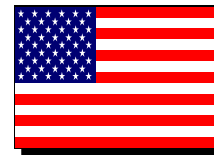




# LOVINGTON POLICE DEPARTMENT



*David A. Miranda*  
*Chief of Police*

*213 South Love Street*  
*Lovington, NM 88260*

*Phone: (575) 396-2811*  
*Fax: (575) 396-3597*

## LOVINGTON POLICE DEPARTMENT

### POLICE OFFICERS

Salary: N.M. Certified Officer "base" salary \$53,909.96 (\$24.11/hr.)  
Non-Certified \$45,660.01 (\$20.42/hr.)

Out of State: Certified officers from another state, who meet the minimum State of New Mexico requirements are eligible for a "certification by waiver" academy and certified officers pay upon completion of the waiver academy.

Benefits: Uniforms, equipment and take home vehicle provided within 25 mile radius  
P.E.R.A. Retirement: City pays 10%, Employee 7%  
Deferred Comp  
Safety Incentive  
Sick time savings incentive  
City pays 85% of group medical/dental insurance  
11 paid holidays per year along with paid sick leave & vacation

Contact: Training Sergeant Christopher Leyva  
Lovington Police Department  
213 S. Love Street  
Lovington, N.M.  
(575) 396-9333  
[cleyva@lovington.org](mailto:cleyva@lovington.org)

Applications can be obtained at the Lovington Police Department or by going online to [www.lovington.org](http://www.lovington.org).

Closing Date Until Position is Filled

Successful applicants will pass a rigorous selection process.  
The City of Lovington is an equal opportunity employer



# APPLICATION FOR EMPLOYMENT

CITY OF LOVINGTON  
214 SOUTH LOVE STREET  
LOVINGTON, NM 88260

OFFICE: (575) 396-2884  
FAX: (575) 396-6328  
[www.lovington.org](http://www.lovington.org)

**PLEASE NOTE: You may submit a resume, but a resume IS NOT a substitute for this application.  
Incomplete and unsigned applications will not be processed.**

**Name on Application Must Match the Name on Your Social Security Card**

Position Applied For: \_\_\_\_\_ Date Available: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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

Current Address: \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_ / \_\_\_\_\_ E-Mail: \_\_\_\_\_

May We Contact You at Work? ☐ YES ☐ NO Work Number: \_\_\_\_\_ Best Time: \_\_\_\_\_

If You Are Under the Age of 18, Can You Furnish a Work Permit? ☐ YES ☐ NO

Have You Ever Been Employed by the City of Lovington? ☐ YES ☐ NO

If YES, give dates: From: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ DEPT: \_\_\_\_\_

Are You Related to Any City of Lovington Employee or Elected City of Lovington Official? ☐ YES ☐ NO

If YES, who and what is the relationship? \_\_\_\_\_

Are You Legally Eligible for Employment in the United States? ☐ YES ☐ NO

*(Proof of U.S. Citizenship or Immigration Status will be Required Upon Employment)*

Date Available for Work: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Type of Employment Desired: ☐ Permanent ☐ Term ☐ Temporary ☐ Part-Time

If Required by Employer, Will You Undergo a Pre-employment Physical and Drug Screen? ☐ YES ☐ NO

Driver's License Number: \_\_\_\_\_ State \_\_\_\_\_ Class \_\_\_\_\_ CDL: ☐ YES ☐ NO

How Did You Learn of This Position? ☐ City of Lovington website ☐ Newspaper ☐ Referral Other: \_\_\_\_\_

**The City of Lovington is an Equal Opportunity Employer**

## EMPLOYMENT HISTORY

(All related experience and education required for this position must be included in this application to be considered)

List your last 3 (three) employers, assignments or volunteer activities that would be relevant to this position (starting with the most recent), including any military experience.

Please explain any gaps in employment in the COMMENTS section.

You may submit a resume, but a resume **IS NOT** a substitute for this application form.

Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_/\_\_\_\_/\_\_\_\_ To: \_\_\_\_/\_\_\_\_/\_\_\_\_

Starting Pay: \_\_\_\_\_ Ending Pay: \_\_\_\_\_

Job Title: \_\_\_\_\_ Immediate Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Summarize Job Responsibilities: \_\_\_\_\_

May we contact your current place of employment for a reference: ☐ YES ☐ NO ☐ LATER

Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_/\_\_\_\_/\_\_\_\_ To: \_\_\_\_/\_\_\_\_/\_\_\_\_

Starting Pay: \_\_\_\_\_ Ending Pay: \_\_\_\_\_

Job Title: \_\_\_\_\_ Immediate Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Summarize Job Responsibilities: \_\_\_\_\_

May we contact your current place of employment for a reference: ☐ YES ☐ NO ☐ LATER

Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_/\_\_\_\_/\_\_\_\_ To: \_\_\_\_/\_\_\_\_/\_\_\_\_

Starting Pay: \_\_\_\_\_ Ending Pay: \_\_\_\_\_

Job Title: \_\_\_\_\_ Immediate Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Summarize Job Responsibilities: \_\_\_\_\_

May we contact your current place of employment for a reference: ☐ YES ☐ NO ☐ LATER

COMMENTS: \_\_\_\_\_

## EDUCATION

List last 3 (three) schools attended, including high school, starting with the most recent.

	Number of Years Completed	Indicate any Degree or Diploma Earned	Credit Hours	Major (If Applicable)	Minor (If Applicable)
1					
2					
3					

## LANGUAGE

List the language you use, and check the box that describes your skill level.

	Speak	Read	Write
1			
2			

## SKILLS and QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experiences that may qualify you for work with the City of Lovington.

TYPING \_\_\_\_\_ WPM

WORD - Version \_\_\_\_\_

☐ BEGINNER

☐ INTERMEDIATE

☐ ADVANCED

WINDOWS - Version \_\_\_\_\_

EXCEL - Version \_\_\_\_\_

☐ BEGINNER

☐ INTERMEDIATE

☐ ADVANCED

10 KEY: ☐ BEGINNER ☐ INTERMEDIATE ☐ ADVANCED

OTHER (Office Equipment, Machinery/Equipment, Tools, Etc)

## REFERENCES

List 3 (three) school or personal references **NOT RELATED** to you.

NAME	TELEPHONE	YEARS KNOWN
1		
2		
3		

## ADDITIONAL INFORMATION

List professional trade, business, civic associations and any offices held.

*(Exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, disability or protected status)*

ORGANIZATION	OFFICES HELD

List special accomplishments, publications, awards, etc.

*(Exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, disability or protected status)*

## COMMENTS

## ACKNOWLEDGEMENT / AUTHORIZATION

Please Read and Sign the Statements Below

*(Failure to Sign Will Disqualify this Application for Employment Consideration)*

The facts set forth in my application for employment and/or resume are true and complete, to the best of my knowledge.

I understand that if employed, false statements on this application or during my interview(s) shall be considered sufficient cause for dismissal.

I authorize any of my previous employers, schools, or persons named as references to give any information regarding employment or educational record.

I agree that the City of Lovington and my previous employers shall not be held liable in any respect if a job offer is not extended, is withdrawn, or my employment is terminated because of false statements, omissions or answers made by me in my application, resume or during my interview(s).

I understand that any offer of employment is contingent upon my successful completion of the pre-employment screening process and satisfactory completion of any post offer pre-employment examinations that may be required and I give consent to the results of any required examinations or screenings to be released by the City of Lovington.

If selected for employment, I agree to comply with the policies, rules, regulations and procedures set forth by the City of Lovington.

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

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

## DRUG SCREENING ACKNOWLEDGEMENT / AGREEMENT

By my signature below, I \_\_\_\_\_ realize and understand that if considered for employment with the City of Lovington, I will be required to submit to a drug screening test as a condition of hire. The City of Lovington will pay for this drug screening test.

My signature below also serves to acknowledge and agree to the fact that if I receive a conditional offer of employment with the City of Lovington, and accept it, one factor that must be met PRIOR to final offer of employment being made is the successful completion of a drug screening test. Successful completion of a drug screening test is defined as test results showing **no trace** of drugs.

I understand that an unsuccessful completion of a drug screening test means I **will not** be eligible for hire with the City of Lovington.

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

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

Last Name: \_\_\_\_\_

**RELEASE OF INFORMATION:** THIS PAGE MUST BE NOTARIZED BY A NOTARY PUBLIC. FAILURE TO DO SO WILL RESULT IN THIS APPLICATION'S DISMISSAL.

Having made application with the Lovington Police Department, it is my understanding that a comprehensive investigation of my background may be conducted in connection with this application.

I, \_\_\_\_\_ do hereby give the officials of the Lovington Police Department the authority to conduct such an investigation and do hereby authorize the release of any and all information requested by the Lovington Police Department pertaining to my work history, any arrest information, and other general qualifications for fitness.

I hereby expressly waive any laws, regulations, and/or other rules which otherwise might prevent other parties from disclosing and releasing such records.

A photo-static copy of the Authorization which contains my signature, shall be considered as effective and valid as the original and may be honored by the other parties.

Applicant Name (Print): \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

State of New Mexico )  
  )  
County of Lea            )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_ known to me to be the person whose name is subscribed to the above instrument and acknowledged the same to be his/her own free act and deed.

(Seal)

\_\_\_\_\_  
Notary  
My Commission Expires: \_\_\_\_\_

## **SUPPLEMENTAL QUESTIONNAIRE:**

The provisions of the Law Enforcement Training Act (29-7-1 to 29-7-11 NMSA 1978) and Dispatch Training act (29-7A-1 to 29-7A-7 NMSA 1978), established the following specific criteria for admission to the Law Enforcement Academy or Dispatcher Training Program and mandated certification(s):

### **Requirements for Police or Telecommunications Officers:**

1. Be a citizen of the United States and reached the age of majority (18 years of age) for Police.
2. Be a citizen or a legal resident of the United States and reached the age of majority for Telecommunications Officer,
3. Hold a High School Diploma or GED Equivalent,
4. Possess a valid driver's license,
5. Have not been convicted of or pled guilty to or entered a plea of Nolo Contender to any felony charge or, within the three year period immediately preceding their application, to any violation of any federal or state or local ordinance relating to aggravated assault, theft, driving while intoxicated, controlled substances or other crime involving moral turpitude and HAVE NOT BEEN RELEASED OR DISCHARGED UNDER DISHONORABLE CONDITIONS FROM ANY OF THE ARMED FORCES OF THE UNITED STATES,
6. After examination by a certified psychologists, found to be free of any emotional or mental condition which might adversely affect performance as a Police or Telecommunications Officer or be prohibited from successfully completing prescribed basic law enforcement training required by the Law Enforcement Training Act and Dispatcher Training Act,
7. Be of good moral character,
8. Have met any other requirements for certification prescribed by the board pursuant to regulations adopted by the board, and
9. Applicant affidavit of United States citizenship.
10. FOR POLICE APPLICANTS: After examination by a licensed physician, found to be free of any physical condition which might adversely affect performance as a Police Officer or be prohibiting from successfully completing prescribed basic law enforcement training required by the Law Enforcement Training Act.

In addition, the Lovington Police Department sets the following for Police Officers:

1. 21 Years of age or older within 365 days from the date of employment.
2. No convictions of or for a family violence criminal offense.
3. Honorable Discharge from any of the Armed Forces of the United States.

**DRUG USAGE:** Current usage, or past usage within a past year, of marijuana will be cause for disqualification. The use of any of Cocaine, Heroin, and/or Methamphetamine within a five year period prior to application will be cause for disqualification. Any prior/current use of L.S.D. or other recognized hallucinogen (mushrooms, peyote, etc) will be reason for disqualification. Any other drug usage will be reviewed on an individual basis to determine acceptability or disqualification depending upon the frequency and recency of usage. Information regarding drug usage will be included during the polygraph examination.

**WRITTEN EXAMINATION:** Written exams will be given to each non-certified police officer applicant. The exam takes approximately one and one half hours to complete. The exam will be graded and pass/fail results will be mailed to the applicant. To participate in the testing process, applicant must bring a STATE ISSUED PHOTO ID. An applicant who fails the test may reapply and be retested after a twelve (12) month period from the date of the previous application.

**ORAL INTERVIEW:** Applicants are interviewed by department representatives who will measure traits that are significant or necessary to perform the job, and demonstrate the applicants ability to relate ideas and answer questions relative to the job. Applicants who fail the oral review board may reapply after a twelve (12) month period from the previous application date to reschedule a second oral review if positions are available. Applicants may only appear twice before the board.

**BACKGROUND INVESTIGATION AND REFERENCE CHECKING:** Applicants who successfully pass the oral review will meet with a background investigator to start the background investigation which includes, but is not limited to, employment history, honesty, character, reference checking, traffic history, and criminal history. Upon completion of a background investigation and reference check, results should not reveal any areas of concern which would be a contradiction of employment with the Lovington Police Department, such as convictions of perjury, brutality, or dishonesty. Applicants who are determined to be unsuitable will be disqualified.

**POLYGRAPH EXAMINATION:** During the employment phase, applications for the position of Police or Telecommunications Officers, are required to participate in a polygraph examination.

Last Name: \_\_\_\_\_

**TERMS: CONDITIONAL OFFER OF EMPLOYMENT** - A conditional offer of employment will be extended to eligible applicants, prior to the required drug screen, polygraph, psychological, medical and physical examinations. The conditional offer will be withdrawn if: the applicant tests positive for controlled substances, medical practitioner(s) reveal any area(s) of concern or if there are any other indicators which would be a contradiction of good moral character for employment with the Lovington Police Department.

**ACADEMY FITNESS SCREENING STANDARDS:** Following the conditional offer of employment, applicants for the position of non-certified Police Officers are required to meet the FITNESS SCREEN STANDARDS as required by the New Mexico Law Enforcement Academy and be able to meet those minimum standards prior to the starting of the academy. These minimum standards are included in this application packet.

**PSYCHOLOGICAL EXAMINATION:** Following a conditional offer of employment, applicants for the position of Police and Telecommunications Officers will participate in a psychological examination consisting of a written questionnaire and an interview with a psychologist. In compliance with New Mexico Law Enforcement Academy regulations applicants who are not recommended for hire will be reported to the New Mexico Law Enforcement Academy.

**MEDICAL EXAMINATION:** Following a conditional offer of employment, applicants for the position of Police Officer will undergo a physical examination by the City's appointed medical personnel. The examination is based upon the medical standards of the New Mexico Law Enforcement Academy and requires fasting prior to the examination.

**WORKING CONDITIONS:** SEE WILLINGNESS QUESTIONNAIRE

**UNIFORMS:** The Lovington Police Department furnishes all necessary equipment to the Police Officers except boots/shoes which must meet department regulations. Telecommunication Officers are provided uniforms as well.

**CERTIFIED APPLICANTS/LATERAL TRANSFERS:** Officers who are currently certified by the New Mexico Law Enforcement Academy will have the written examination and fitness screening standard waived. Officers who are certified by the New Mexico Law Enforcement Academy and whose commissions have lapsed, but are eligible for re-commission through the "Certified by Waiver of Previous Training" Academy will have the written examination waived but must meet the Fitness Screening Standards.

Officers who are certified in another state and who are eligible for the New Mexico Law Enforcement Academy's "Certificate of Waiver of Previous Training" will have the written examination waived but must meet the Fitness Screening Standards.

Officers who are certified in another state will be considered, on an individual basis, for certification processing at the New Mexico Law Enforcement Academy depending on previously documented law enforcement training received. It is the applicants responsibility to contact the academy and verify eligibility for the Certification by Waiver training. The police department will assist in this endeavor.

**APPLICANTS MUST TRAVEL AT THEIR OWN EXPENSE FOR THE POLICE OFFICER TESTING**

**FINAL OFFER:** A final offer of employment and start date will be made by the City of Lovington, NM after satisfactory completion of all portions of the selection process. Failure of any portion of the conditional offer testing is an automatic withdrawal of the conditional offer of employment by the City of Lovington, New Mexico.

What is your age? \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Have you ever been denied coverage by a surety bond for handling finances? YES NO N/A

Do you know of any reason you might be denied coverage? YES NO

If YES, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Last Name: \_\_\_\_\_

**We declare that the existence of a conviction record will not automatically disqualify you from all employment with the City of Lovington, however, certain types of criminal convictions may prohibit you from working in certain jobs.**

I, \_\_\_\_\_  
(Print first, middle & last name) HEREBY AUTHORIZE THE RELEASE TO THE LOVINGTON POLICE DEPARTMENT, OF PAST OR CURRENT INFORMATION CONCERNING CONVICTIONS AGAINST ME FROM ANY AGENCY INCLUDING THE UNITED STATES DEPARTMENT OF DEFENSE OR ANY OF ITS BRANCHES. I DO HEREBY HOLD HARMLESS AND FREE OF LIABILITY ANY SOURCE THAT RELEASES THIS INFORMATION.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**APPLICATION, REVIEW EACH SECTION CAREFULLY. FAILURE TO LIST ANY PAST OR PRESENT INFORMATION ON EACH SECTION WILL BE SUBJECT TO YOUR APPLICATION'S DISMISSAL.**

Have you ever had your driver's license suspended or revoked by the licensing authority (state or court)  
YES NO If "YES", list the required information in the spaces below:

Dates:		State:	Reason:
	To:		
	To:		
	To:		

Have you ever been sentenced to a driver's improvement school? YES NO If "YES", list the required information in the spaces below:

Dates:		State:	Reason:
	To:		
	To:		
	To:		

Last Name: \_\_\_\_\_

List all driving citations/summons you have received as an adult and juvenile, beginning with the most recent:

Month/Year	Charge	City/State	Disposition

**ADDRESS HISTORY:** In the spaces provide below, list all addresses where you have lived during the past ten (10) years, including military addresses if applicable. **BEGIN WITH YOUR CURRENT ADDRESS:**

From	To	Street Address	City, State

**ALIAS/NICKNAME/OTHER IDENTIFICATIONS:** In the spaces provided below, list any other alias, nicknames, or identifications that you have used or other individuals do or have known you by:

Alias/Nickname/Other Identification		

Last Name: \_\_\_\_\_

**CRIMINAL HISTORY:** Have you ever been convicted by a court, board, or special judicial authority for any violation of Federal, State, County, or Municipal Law: including events while you were a juvenile and/or events while you were in the military that resulted in loss of pay or privileges, detention, and/or reduction in grade (this does not include traffic offenses unless you were placed into custody)?

YES NO If "YES", provide the required information in the spaces below:

Date:	Charge:	Location: (City/State)	Disposition

**DRIVING HISTORY:** Do you currently have a valid driver's license? YES NO

State:	License Class:	Expiration:	DL Number	Restriction

Have you ever had any other driver's licences? YES NO If you check "YES", in the spaces below list all states where you have been licensed and/or all names you have been licensed under:

DL Number	Name	State

If you have served or are serving in the United States Military, list the dates of service, branch, and supervisor contact information:

Branch:	Dates of Service	Supervisor's Name/Contact #

**REFERENCES:** List three (3) references that we may contact do not include previous employers/supervisors.

Name	Phone Number	Mailing Address	Relationship – How long known

Last Name: \_\_\_\_\_

## **WILLINGNESS QUESTIONNAIRE:**

Applicant's Name: \_\_\_\_\_

Please complete the following questions concerning the Police Officer position for which you are applying for and write your answers in the form of "YES" or "NO".

1. Are you willing to stand in the middle of a busy intersection direction traffic wearing a helmet in 110 degree weather? \_\_\_\_\_
2. Are you willing to physically examine a dead body for signs of injury? \_\_\_\_\_
3. Are you willing to work on legal holidays (i.e. Christmas Day, Thanksgiving, July 4<sup>th</sup>)? \_\_\_\_\_
4. Are you willing to work rotating shifts with days off? \_\_\_\_\_
5. Are you willing to report for duty upon short notice or on days off-sacrificing personal plans? \_\_\_\_\_
6. Are you willing to investigate accidents in the rain or snow? \_\_\_\_\_
7. Are you willing to arrest a friend if necessary? \_\_\_\_\_
8. Are you willing to spend hours writing reports while on overtime? \_\_\_\_\_
9. Are you willing to work 16 hours in a row if necessary? \_\_\_\_\_
10. Are you willing to handle situations that involve the possibility of injury to yourself? \_\_\_\_\_
11. Are you willing to accept a court decision that runs contrary to your own wishes? \_\_\_\_\_
12. Are you willing to subject yourself to intense public scrutiny and criticism? \_\_\_\_\_
13. Are you willing to accept being told exactly what to do? \_\_\_\_\_
14. Are you willing to maintain your composure while being insulted or sworn at? \_\_\_\_\_
15. Are you willing to observe an autopsy, if required? \_\_\_\_\_
16. Are you willing to notify a citizen that a member of their immediate family has just been killed? \_\_\_\_\_
17. Are you willing to investigate situations involving abused or molested children? \_\_\_\_\_
18. Are you willing to undergo six (6) months of intensive training before being able to work on your own? \_\_\_\_\_
19. Are you willing to take another human's life if necessary and appropriate? \_\_\_\_\_
20. Are you willing to deal with suicide victims and their families? \_\_\_\_\_
21. Are you willing to search a dark building for a dangerous suspect if necessary? \_\_\_\_\_
22. Are you willing to enforce laws that you do not agree with? \_\_\_\_\_

IF YOU ANSWERED "NO" ON ANY OF THE QUESTIONS ON THIS WILLINGNESS QUESTIONNAIRE, PLEASE REFRAIN FROM SUBMITTING YOUR APPLICATION.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

Last Name: \_\_\_\_\_

MVD-11260  
REV. 03/01

State of New Mexico - Taxation & Revenue Department  
MOTOR VEHICLE DIVISION



**CONFIDENTIAL RECORDS RELEASE**

(Pursuant to Section 66-2-7.1, NMSA 1978)

TYPE OR PRINT PLAINLY (INQUIRIES THAT CANNOT BE READ WILL NOT BE PROCESSED)

Provisions of the New Mexico Motor Vehicle Code make personal information about an individual confidential, and restrict disclosure. This form authorizes the release of Driver or Vehicle information containing personal information to:

- an individual, or an individual's authorized representative; or
- a requestor, if the requestor has obtained the written consent of the individual to whom the information pertains.

**Note:** For purposes of this Release, the term "personal information" means:

- with respect to **vehicle records**, the driver license number, date of birth, address, city and state.
- with respect to **driver records**, the name, address, city, state, social security number, driver license number, date of birth, height, weight, medical restrictions, image and signature.

REQUESTOR / AUTHORIZED REPRESENTATIVE NAME & ADDRESS

REQUESTOR'S NAME - Company or Individual - (Last, First, MI):

Lovington Police Department - City of Lovington, NM

Requestor's SS # or Employer ID #

856000604

Mailing Address (Number & Street):

213 S. Love Street

City, State, Zip Code:

Lovington, NM 88260

PERSON TO WHOM INFORMATION PERTAINS

NAME (Last, First, MI)

Mo./ Day / Yr. of Birth

Mailing Address (Street & Number)

Social Security #

City, State, Zip Code

Telephone #  
( )

Driver License / ID Card Number (If Applicable)

Vehicle License Plate / Identification Number(s) (If Applicable)

TYPE OF INFORMATION REQUESTED

**DRIVER RELATED**

- ☒ Motor Vehicle Record  
☐ Copies of Citations or Withdrawal Notices  
☐ Copy of License / ID Card Application

☐ Other: \_\_\_\_\_

**VEHICLE RELATED**

- ☐ Printout of Vehicle Registration / Owner Information  
☐ Copy of Vehicle or Title or MSO  
☐ Copy of Bill of Sale

☐ Other: \_\_\_\_\_

Provide additional information to accurately and specifically identify the information requested above: \_\_\_\_\_

Pursuant to the National Driver's Privacy Act, Public Law 103-322, I hereby swear and affirm that this requested release of information is permissible and will be used according to law.

The undersigned takes full responsibility for any violations of this Act.

I authorize the release of my personal information to: ☐ Me ☐ Authorized Representative ☒ Requestor

Signature of Person

to Whom Information Pertains \_\_\_\_\_ Date \_\_\_\_\_

If personal information is to be released to anyone other than the individual, this Release must be notarized.



NOTARY: Subscribed and sworn to before me at \_\_\_\_\_

this \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_.

Signed \_\_\_\_\_

My commission expires: \_\_\_\_\_

**THIS RELEASE IS  
VALID FOR 30 DAYS  
FROM DATE OF AUTHORIZATION**

SEAL



## New Mexico Law Enforcement Academy

# 2015

### FITNESS STANDARDS FOR BASIC POLICE OFFICER TRAINING ACADEMY ENTRANCE

Prior to entering a Basic Police Officer Training (BPOT) program the student must demonstrate a minimum fitness level as measured by the following battery of four tests. These tests were adopted by the NMLEA Board on September 3, 2014. A standard protocol is explained for each test. Each student will be tested TWO WEEKS prior to the first day of the training program. Those students who do not meet the minimum standard in all tested categories will be dismissed and rescheduled for a subsequent academy.

Last Name: \_\_\_\_\_

## ENTRANCE FITNESS STANDARD

*Complete medical exam packets (LEA-3) must have been received and final clearance approved prior to Physical Fitness testing being administered by Academy staff.*

Tests are not required to be administered in the order listed.

All entrance times were set by the NMLEA Board on September 3, 2014.

**Aerobic Power**  
**1.5 Mile Run.**  
**15:54 (minutes:seconds)**

**Anaerobic Power**  
**300 Meter Run**  
**71.0 seconds**

Equipment: A stopwatch or clock with a sweep second hand; an indoor or outdoor track or another suitable running area measured to 1.5 miles and 300 meters; testing forms to record data.

1. The student should refrain from smoking, chewing tobacco, caffeinated drinks, energy aides, or eating for two hours preceding the test.
2. Allow adequate time prior to the test for stretching and proper warm-up exercises.
3. During the administration of the test, the students will be informed of their lap times. If several students run at once, their individual times at the finish will be called out and recorded later.
4. An important consideration at the end of the runs is the "cool down" period. The students should be cautioned about *not* sitting or standing stationary after the run to prevent venous pooling. They should be instructed to walk at least an additional five minutes to

enhance venous return to aid and assist in recovery.

5. The student should remember to properly stretch before and after each exercise to prevent any injuries.

### **Muscular Endurance**

1 minute maximum number of **sit-ups**  
**27 repetitions**

1. The student starts by lying on their back, knees bent, heels flat on the floor, fingers interlaced and placed behind the head.
2. Partner holds the feet down firmly.
3. In the up position, the student should touch the elbows to knees and then return until the shoulder blades touch the floor. Any resting should be done in the up position. No rocking hips. If fingers become unlaced, adjustment must be made in the up position.

### **Upper Body Strength**

1 minute maximum number of **push-ups**  
**15 repetitions**

1. The hands are placed about shoulder width apart. The administrator or partner places a fist on the floor below the student's chest at the midpoint of the sternum (unless a male is testing a female).
2. Starting from the up position (elbows fully extended), the student must keep the back straight at all times (no swayback or elevated hips) and lower their body to the floor until the chest touches the administrator's fist. Student then returns to the up position. Any resting should be done in the up position.
3. Modified push-ups are no longer optional for female applicants. All applicants are required to perform standard push-ups as described in 1. and 2. above.

## EXIT FITNESS STANDARD

All exit times were set by the NMLEA Board on September 3, 2014.

Students **MUST** meet or exceed these standards prior to receiving certification.

### Aerobic Power 1.5 Mile Run

**14:15 (minutes:seconds)**

### Anaerobic Power 300 Meter Run

**64.0 seconds**

### Muscular Endurance 1 minute maximum number of sit-ups

**37 repetitions**

### Upper Body Strength 1 minute maximum number of push-ups

**25 repetitions**

## EXIT AGILITY STANDARD

**Course #1:** Officer starts seated in his vehicle, hands on the steering wheel with seatbelt in use and wearing a 10lb. weight belt or vest around waist to simulate a gun belt. As the timed exercise begins, the officer will:

1. Release seatbelt and open vehicle door.
2. Run 30 feet and open building door.
3. Cross 4ft. threshold, run up two flights of stairs and pause for 60 sec. (Rise and Run of 7"x11" is standard, 8"x10" or 6"x12" are acceptable. Standard floor landings are 10' high.) If only one floor is available it is acceptable to run up, run down, run up and pause 60 seconds. After 60 seconds, runs down the stairs and out the door. There is no restriction on how the officer negotiates

Last Name: \_\_\_\_\_

the stairs, however both feet must contact the top and bottom stair.

4. Run 100' from door to a 5' high platform, run up steps, ladder, or ramp to the top of the platform and jumps down.
5. Run 37.5', turn and reverse touching the ramp, run 25 feet to a 6' high wall and scale it. The wall is constructed of unpainted cinder block with a smooth top. If the applicant chooses, he or she may drag a rigid aid or object 10' from the side of the wall and use it to scale the wall. The rigid object will have handles, a flat top, weigh 50lbs. and be 25" tall.
6. After scaling the wall, run 50' to a handcuff/arrest simulator, put arms down, touch ends and hold for 60 seconds. Arrest simulator is 5' high with 60lbs. resistance in the right arm and 40lbs. in left arm. END exercise.

**Passing Score (3 minutes 5 seconds)**

**Course #2:** Officer starts from a standing position wearing a 10lb weight belt or vest around waist to simulate a gun belt. As the timed exercise begins, the officer will:

1. Run 30' straight ahead and jump across a 4' wide barrier. The barrier is low to the ground, e.g. a ditch, highway divider, etc.
2. Run 12.5' and climb, jump, or hurdle over a 3' high barrier. The barrier is to resemble a fence or low wall, no more than 4" wide and at least 8' long, made of metal or wood.
3. Run 12.5' to the back of a vehicle equivalent to a full-sized police vehicle and push it 30' on a flat surface in the direction of a clear area where a victim extraction will take place. The car is occupied by a dummy (victim) wearing a seatbelt and weighing 190lbs. +/- 10lbs. The dummy must meet standards established by the New Mexico Law Enforcement Academy.
4. Approach the victim's door; open the door; undo the seatbelt; pull the victim out of the vehicle and drag them 20' perpendicular to the direction of the vehicle.
5. Both officer and dummy (victim) must completely cross the finish line to END the exercise.

**Passing Score (42 seconds)**



*For additional information, Please contact:*

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