

BOROUGH OF SHILLINGTON
POLICE DEPARTMENT

POLICE OFFICER APPLICATION

General Instructions: This application consists of several sections: a Questionnaire; a Notification Procedure Release; a Description of Essential Job Functions and a Personal Injury Waiver. Every one of these sections must be completed in order for the Borough of Shillington to accept the application as complete. Please print legibly or type your responses. Do not miss state or omit material facts since the statements made herein are subject to verification to determine your qualifications for employment.

1. _____
Last Name First Name Middle Name

2. _____
Place of Birth

3. _____ 4. _____
Social Security Number Email Address

5. _____
Telephone number

6. _____
Present Address (Street/City/State/Zip)

7. Will you turn twenty-one (21) before the deadline for submitting a completed application? Yes No

8. Are you a United States Citizen Yes No
9. Do you have a valid PA driver's license? Yes No

State of issuance and operator number

10. Do you have a diploma or GED from an accredited high school? Yes No

11. Have you ever served in the U.S. Armed forces? Yes No
If yes, attach a copy of the discharge of separation papers

12. Do you claim veteran's preference? Yes No

13. Do you currently have Act 120 certification? Yes No

14. **Residences:** List all for past five (5) years beginning with current

Month/Year	Address

PLEASE CONTINUE TO PAGE 3

15. **Employment:** Begin with your most recent job, list your work history for the past five (5) years, including part-time, temporary or seasonal employment, and all periods of unemployment. If additional employer blocks are needed, please attach requested information on a separate sheet.

Date		Name & Address of Employer
From	To	
Date		Name & Address of Employer
From	To	
Date		Name & Address of Employer
From	To	
Date		Name & Address of Employer
From	To	
Date		Name & Address of Employer
From	To	
Date		Name & Address of Employer
From	To	
Date		Name & Address of Employer
From	To	

16. **Certification/Signature:**

I, the applicant, swear or affirm that I personally completed this application, and that it has been completed truthfully.

I further acknowledge that I have no prior disqualifying criminal convictions or circumstances as determined by the PA Municipal Police Officer's Education and Training Commission.

I certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the entries made by me above are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

If an offer of employment is extended, a medical examination, including an urinalysis/drug screen, will be required. By signing this application, I hereby give my consent to this medical examination.

Signature of Applicant

Date

NOTIFICATION PROCEDURE RELEASE

In the processing procedure required for applicants it may become necessary to contact the applicant in the event they are being given further consideration for the position of police officer with the Borough of Shillington.

If conventional methods fail in attempting to contact the applicant, a certified/registered letter will be sent to the applicant's address listed on the application. Should the registered letter be returned indicating that it was unclaimed or undeliverable, the applicant will be eliminated from further processing and consideration.

It is the applicant's responsibility to notify the Shillington Police, in writing, of the address change. By affixing your signature to this form, the applicant acknowledges that you have read and understood the contents of this procedure.

Signature of Applicant

Date

ESSENTIAL DUTIES OF A POLICE OFFICER

1. Running for several hundred yards;
2. Climbing over obstacles;
3. Crawling;
4. Pushing motor vehicles;
5. Pulling or carrying accident, fire or crime victims;
6. Using physical force to apprehend and subdue arrestees;
7. Withstanding prolonged exposure, as long as eight hours, to extreme weather conditions;
8. Withstanding prolonged periods of standing and sitting;
9. Withstanding frequent exposure to stress-producing situations such as encountering persons injured or killed by accidents, crimes or suicide;
10. Dealing with domestic disputes;
11. Dealing with verbal and physical abuse of the officer, including taunts, insults, and threats to the officer, family members, or fellow police officers;
12. Communicating effectively with individuals suffering from trauma;
13. Operating a motor vehicle for long periods of time;
14. Using a firearm effectively; and
15. Filling out written reports in a clear and concise manner.

I have reviewed the above list of essential job functions for a Shillington police officer and believe that:

- _____ I can fully perform all duties without reasonable accommodations.
- _____ I can fully perform all duties but only with the following accommodations for the duties specified:
- _____ I cannot fully perform all duties even with accommodations.

Name

Signature

Date

.....

VERIFICATION

I understand that this Application has been completed subject to the penalties of 18 Pa. C.S. 54904 relating to unsworn falsification to authorities.

Date: _____

Signature

**BOROUGH OF SHILLINGTON
BERKS COUNTY, PENNSYLVANIA
PHYSICAL AGILITY TEST**

PERSONAL INJURY WAIVER

Applicant's Name: _____

Social Security Number: _____

WAIVER

I, the above-named applicant, hereby release the Borough of Shillington or any of its officials or authorized representatives from any and all liability or damage for any physical injury, illness or health complication which may result from performing the physical agility test for the position of Police Officer.

Applicant's Signature

Date

Complete Address

AFFIDAVIT

State of _____

County of _____

Before me personally appeared the said _____ who says that he/she executed the above instrument of his/her own free will and accord, with full knowledge of the purpose thereof.

Sworn to and subscribed in my presence this ____ day of _____, 20____.

Notary Public

IMPORTANT

Please adhere to the following guidelines:

- Provide proof of graduation from high school or a graduate equivalency diploma
- Provide a valid Pennsylvania driver's license
- Include the completed and notarized Personal Injury Waiver in order to be eligible to take the physical fitness/agility test.
- Completed applications must be returned in person by the applicant (if the Town Hall is permitted to be open) or by certified mail to the Shillington Town Hall, 2 E. Lancaster Avenue, P.O. Box 247, Shillington, Pennsylvania 19607.
- If returning by certified mail, please include a copy of your driver's license, diploma.
- Include a \$45.00 Application Fee with your returned application. Checks should be made payable to "Borough of Shillington."
- **Deadline to return applications is 3:00 p.m., Friday, July 17, 2026.**
- A written examination will be held Saturday, August 8, 2026 beginning at 9:00 a.m. at the Borough of Shillington's Municipal Building located at 999 E. Broad Street, Shillington.
- The written examination will be followed by a physical fitness/agility test beginning at 2:00 p.m. at Governor Mifflin School District Stadium, 10 South Waverly Street, Shillington.
- Unless formally notified otherwise, please continue to complete all subsequent examinations and tests of the process.
- **Official** transcripts from last high school and last college or university attended will be required at the time of the background investigation.