



# **NORMAL POLICE DEPARTMENT**

## **STUDENT INTERNSHIP APPLICATION**

**Lt. Paul Smith**

Internship Coordinator

309-454-9714

[psmith@normal.org](mailto:psmith@normal.org)

### **APPLICATION INSTRUCTIONS**

Applicants should first contact their university internship coordinator to insure that all university requirements have been met and that they are in fact eligible for an internship program. Initial contact with the Normal Police Department should be through the university internship coordinator.

A letter from the university internship coordinator indicating student eligibility must accompany the application. The Normal Police Department encourages students to strictly adhere to their university procedures.

Students must include a resume and/or cover letter with their application. For additional information contact our Internship Coordinator or the Administrative Office Assistant.

Please complete all questions, print the packet, sign and date the appropriate pages. Students must mail their completed application packet, including the letter from your university internship coordinator, a resume and/or cover letter, to the attention of:

**Internship Coordinator  
Normal Police Department  
100 East Phoenix Avenue  
Normal, Illinois 61761**

The Normal Police Department encourages interested individuals to submit their application by the following deadlines:

**Fall Semester - April 1  
Spring Semester - October 1  
Summer Semester - March 1**

**APPLICANT**

Last Name: First Name: Middle Initial:  
 Social Security Number: Date of Birth: Sex: M F  
 Driver's License Number: State of Issue: Date Issued:  
 Class: Expiration Date:  
 E-Mail: Phone: Cell Phone:  
 Any history of a change of name or use of another name? Yes No  
 If yes, list names, dates used and circumstances:

Permanent Residential Address:  
 City, State, Zip Code:

School Residential Address:  
 City, State, Zip Code:

In case of Emergency, who shall we notify?

Name: Address:  
 City, State, Zip Code: Phone:  
 Alternate Phone:

**INTERNSHIP**

What semester are you applying for? Fall Spring Summer

Are you available on weekends, nights and/or holidays? Yes No  
 If NO, explain:

Are there any areas of specialized interest you'd like your internship to emphasize? Yes No  
 If Yes, explain:

**COLLEGE/UNIVERSITY**

College or university you are currently attending:

Major/Minor:

Dates Attended:

Hours Completed:

GPA:

Internship Coordinator:

Name:

Address:

City, State, Zip Code:

Phone:

E-Mail:

Colleges you previously attended:

College Name:

Major/Minor:

Dates Attended:

Hours Complete:

GPA:

Degree Earned:

College Name:

Major/Minor:

Dates Attended:

Hours Complete:

GPA:

Degree Earned:

College Name:

Major/Minor:

Dates Attended:

Hours Complete:

GPA:

Degree Earned:

List college activities, academic awards, etc.:

**HIGH SCHOOL**

High School/s you've attended:

School Name:	City, State:		
Dates Attended	Diploma Earned:	Yes	No

School Name:	City, State:		
Dates Attended	Diploma Earned:	Yes	No

List high school activities, academic awards, etc.:

**REFERENCES**

List three persons who we may contact who are not related to you and who have definite knowledge of your qualifications and fitness for an intern position.

Name:	Address:
City, State, Zip Code:	
Phone Number:	Relationship:

Name:	Address:
City, State, Zip Code:	
Phone Number:	Relationship:

Name:	Address:
City, State, Zip Code:	
Phone Number:	Relationship:

## **EMPLOYMENT HISTORY**

To complete this section, begin with your present or more recent employer first, and continue in reverse chronological order.

Employer Name: Address:  
City, State: Supervisor Name:  
Phone: Start Date: End Date:  
Position:  
Duties:

Employer Name: Address:  
City, State: Supervisor Name:  
Phone: Start Date: End Date:  
Position:  
Duties:

Employer Name: Address:  
City, State: Supervisor Name:  
Phone: Start Date: End Date:  
Position:  
Duties:

**MILITARY EXPERIENCE**

Branch of Service:

Service Dates:

Highest Rank Earned:

Specialization Duties:

Have you been the subject of a military court martial?

Yes

No

If Yes, list dates, circumstances and outcome:

**DRIVING RECORD**

List any traffic convictions for the last five years.

	Date	Charge	Penalty	City, State
1				
2				
3				
4				

**CRASH RECORD**

List any traffic crashes for the last five years.

	Date	Nature of Accident	Number of injuries or Fatalities	City, State
1				
2				
3				

**CRIMINAL HISTORY**

Have you been arrested for violation of a State or Local law (other than traffic)? Yes No  
If Yes, list dates, City and State of violation:

Have you been convicted of a misdemeanor for violation of a State or Local law? Yes No  
If Yes, list dates, City and State of conviction:

Have you been convicted of a felony for violation of a State or Federal law? Yes No  
If Yes, list dates, City and State of conviction:

**PROFESSIONAL SKILLS**

Whenever possible, Normal Police Department attempts to fully utilize the skills of our interns. Please indicate your level of expertise in each of the skill areas listed below.

	N/A	LOW	MEDIUM	HIGH
Accounting/Bookkeeping				
Statistics				
MS Word				
MS Excel				
MS Access				
MS PowerPoint				
MS Outlook				
Keyboarding/Typing				
Photography/Videography				
Research				
Additional skills not listed:				

**WRITING SAMPLE**

In 150-300 words, describe why you want to enter the field of law enforcement: (Leave space for approx. 300 words)



**REFERENCE RELEASE OF LIABILITY**

I respectfully request that you forward to the Town of Normal, Illinois, any and all information that you have concerning me, my work record, or my reputation. This includes any information that may appear in my personnel file, criminal conviction records, or other confidential files or records. This information will be used to determine my qualifications and fitness for the position of Intern I am seeking with the Town of Normal. I hereby release you and/or your employer from any liability and/or damage of whatever nature due to the furnishing of such information requested above.

Further, I acknowledge that the internship program typically involves riding in agency vehicles and participating in policing activities. I realize that such activity involves risk of personal injury or property damage, and I hereby assume such risk and release and agree to hold harmless the Town of Normal, the Normal Police Department, their officers, agents and employees from any liability for civil damages arising out of their actions or the actions of others in connection with this activity. In consideration of participating in the ride-a-long program, I further covenant and agree, as a condition of the granting of my internship request, to indemnify and hold harmless the Town or Normal, the Normal Police Department, their officers, agents and employees from any liability which may be incurred by them or either of them proximately resulting from any acts or omissions by me during this activity. I further represent that I am above the age of 18 years, with full understanding of all risks involved and agree that this release and its indemnity agreement shall be binding upon my heirs, executors, administrators, and assigns. A copy of this release is as valid as the original signed **REFERENCE RELEASE OF LIABILITY** even though the copy does not have my original signature.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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

**APPLICATION CERTIFICATION**

I hereby certify that all answers to the above questions are true and I agree and understand that any false statement contained in this application may cause rejection of this application or termination of internship, and shall constitute gross misconduct for benefit eligibility. I understand that an incomplete application may result in a lost internship opportunity.

I authorize the Town of Normal to contact my current and past employers and personnel references listed above to verify employment, work records, and suitability for internship with the Town, and to investigate personal, criminal, or other areas, such as personal contact with neighbors, friends, or others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics, and mode of living. I understand that my appointment to an internship may be subject to satisfactorily completing a pre-employment medical exam, including drug and alcohol screen, and that the truthfulness of the statements in this application may be verified by polygraph examination.

I understand that I will have to provide acceptable documentation attesting that I am a U.S. citizen.

I understand that this application is not a contract of internship. I understand that any oral or written statement to the contrary is expressly disavowed, and should not be relied upon by my prospective or existing employee.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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

## **INTERNSHIP RULES**

Interns are required to obey all State and local laws. Additionally, the following program rules must be obeyed. Violation of State or local laws and/or program rules shall be cause for removal from the program.

**Safety:** Interns must be situationally aware and conduct themselves in a safe manner at all times. Unsafe acts or conditions must be reported to the Shift/Unit supervisor and our Internship Coordinator as soon as possible.

**Confidentiality:** Interns shall treat the office business of the Department as confidential and **shall not** disseminate information regarding departmental business or operations unless expressly permitted by supervisory staff.

**Weapons:** Interns are prohibited from carrying weapons or handcuffs of any type.

**Enforcement Action:** Interns are prohibited from taking any type of enforcement action. Interns shall not at any time represent themselves as sworn officers.

**I.D. Badges:** Interns must have their Identification Badge clearly displayed when entering the building and during scheduled work hours (except when impractical or detrimental to the progress of criminal investigations). Lost or stolen I.D. badges must be immediately reported to our Internship Coordinator. Interns are required to return I.D. badges at the completion of the program.

**Conduct:** Interns shall not at any time engage in unbecoming conduct which tends to discredit the Department.

**Courtesy:** Interns shall not use profane or intentionally insulting or degrading language or actions toward any other member of the Department or to any citizen. Interns shall be courteous and tactful in the performance of their duties and shall promptly respond to all reasonable requests for assistance. Interns shall refer to sworn staff members by their appropriate rank and last name.

**Punctuality and Attendance:** Interns are required to punctually report for work and assigned duties. Time off from work shall be coordinated with our Internship Coordinator at least three days in advance. In the event of an illness or emergency which prevents attendance, contact the supervisor in your assigned unit prior to the work shift.

**Appearance:** Interns represent the Normal Police Department and shall maintain a neat, well-groomed appearance, with attire and foot wear that is appropriate for an office work environment (business casual).

Supervisors may allow adjustments to this rule for certain work situations when appropriate.

**Absolutely NO;** sandals, flip-flops, shorts, cut-offs, T-shirts, clothing with offensive wording, logos or images.

**Parking:** Interns will be given a parking permit valid for the dates of their internship. Intern parking is available in the spaces marked Permit Parking in the lot north of the police building.

**Driving of City Vehicles:** Interns driving city vehicles shall pay strict adherence to traffic laws and shall wear seat belts when driving or riding.

**I have read the above and understand a violation of State or local laws and/or program rules shall be cause for removal from the internship program.**

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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