screening
11. Drug testing
12. Review by Sheriff

The Department may, without notice, change certain aspects, or add or delete components of the recruitment process. Such process will remain intact for each testing cycle.

The law enforcement profession is like none other in our society. Because of this, higher standards of behavior are required of potential sheriff’s deputies. The community has the right to expect nothing less. The Kootenai County Sheriff's Department actively seeks candidates who emulate these standards. To this end, there are requirements and standards considered by the Department to assist us in identifying high-caliber candidates.

Attached to this letter are two addenda. One addresses the Kootenai County Sheriff's Department drug policy. It contains information on disqualifying factors relating to use of illicit or other drugs or narcotics. The second is a screening form to eliminate candidates who are, or have been, involved in activities detrimental to the candidate, or those which could prove detrimental or embarrassing to the Department. Please read, consider, and evaluate these screening items and how they may specifically apply to you.

Although there are few “perfect” candidates, we seek persons from all segments of our society who have shown a high degree of honesty, integrity, and desire to work hard in attaining their potential.

Retain this letter and the addenda. Should you be hired as a Kootenai County Sheriff’s Deputy, we will have you acknowledge receipt for the same by signature. The signed letter and forms will be placed in your personnel file.
We’re pleased that you are considering the Kootenai County Sheriff’s Department as your employer and wish you the best of luck in the application process. We consider ourselves the premier law enforcement agency of the Idaho Panhandle and hope that if you come aboard, you will have a fulfilling career with us.

Sincerely,

Rocky Watson
Sheriff

Addendum:

SCREENING FORM FOR DEPUTY SHERIFF’S APPLICANTS:

YOU CANNOT BE A KOOTENAI COUNTY SHERIFF’S DEPUTY IF:

1. You do not possess or cannot obtain a valid driver’s license.
2. You have not graduated from high school, or do not hold a GED.
3. You do not have at least two years of responsible work experience following high school graduation.
4. You are not a U.S. citizen.
5. You have been convicted of a D.U.I. within the past five years or have two or more D.U.I. convictions. A diversion or reduction to lesser charge or withheld judgment is the same as a conviction.
6. You have four or more moving violations in the three years preceding the application.
7. You have been convicted of any felony charges… traffic or criminal.
8. You have used or possessed any illegal drug in the past three (3) years.
9. You have EVER manufactured, sold, offered to sell, distribute, or transported for sale any illegal drugs/narcotics.
10. You have been convicted of any crime involving false swearing.
11. You do not successfully pass a Department polygraph or you cannot be certified medically by Department physicians.
12. You have been convicted of a domestic violence related crime which precludes you from possessing a firearm.
13. You do not meet minimum medical, vision and hearing standards as required by POST.
14. You are not free of any physical, emotional, or mental conditions which might adversely affect performance of a peace officer as determined by a medical and psychological exam.
15. You cannot pass a physical agility test.
16. You do not possess good moral character as determined by a background investigation.
17. You do not successfully complete the P.O.S.T. Academy.
YOU ARE NOT LIKELY TO BE HIRED AS A KOOTENAI COUNTY SHERIFF’S DEPUTY IF:

1. Your traffic history shows a continuing and/or recent pattern of poor decision making.
2. Your financial affairs or personal life shows a history of poor judgment and refusal to confront problems. (Example: Nonpayment of child support, ignoring overdue bills, etc.)
3. You have recently or are currently misrepresenting yourself or ignoring any laws. (Example: Not paying taxes, using a false address for school tuition purposes, etc.)
4. You have a pattern of involvement with illegal drugs.
5. Your work history shows a pattern of unexcused absences, discipline, or discharge.
6. People who know you have doubts about your honesty, integrity, or character.
7. You have been involved in any significant misdemeanor activity.

Applicants are also cautioned that government clearances or success in other law enforcement agency selection processes are no guarantee of success in our process. This list is not all inclusive and is intended only as a general guideline.

**DRUG USAGE STANDARDS:**

The Kootenai County Sheriff’s Department will use the following guidelines for rejection of Deputy Sheriff’s applicants. **Exceptions may be made on a case by case basis when appropriate.**

**ANY USE OF ILLEGAL DRUGS FALLING UNDER THE FOLLOWING CATEGORIES WILL RESULT IN AUTOMATIC REJECTION:**

1. Any illegal drug use within the last three (3) years.
2. Injection of amphetamines / methamphetamines at any time.
3. Use of opiates/narcotics (heroin, morphine, etc.) or abuse of prescribed opiates / narcotics at any time.
4. Use of cocaine over five times regardless of time frame; any injection or smoking of cocaine, regardless of its form.
5. Participating in the manufacture, selling, offering to sell, distribution or transporting for sale any illegal drugs/narcotics, regardless of the time frame.
6. Use of illegal drugs while employed by a law enforcement agency regardless of the time frame.
7. Use of non-prescribed oral or injectable steroids over five sequences/cycles within the last three (3) years.

**ANY USE OF THE FOLLOWING ILLEGAL DRUGS WITHIN THE PAST TEN YEARS WILL RESULT IN AUTOMATIC REJECTION:**

1. Use of hallucinogenic drugs (mushrooms, LSD, PCP, etc.)
2. Use of marijuana / hashish over 15 times.
ANY USE OF THE FOLLOWING ILLEGAL DRUGS WITHIN THE PAST FIVE YEARS UNDER THE FOLLOWING CRITERIA WILL RESULT IN AUTOMATIC REJECTION:

1. Swallowing / sniffing / smoking illegal amphetamines or methamphetamines one time.
2. Use of crack cocaine one time.
3. Use of free-based cocaine / paste one time.
INTRODUCTION
Peace officers have unique job functions, some of which can be physically demanding. An officer’s capability to perform those functions can affect personal and public safety. Physical fitness underlies an officer’s ability to perform the frequent and critical job tasks demanded. The minimum fitness standards identified are levels below which an officer’s capacity to safely learn and perform frequent or critical job tasks is compromised. Higher levels of fitness are associated with better performance of physical job tasks required of Idaho peace officers.

Physical Fitness Test Battery (PFTB) Administration

The Idaho Peace Officer PFTB is comprised of five tests:
1. Vertical Jump
2. One Minute Sit-Ups
3. Maximum Push-Ups
4. 300-Meter Run
5. 1.5-Mile Run/Walk

Tests should be administered in the above order. The test battery process should be sequenced as follows:

I. Warm-up (7-10 minutes)
   A. General warm-up - 2-3 minutes of easy jogging, jumping jacks, squat-thrusts, etc.
   B. Stretching (active and/or static) - 5-7 minutes, include stretches for shoulders, back, upper/lower legs

II. Physical Fitness Test Battery (PFTB)
   A. Vertical Jump (3 minutes rest)
   B. One Minute Sit-Ups (5 minutes rest)
   C. Maximum Push-Ups (10 minutes rest)
   D. 300-Meter Run (15 minutes rest)
   E. 1.5 Mile Run/Walk

III. Cool-down (5 minutes)
   A. Walking (keep walking to avoid blood pooling in legs)
   B. Easy stretching

Test Protocols
Strict adherence to the following protocols is mandatory. Variances from these procedures render results meaningless and limit ability to gauge fitness progress.
POST BASIC ACADEMY - Physical Fitness Test Battery

VERTICAL JUMP TEST

Purpose
This test measures leg power, which is important in jumping or vaulting objects such as walls and ditches, and in moving heavy objects such as people.

Equipment
Hardboard or white paper with scale, tape measure, or yardstick (1/2" increments) affixed to wall. Can use carpenter’s chalk on finger to measure, or a commercial or homemade device. (Recommended commercial source: “Reach ‘N’ Jump Board” #7438P, cost $37.50 from M-F Athletic Co., P.O. Box 8090, Cranston, RI 02920-0090, phone 1-800-556-7464)

Procedures (refer to Figures 1-4)
1. Read the instructions to the participants.
2. Demonstrate the test, pointing out common errors.
3. Have participants warm up by practicing the test.
4. Have the participant stand with one side toward the wall, heels together, and reach upward as high as possible. Record the maximum standing reach. Then, using a rocking, one-step approach (“step-feet together-jump”), have the participant jump as high as possible, reaching upward at the same time. Record the maximum jumping reach.
5. The number of inches between the standing reach and the jumping reach, measured to the nearest half inch, is the score. Use the best of three trials as the score.

Script
Use the following script to prepare the participants. The vertical jump measures leg power. After you warm up, stand with one side to the wall. With your heels together, reach upward as high as possible with your hand against the measuring device on the wall. Your maximum standing reach will be recorded. Then, using a rocking, one-step approach, jump as high as possible while extending the arm nearest the wall.

Your maximum jumping reach will be recorded. You will have three tries at this event, with your best effort counting as your score. Watch this demonstration . . . . Are there any questions?

Tips for the Test Administrator
Assure the maximum standing reach is a true “maximum.”
You may have to physically check for maximal extension of arm upward. A double jump or “crow hop” is not permitted upon take-off. The correct sequence is: stride forward with one foot, bring trailing foot up to meet lead foot while flexing knees, jump off both feet. If the participant prefers, a standing squat jump (without a step) is acceptable.

Revised March 2002
ONE MINUTE SIT-UP TEST

Purpose
This test measures the muscular endurance of the abdominal muscles. This is important for performing tasks that involve the use of force, and it helps maintain good posture and minimize lower back problems. Perform this test on a mat or carpeted surface.

Equipment
• Mat
• Stopwatch or a clock with a sweep second hand
• Partner

Procedures (refer to Figures 5-6)
1. Read the instructions to the participants.
2. Demonstrate the event, pointing out common errors.
3. Have the participant lie on his or her back, knees bent, heels flat on the floor. Hands should be held behind the head, with elbows out to the sides. A partner holds down the feet.
4. Have the participant perform as many correct sit-ups as possible in one minute. In the up position, the individual must touch the elbows to the knees and then return to the lying position (shoulder blades touch the floor) before starting the next sit-up.
5. The score is the number of correct sit-ups.

Script
Use the following script to prepare the participants. The sit-up measures the muscular endurance of the abdominal muscles. Lie on your back, with your knees bent at a 90 degree angle, and your heels on the mat. Your feet may be together or apart, but the heels must stay in contact with the mat. Your partner can hold them for you (but can’t kneel on them). Your fingers must stay interlocked behind your head, or hands cupped behind the ears, throughout the event. When I say “Go,” lift your upper body by bending at the waist. Touch your elbows to your knees, and return to the starting position. When returning to the starting position, the shoulder blades must touch the mat. I will count a repetition each time you return to the starting position. You may rest, but only in the “up” position. Do not arch your back or lift your buttocks from the mat. If you fail to keep your fingers interlocked or hands cupped behind the ears, fail to touch your elbows to your knees or shoulder blades to the mat, or if you arch your back or lift your buttocks, you will receive a warning. After one warning, incorrect repetitions will not count. You will have one minute to do as many sit-ups as possible. I will give you signals at 30, 15 and 5 seconds remaining. Your score is the number of correct sit-ups. Watch this demonstration . . . . Are there any questions?

Tips for the Test Administrator
• Make sure that the hands remain interlocked behind the head or cupped and touching the head behind the ears. Interlocked means that some parts of the fingers overlap.
• The knees must remain at a 90 degree angle throughout the exercise.
• The buttocks must remain in contact with the floor at all times.
• Any resting must be done in the “up” position.
MAXIMUM PUSH-UP TEST

**Purpose**

This test measures the muscular endurance of the upper body muscles in the shoulders, chest, and back of the upper arms (the extensors). This is important for use of force involving any pushing motion.

**Equipment:** None

**Procedures** (refer to Fig.7-10)

1. Read the instructions to the participants.
2. Demonstrate the test, point out common errors.
3. Have the participant get down on the floor into the front leaning rest position.
4. Have the participant lower the body until the upper arms are parallel to the floor, then push up again. The back must be kept straight, and in each extension up, the elbows should lock. Resting in the up position (only) is allowed.
5. The score is the maximum number of push-ups completed with no time limit.

**Script**

Use the following script to prepare the participants. *The push-up measures the muscular endurance of the upper body (chest, shoulders, and triceps). Place your hands on the ground wherever they are comfortable, approximately shoulder width apart. Your feet may be together, or up to 12 inches apart. Both feet shall touch the mat. Your body should be in a straight line from the shoulders to the ankles, and must remain that way throughout the exercise. Keep your head up and spine in alignment. When I say “Go,” lower your body by bending your elbows until your upper arms are parallel to the ground. Then return to the starting position by straightening your arms. You may rest in the up position. If you fail to keep your body in a straight line, descend to where your upper arms are parallel to the floor, or to lock your elbows in the “up” position, you will receive a warning. After one warning, incorrect repetitions will not count. There is no time limit. Do as many correct push-ups as possible. Your score is the number of correct repetitions. Watch this demonstration... Are there any questions?*

**Tips for the Test Administrator**

- Ensure that participants maintain a relatively straight line from their shoulders to their ankles.
- Be alert for “head bobbers,” participants who move their heads up and down without lowering/raising their bodies.
- The person counting repetitions should be at a 45 degree angle to the participant’s head and shoulders to see if the participant lowers the body until the upper arm is parallel to the ground while checking correct body alignment.
- The participant may have to touch the floor with his chest to attain or approach the “parallel” position.
- Ensure that a non-slip surface is available. A mat, carpet or solid floor are acceptable.
- Minor changes in hand position are allowed during the event.
- Participants who wear glasses should remove them for this event if they do not have a retaining band.
POST BASIC ACADEMY - Physical Fitness Test Battery

300-METER RUN TEST

Purpose
This is a test of anaerobic capacity, which is important for performing short intense bursts of effort such as foot pursuits, rescues and use of force situations.

Equipment
- Stopwatch
- Track or marked course (300 meters = 328 yards or 984 feet)
- Visible or audible starting device (starter’s pistol, whistle, flag, etc.)

Procedures
1. Read the instructions to the participants.
2. Have participants warm up for one minute and keep loose while waiting for start.
3. Instruct participants to cover the distance as fast as possible.
4. Have participants line up at the starting line. Give the command “Go” (audible or visual) and begin timing.
5. The score is the time (to the nearest tenth of a second) it takes to complete the course.

Script
Use the following script to prepare the participants.
The 300-meter run measures your anaerobic capacity. You must complete the run without any help. At the start, you will line up behind the starting line. When I say “Go” (or describe a visual command, such as dropping a flag or clipboard) the clock will start. You will run (describe the course, including a clear description of the finish line). Your goal is to run the distance as quickly as possible. I (we) will record your finish time. After the run, continue walking for a few minutes to cool down. Are there any questions?

Tips for the Test Administrator
Participants may finish very close to each other in this event. Have assistance in recording times or run participants in heats.
POST BASIC ACADEMY - Physical Fitness Test Battery

1.5-MILE RUN/WALK TEST

Purpose
This test is a measure of cardiorespiratory endurance or aerobic power, which is determined by the body’s ability to transport and utilize oxygen to produce energy. This is important for performing tasks involving stamina and endurance (pursuits, searches, prolonged use of force situations, etc.) and for minimizing the risk of cardiovascular health problems.

Equipment
• 440-yard track or marked, measured level course
• Stopwatch or a clock with a sweep second hand
• Numbered vests or other participant identifiers (if needed)

Procedures
1. Read the instructions to the participants.
2. Have participants warm up and stretch before the run.
3. Instruct participants to cover the distance as fast as possible but begin at a pace they think they can sustain 10-15 minutes (not too fast).
4. Have participants line up at the starting line. Give the command “Go” and begin timing. If several participants run at once, have one administrator call out times at the finish while an assistant records the names and respective times.
5. Have participants cool down after running the course by walking for an additional five minutes or so. This prevents venous pooling, a condition in which the blood pools in the legs so less is returned to the heart. Walking enhances the return of blood to the heart, prevents light headedness, and aids recovery.
6. The score is the time it takes to finish the course to the nearest second.

Script
Use the following script to prepare the participants. The 1.5 mile run/walk measures your cardiorespiratory endurance or aerobic power. You must complete the course without any help. At the start, you will line up behind the starting line. When I say “Go,” the clock will start. You will begin running at your own pace. To complete the 1.5 miles, you will (tell the runners how many laps they must run, or describe the course, including the finish line, if not run on a track). Your goal is to finish the 1.5 miles in as fast a time as you can. Try not to start too fast, but at a pace you can sustain for about 10 to 15 minutes. You may walk, but walking will make it difficult to meet the standard. You may run alongside another runner for help with the pace, but you may not physically assist or be assisted by another runner. I will call off your time at the end of each lap (if run on a track), and will record your finishing time. At the end of the run, continue walking for about five minutes to cool down. Are there any questions?

Tips for the Test Administrator
• Have runners in sight at all times, and have quick access to EMS (cell phone, car radio, etc.).
• Be aware of environmental conditions. Extreme heat, humidity, elevation or poor footing will affect performance times and could increase risk of injury. Choose your testing site and schedule with these factors in mind. If conditions are warm, have water available.
• If not running on a measured track, measure your course carefully. Automobile odometers may not be accurate. A measuring wheel is better.
• If running on a track, instruct the participants to move out of the inside lane if they decide to walk.
• Using an assistant test administrator will give you flexibility in case someone needs help during the event. The assistant can either take over timing duties or provide help to the participant. The assistant can also be used to assist with recording times if there are many runners.
• The timer should call off the times in minutes and seconds as the runners cross the finish line.

Revised March 2002
Preparing for the PFTB

Whereas many training routines can be used to improve performance in the PFTB, participants should keep in mind that physical training is *specific*. That is, one improves in activities practiced. If one wishes to optimize push-up performance, push-ups should be included in the training program. Many other exercises can also be included to strengthen the chest, shoulders and arms, but push-ups should be included in the routine. Ideally, muscles and the aerobic and anaerobic energy systems should be gradually, progressively trained over several weeks or months to achieve significant fitness gains. Physical adaptations occur gradually in response to regular, consistent overloads, i.e. doing more than your body is accustomed to doing. Everyone is different - a stimulus resulting in an appropriate, moderate overload to one person may be impossible for another person to perform, while yet another person is not stressed at all. A participant who has been inactive for a significant period of time should ideally take six to twelve weeks to train for the PFTB.

The training routine should include exercises to train upper body strength and muscular endurance, abdominal muscular endurance, leg power, cardiorespiratory endurance and anaerobic capacity. Strength and cardiorespiratory endurance activities should be performed about every other day, or three days per week, to allow adequate recovery and positive adaptations to occur. Anaerobic (high intensity) training should be done once per week, and can be performed in lieu of a cardiorespiratory training session. For flexibility enhancement, good back health, and injury prevention, stretching exercises should be performed before and after training sessions, and can be done on off days as well.

**Sample Training Program**

**Week 1**

**Monday and Friday**
- Warm up, stretch 5 min.
- Regular, wide grip & close grip push-ups - one 30-sec. set of each
- Bent-leg sit-ups (feet secured) - three 30-sec. sets
- Vertical jumping off both feet (easy) - three 15-sec. sets
- Walk/jog/run (moderate intensity) - 15 minutes
- Cool down - easy walk 5 min., stretch 3 min.

**Wednesday**
- Warm up, stretch 5 min.
- Regular push-ups - 40 sec. maximum reps, 20 sec. max. reps, 10 sec. max. reps
- Crunches (abdominal curl-ups) - three 30-sec. sets
- Vertical jumping one foot at a time (easy) - two 15-sec. sets each
- Jog 3 min. (warm up), 8 reps. of 200 meter sprints (about ¾ speed - quicker than usual jog, but not all-out!), with one minute walking recovery between each rep.
- Cool down - easy walk 5 min., stretch 3 min.

**Weeks 2 - 6**  *Gradually* increase time or intensity of sets, continue three workouts per week.
Each of the five PFTB tests measures a different component of physical fitness, each of which is one determinant of an officer’s ability to perform essential job tasks. To pass the PFTB, a participant must score a minimum of 10 points on each of the five PFTB tests. Performance below the level required for 10 points in any event is substandard and results in failure of the PFTB. Twenty points is the maximum possible for each test, a total of 100 being the highest possible PFTB score.

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<th>Fitness Category</th>
<th>POINTS</th>
<th>Vert. Jump (inches)</th>
<th>1-Min. Sit-ups (reps.)</th>
<th>Pushups (reps.)</th>
<th>300 Meter (seconds)</th>
<th>1.5 Mile (min:sec)</th>
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<td>32 - 37</td>
<td>59.1 - 62.0</td>
<td>13:30 - 14:20</td>
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<td>14</td>
<td>16.0</td>
<td>31 - 34</td>
<td>30 - 31</td>
<td>62.1 - 65.0</td>
<td>14:21 - 14:56</td>
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<td>13</td>
<td>15.5</td>
<td>27 - 30</td>
<td>28 - 29</td>
<td>65.1 - 68.0</td>
<td>14:57 - 15:32</td>
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<td>Minimum Acceptable</td>
<td>12</td>
<td>15.0</td>
<td>23 - 26</td>
<td>26 - 27</td>
<td>68.1 - 71.0</td>
<td>15:33 - 16:08</td>
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<td>Substandard</td>
<td>11</td>
<td>14.5</td>
<td>19 - 22</td>
<td>23 - 25</td>
<td>71.1 - 74.0</td>
<td>16:09 - 16:43</td>
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<td></td>
<td>10</td>
<td>14.0</td>
<td>15 - 18</td>
<td>21 - 22</td>
<td>74.1 - 77.0</td>
<td>16:44 - 17:17</td>
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<td>&lt; 14.0</td>
<td>&lt; 15</td>
<td>&lt; 21</td>
<td>&gt; 77.0</td>
<td>&gt; 17:17</td>
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</table>
POST BASIC ACADEMY - Physical Fitness Test Battery

The POST Council adopted the mandatory Physical Fitness Test Battery (PFTB) on June 5, 1997. The PFTB is a requirement for acceptance into and graduation from the P.O.S.T. Academy and for the challenge certification process.

Applicants must score at least the following minimums on each of the five tests: Vertical Jump: 14.0 inches, 1-Minute Sit-ups: 15 repetitions, Maximum Push-ups: 21 repetitions, 300-Meter Run: 77.0 seconds, and 1.5-Mile Run/Walk: 17 min: 17 seconds.

All tests in the battery must be performed strictly according to the published protocols.

APPLICANTS WHO FAIL TO OBTAIN THE MINIMUM SCORE IN ANY OF THE FIVE FITNESS TESTS WILL BE INELIGIBLE FOR P.O.S.T. CERTIFICATION AS AN IDAHO PEACE OFFICER.

FULL NAME OF APPLICANT TAKING PFTB: ________________________________

DATE OF TEST: ___________________

DEPARTMENT/AGENCY: _______________________________________________

<table>
<thead>
<tr>
<th>Test Event</th>
<th>Raw Score</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>VERTICAL JUMP</td>
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<td></td>
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<tr>
<td>1-MINUTE SIT-UPS</td>
<td></td>
<td></td>
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<tr>
<td>MAXIMUM PUSH-UPS</td>
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<tr>
<td>300-METER RUN</td>
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<tr>
<td>1.5-MILE RUN/WALK</td>
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<td><strong>TOTAL</strong></td>
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</tbody>
</table>

__________________________________    (Examiner’s Signature)

__________________________________ (Examiner’s Agency/Title)

NOTE: Please return only this page to POST!

Revised March 2002
 Employees of Kootenai County are selected in order to accomplish the legal and operational duties established by statute and by the policy choices of the County's elected officials. Each employee of Kootenai County is expected to conduct him/herself in a manner which reflects favorably upon the County and recognize that County employees are subject to additional public scrutiny in their public and personal lives.

### PLEASE PRINT IN INK OR TYPE

<table>
<thead>
<tr>
<th>NAME (As it appears on Social Security Card / Work Permit Card)</th>
<th>SOCIAL SECURITY NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing &amp; Street Address</td>
<td></td>
</tr>
<tr>
<td>CITY, STATE, ZIP</td>
<td></td>
</tr>
<tr>
<td>HOME TELEPHONE</td>
<td>Message Contact</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>Daytime Telephone</td>
<td>Zip Code</td>
</tr>
<tr>
<td>DAYTIME TELEPHONE</td>
<td></td>
</tr>
<tr>
<td>(Area)</td>
<td>ARE YOU AT LEAST 18 YEARS OLD? [ ] NO [ ] YES</td>
</tr>
<tr>
<td>OTHER NAMES YOU HAVE USED:</td>
<td></td>
</tr>
<tr>
<td>POSITION APPLIED FOR:</td>
<td>SALARY REQUIREMENTS: $</td>
</tr>
<tr>
<td>REFERRED TO KOOTENAI COUNTY BY:</td>
<td>DATE AVAILABLE:</td>
</tr>
<tr>
<td>HAVE YOU EVER BEEN EMPLOYED WITH KOOTENAI COUNTY? [ ] NO [ ] YES, WHEN IN DEPARTMENT:</td>
<td></td>
</tr>
<tr>
<td>SUPERVISOR:</td>
<td>REASON FOR LEAVING:</td>
</tr>
<tr>
<td>HAVE YOU EVER BEEN CONVICTED OF A FELONY? A CONVICTION WILL NOT NECESSARILY DISQUALIFY APPLICANT FROM EMPLOYMENT.</td>
<td></td>
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<tr>
<td>IF APPLYING FOR A POSITION WHICH REQUIRES DRIVING A KOOTENAI COUNTY VEHICLE, PLEASE PROVIDE THE FOLLOWING INFORMATION:</td>
<td></td>
</tr>
<tr>
<td>CAN YOU, IF HIRED, SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN THE U. S.? [ ] NO [ ] YES</td>
<td></td>
</tr>
<tr>
<td>[ ] NO [ ] YES, If Yes, Give location, date, charge and disposition of case(s) on a separate page.</td>
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<tr>
<td>I HAVE A VALID DRIVER'S LICENSE [ ] NO [ ] YES</td>
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<tr>
<td>D.L. # STATE</td>
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</table>
| Employees of Kootenai County are selected in order to accomplish the legal and operational duties established by statute and by the policy choices of the County's elected officials. Each employee of Kootenai County is expected to conduct him/herself in a manner which reflects favorably upon the County and recognize that County employees are subject to additional public scrutiny in their public and personal lives.
Kootenai County will grant a preference to employment of veterans of the United States Armed Services in accordance with provisions of Idaho Code 65-502. (Please attach a copy of Form DD 214 if applicable)

<table>
<thead>
<tr>
<th>Branch of Service</th>
<th>From:</th>
<th>To:</th>
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</thead>
<tbody>
<tr>
<td>Dates Served</td>
<td></td>
<td></td>
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<tr>
<td>Type of Discharge</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### EDUCATION / SKILLS

**EDUCATIONAL LEVEL** | **NAME** | **CITY** | **STATE** | **CIRCLE YRS. COMPLETED** | **UNITS COMPLETED** | **DEGREE** | **MAJOR** |
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<td>HIGH SCHOOL</td>
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<td>COMMUNITY/JUNIOR COLLEGE</td>
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<td>GRADUATE SCHOOL</td>
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</table>

### OFFICE SKILLS

#### TYPING

- WPM: List other office skills (PC, Software, Etc.)

#### SHORTHAND/SPEEDWRITING

- WPM

### LICENSES / CERTIFICATIONS / ORGANIZATIONS

**PROFESSIONAL LICENSES/CERTIFICATIONS** *(Job Related)*

<table>
<thead>
<tr>
<th>TYPE OF LICENSES / CERTIFICATES</th>
<th>DATE ISSUED</th>
<th>REGISTRATION NUMBER</th>
<th>STATE</th>
<th>EXPIRES MO./YR.</th>
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<tbody>
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**PROFESSIONAL, SCHOLASTIC & OTHER ORGANIZATIONS** *(Job Related)*

<table>
<thead>
<tr>
<th>NAME</th>
<th>DATE</th>
<th>NAME</th>
<th>DATE</th>
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<td>5.</td>
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<td>6.</td>
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</table>

* You may omit those which indicate your race, religion, color, national origin, ancestry, sex, age or disability

### JOB RELATED TRAINING

<table>
<thead>
<tr>
<th>NAME OF COURSE</th>
<th>YEAR COMPLETED</th>
<th>NAME OF COURSE</th>
<th>YEAR COMPLETED</th>
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</table>
**EMPLOYMENT HISTORY**

THIS PORTION OF THE APPLICATION MUST INCLUDE A MINIMUM OF 10 YEAR WORK HISTORY IF APPLICABLE AND MUST BE COMPLETED EVEN IF SUPPLEMENTED BY A RESUME.

List your most recent employer first including U.S. military service and unpaid or volunteer work.

Base salary does not include overtime, bonuses or commissions.

<table>
<thead>
<tr>
<th>FROM (Mo./Yr.):</th>
<th>TO (Mo./Yr.):</th>
<th>TOTAL</th>
<th>YRS.</th>
<th>MOS.</th>
<th>YOUR POSITION:</th>
<th>EMPLOYER:</th>
<th>YOUR SUPERVISOR:</th>
<th>ADDRESS:</th>
<th>TYPE OF BUSINESS:</th>
<th>REASON FOR LEAVING:</th>
<th>BASE SALARY:</th>
<th>[ ] MONTHLY</th>
<th>[ ] WEEKLY</th>
<th>[ ] HOURLY</th>
<th>OTHER COMPENSATION / BONUSES</th>
<th>BRIEF DESCRIPTION OF YOUR DUTIES &amp; RESPONSIBILITIES:</th>
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<td>_______ TO _______</td>
<td>TOTAL _______ YRS. _______ MOS.</td>
<td>YOUR POSITION:</td>
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(ATTACH ADDITIONAL PAGE IF NECESSARY)
AUTHORIZATION AND AGREEMENT

If hired, I authorize Kootenai County to verify my present and past employment and education.

I hereby authorize Kootenai County to solicit all information which it may need in connection with this application and to request each person referred to in this application (except as restricted below) to provide all such information to Kootenai County. Kootenai County is hereby authorized to circulate my application and any other information which it obtains from the employers, firms or persons referred to in this application to all legally constituted governmental or regulatory authorities. Also I grant Kootenai County the authority to allow legally constituted authorities to review all pertinent parts of my personnel file.

I understand and agree if I am applying for a deputized position, I will be required to comply with all the requirements of the Idaho Peace Officer Standards and Training. I further understand that any offer of employment is conditioned upon completing all those tests, including physical agility, to determine my fitness for this position.

I also understand and agree that any employment of me by Kootenai County is terminable at will by either Kootenai County or me, with or without notice and with or without cause. Any changes to this agreement will not be valid unless in writing signed by me and a duly authorized representative of Kootenai County.

I certify that, to the best of my knowledge and belief, all statements I have made in this application are true and correct.

SIGNATURE:___________________________________________________________DATE:______________

I HEREBY AUTHORIZE KOOTENAI COUNTY TO CONTACT:

<table>
<thead>
<tr>
<th>MY PRESENT EMPLOYER(S)</th>
<th>[ ] YES</th>
<th>[ ] NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>(If applicable)</td>
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<table>
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<tr>
<th>MY PAST EMPLOYER(S)</th>
<th>[ ] YES</th>
<th>[ ] NO</th>
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<tbody>
<tr>
<td>(If applicable)</td>
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</table>

Kootenai County is subject to Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. Applicants who believe they are covered by these Acts are invited to identify their disabilities and special accommodations they feel are necessary to adequately perform their jobs. Submission of this information is strictly voluntary and may be made to the Personnel Dept., Supervisor.
Kootenai County has a vital interest: in maintaining safe, healthful and efficient working conditions for its employees. Using or being under the influence of drugs, may pose serious safety and health risks, not only for the user but his/her co-workers and the public.

By signing this Notice, the applicant understands and voluntarily agrees to submit to pre-employment drug screening. The applicant further agrees to release Kootenai County and its directors, officers, agents, employees, subsidiaries and affiliated concerns from any and all liability, claims, demands, damages and causes of action of every kind and nature arising out of the pre-employment drug screening and any decision concerning employment made by Kootenai County, in whole or in part, based upon the results of the pre-employment drug screen.

ANY APPLICANT WHO IS UNWILLING TO AGREE TO THESE CONDITIONS SHOULD NOT APPLY FOR EMPLOYMENT WITH KOOTENAI COUNTY. Refusal of any applicant to agree to pre-employment drug screening at this time does not preclude an applicant from applying for employment with Kootenai County at some future date when the applicant will agree to conform to our policies.

I understand that my offer of employment with Kootenai County is contingent upon my taking and passing a test for the presence of illegal drugs. I further understand and agree that I may be terminated if I am put to work for Kootenai County, and results from the drug tests are positive for the presence of illegal drugs. I voluntarily consent to have a sample of my urine collected for the purpose of drug testing. In the event I submit two or more samples for drug screening in connection with my application for employment, I understand that each sample must be negative for the presence of illegal drugs. A clinical laboratory will conduct the drug test. I hereby authorize the results of this testing to be released to Kootenai County. This consent is subject to revocation at any time upon written notice. I understand that I may receive a copy of this consent form upon written request.

Signature of Applicant:

____________________________________________

Date: ____________________________

(To be maintained on file with Employment Application)