



Porter County Sheriff's Office

Jeffrey A. Balon
Sheriff

Timothy Manteuffel
Chief Deputy

May 1, 2023

Dear Applicant,

Thank you for your interest in the Porter County Sheriff's Office Police Officer application process. The first phase of the process will be the physical fitness assessment and the written examination. **The date of these tests will be determined later this year, but will most likely occur in the Fall of 2023. We are currently accepting applications and will reach out to each applicant via email once a date has been selected.** The testing process will take approximately five (5) hours to complete, with a one-hour break between the test phases. There will be no make-up dates for these tests.

The first testing of the day will be the physical fitness assessment. Registration will start at 7:00 a.m. A photo ID is required for admission. The assessment will begin at **8:00 a.m. (CST)**. Be prompt, as late arrivals will not be admitted. The location will be at the Morgan Township School, 299 S State Road 49 Valparaiso, IN 46383. There will be a marked squad car near where you will need to report to.

Enclosed with this letter are the minimum fitness standards to be attained for further consideration and the proper procedures on how to complete each event. You are encouraged to do more than the minimum in each event, since applicants are scored on their overall fitness results.

You will need to bring your completed and signed **Waiver of Liability, Physician's Release, and East Porter County School Liability** forms with you to the testing. The **Physician's Release** form must have been signed by your physician prior to this testing. No applicant will be allowed to participate in the physical fitness assessment without the signed **Physician's Release** form.

Upon completion of the physical fitness assessment, there will be a one (1) hour break.

The written examination will commence at the Porter County Sheriff's Office, 2755 State Road 49, Valparaiso, IN 46383, immediately at the conclusion of the break for those that have successfully passed the physical fitness assessment. Each applicant must bring a pen, pencil(s), and photo ID to this testing.

All applicants will be notified by mail of their test results. Further instructions will be included for those applicants who have passed both phases of testing. If you have not received a letter within 30 days of the test date, please call Sgt. Benjamin McFalls at (219) 477-3102.

Sincerely,

Jeffrey A. Balon, Sheriff



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PRE-EMPLOYMENT APPLICATION FOR POLICE OFFICER

Print information legibly in the boxes:

| | | |
|------------------------------------|------------|-------------|
| Last Name | First Name | Middle Name |
| Address (Street, City, State, ZIP) | | |
| Home Phone | Work Phone | Cell Phone |
| Email Address | | Date |

Minimum Eligibility Requirements:

1. Must be at least 21 years of age at time of appointment
2. United States citizen
3. Must possess a high school diploma or GED from an accredited school
4. Must possess a valid Indiana driver's license (or obtain one within 60 days of establishing residency)
5. No felony convictions
6. No misdemeanor conviction of domestic violence
7. Must become a resident of Porter County within one (1) year of appointment

My signature below certifies that I meet all of the above-listed minimum eligibility requirements.

Signature of Applicant:

Complete and return this form to:

Porter County Sheriff's Office
Sgt. Benjamin McFalls
2755 State Road 49
Valparaiso, IN 46383

(Department Use Only) Date Received _____

PORTER COUNTY SHERIFF'S OFFICE PHYSICAL FITNESS ASSESSMENT TESTING PROCEDURES

300 METER RUN

Purpose

This is a measure of anaerobic power.

Testing Procedures

The Participant runs 300 meters at his/her maximum level of effort. The Participant must complete the run in a maximum time of **71 seconds**. The Participant's time to complete the run is the recorded score. There is only one (1) attempt at this event.

1.5 MILE RUN

Purpose

This is a measure of aerobic power (cardiovascular endurance).

Testing Procedures

The Participant runs 1.5 miles as fast as possible. Split times at $\frac{1}{4}$ mile intervals will be called out. The Participant must complete the run in a maximum time of **15:00 minutes**. The Participant's time to complete the run is the recorded score. There is only one (1) attempt at this event.

PUSH UP

Purpose

This measures the muscular endurance of the upper body (anterior deltoid, pectorals major, and triceps).

Testing Procedures

1. The Participant's hands are placed shoulder width apart, with the fingers pointing forward. Some part of the hands must lie within a vertical line drawn from the outside edge of the shoulders to the floor. The administrator places one fist on the floor below the participant's chest (sternum).
2. Starting from the up position (arms fully extended with elbows locked, both hands and both feet only touching the floor), the Participant must keep the back straight at all times and lower the body to the floor until the chest (sternum) touches the administrator's fist. The Participant then returns to the up position with the elbows fully locked. This is one repetition.
3. Resting is permitted **only** in the up position. The back must remain straight during resting.
4. The Participant must complete a minimum of **30 push-ups**. There is no time limit.
5. When the Participant elects to stop or cannot continue, the total number of correct push-ups is recorded as the score.

SIT UP

Purpose

This measures abdominal muscular endurance.

Testing Procedures

1. The Participant starts in the down position by lying on his/her back, knees bent, heels flat on the floor, with the fingers laced and held behind the head.
2. A partner holds the Participant's feet down firmly.
3. The Participant will then move into the up position by touching the elbows to knees and then return to the down position until the shoulder blades touch the floor. This is one (1) repetition.
4. The Participant shall avoid pulling on the head with the hands and the buttocks must remain on the floor with no thrusting of the hips. Any resting must be done in the **up** position.
5. The Participant must perform a minimum of **30 sit ups** in one (1) minute.
6. The Participant's score is the total number of correct sit ups performed in one minute.

VERTICAL JUMP

Purpose

This is a measure of jumping or explosive power.

Test Procedures

The vertical jump test involves measuring the difference between the standing reach and the height reached at the peak of a vertical jump.

1. The Participant will stand under the vertical jump flag apparatus (see illustration below) and reach up as high as possible keeping the feet flat on the ground. The highest flag touched for the standing reach will be marked.



2. The Participant will then stand slightly away from the vertical jump flag apparatus and jump as high as possible and touch the flag at the highest point of the jump. The Participant must jump from both feet in a stationary stance. Arms may be pumped and thrust upward.
3. The Participant must touch a flag a minimum of **16 inches** above his/her standing reach.
4. The Participant shall have three (3) attempts to meet the minimum standard.



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PHYSICAL FITNESS ASSESSMENT STANDARDS

| TEST | MINIMUM REQUIREMENT |
|---------------------------------|---------------------|
| 1.5 Mile Run | 15:00 Minutes |
| Vertical Jump | 16 Inches |
| Push-Ups (No time limit) | 30 |
| Sit-Ups (One minute time limit) | 30 |
| 300 Meter Run | 71 Seconds |



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WAIVER OF LIABILITY PHYSICAL FITNESS ASSESSMENT TEST

I, (printed name) _____, agree to hold the **PORTER COUNTY SHERIFF'S OFFICE**, the **COUNTY OF PORTER**, and any agent of the **PORTER COUNTY SHERIFF'S OFFICE** and the **COUNTY OF PORTER**, harmless from any liability or responsibility for any damages or injuries which I may receive as a result of my participation in the **PORTER COUNTY SHERIFF'S OFFICE** physical fitness assessment test.

This waiver specifically applies to any and all activities surrounding my participation in this physical fitness assessment test, which I undertake voluntarily and with a physician's approval.

| | |
|------------------------------|--------------------|
| APPLICANT'S SIGNATURE | DATE SIGNED |
| | |



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PHYSICIAN'S RELEASE PHYSICAL FITNESS ASSESSMENT TEST

APPLICANT'S NAME: _____

THE ASSESSMENT TEST IS COMPRISED OF THE FOLLOWING EVENTS:

1.5 MILE RUN– to determine cardiovascular/respiratory endurance

BENT KNEE SIT-UPS– to determine back stability and abdominal endurance

PUSH-UPS– to determine upper body muscular endurance

STANDING VERTICAL JUMP– to determine explosive leg power

300-METER RUN– to determine short-distance speed ability

I certify that the named individual is fit to participate in the above-listed events for the physical fitness assessment test of the Porter County Sheriff's Office.

REFERRING PHYSICIAN'S SIGNATURE: _____

| | |
|--------------------------|---------------------|
| PHYSICIAN'S PRINTED NAME | OFFICE PHONE NUMBER |
| OFFICE ADDRESS | |

NOTE: The applicant MUST bring this signed release to the physical fitness assessment test in order to be eligible to participate.

2023 SALARY AND BENEFITS FOR PATROL OFFICER PORTER COUNTY SHERIFF'S OFFICE

SALARY

| | |
|-------------------------------|----------|
| Probationary Officer | \$53,332 |
| 2 nd Class Officer | \$57,593 |
| 1 st Class Officer | \$66,011 |

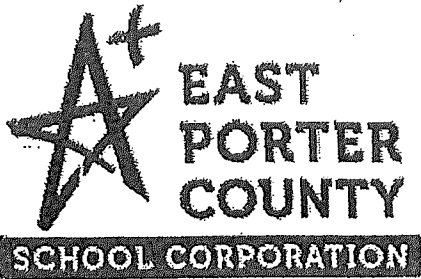
Longevity pay starting after the completion of 3rd year of service

BENEFITS

- ◆ Medical / dental / vision / prescription insurance available
- ◆ Life insurance
- ◆ Wellness program
- ◆ In-house fitness room with Men's and Women's locker rooms (available 24 hours/day)
- ◆ Paid vacation
- ◆ Paid holidays
- ◆ Full pension with 20 years of service (Officer pays 3% of salary)
- ◆ Deferred compensation plan available (Hoosier START 457 Plan)
- ◆ Take-home car program (after completion of academy & field training)
- ◆ Individual in-car laptop computers
- ◆ Quartermaster system – all clothing & equipment furnished by department
- ◆ Life Insurance through Porter County Government and Indiana Sheriff's Association

SPECIALITIES AVAILABLE

- | | |
|--|---------------------------|
| ◆ Detective Bureau | ◆ Multi-Enforcement Group |
| ◆ Bomb Squad (Only Team in the Region) | ◆ Color Guard Unit |
| ◆ Crime Scene Investigator | ◆ K-9 Unit |
| ◆ Emergency Response Team (ERT) | ◆ Motorcycle Officer |
| ◆ Accident Reconstruction Team | ◆ Field Training Officer |
| ◆ School Resource Officer | ◆ Bicycle Unit |
| ◆ Heroin Overdose Response Team (HORT) | ◆ Crisis Negotiator |



Notice of Limited Liability from the Public Use of
School Facilities for Physical Fitness Activities

This form is to be signed by any member of the public using a school facility for physical fitness activities. The completed form must be provided to the principal or his or her designee before the physical fitness activity commences.

WARNING

Under Indiana law, a school is not liable for an injury to, or the death of, a participant in physical fitness activities at this location if the death or injury results from the inherent risks of the physical fitness activity.

Inherent risks of physical fitness activities include risks of injury inherent in exercise, the nature of a sport, the use of exercise equipment, or the use of a facility provided by a school. Inherent risks also include the potential that you may act in a negligent manner that may contribute to your injury or death, or that other participants may act in a manner that may result in injury or death to you.

You are assuming the risk of participating in this physical fitness activity.

| | |
|-----------------------------|--|
| _____ | _____ |
| Printed name of participant | Printed name of parent/guardian if participant is a minor |
| _____ | _____ |
| Participant's signature | Parent/Guardian's signature if participant is a minor |
| _____ | _____ |
| Date | Date |