SOUTH HILLS AREA COUNCIL OF GOVERNMENTS

SHACOG JOINT POLICE TEST
MAY 3, 2025

BOROUGH OF DORMONT

☆

PETERS TOWNSHIP

☆

BOROUGH OF PLEASANT HILLS

☆

BOROUGH OF WEST MIFFLIN

INSTRUCTIONS

1. This is a single application for the testing process which is being administered on behalf of the following municipalities:

   - Borough of Dormont
   - Peters Township
   - Borough of Pleasant Hills
   - Borough of West Mifflin

   The applicant must verify for himself or herself that he or she is interested in employment as an entry level police officer in at least one of these municipalities. The single, non-refundable application fee covers the application and testing process for all of these municipalities.

2. Minimum qualifications for the position of entry level police officer are set forth in the information accompanying these instructions. The applicant should review this information before identifying to which municipalities he or she wishes to apply. It should be understood that these are the minimum qualifications and are not all-inclusive. Failure to meet these minimum requirements in the municipalities selected, however, will automatically preclude employment in those municipalities. Particular attention should be paid to the Act 120 Certification requirements. The applicant is responsible for securing the required training and certification by the stipulated time at his or her own expense. The participating municipalities will not send an applicant to an academy.

3. Upon completion of the testing process, the test results are sent only to the municipalities in which the applicant is interested. The applicant, therefore, must identify, by checking the appropriate boxes at the top of the application form, in which municipalities he or she is seeking employment as an entry level police officer. **The test results will be sent only to those municipalities identified by the applicant.**

4. **Completed applications are to be returned only to SHACOG, 2600 Old Greentree Road, Carnegie, PA 15106 no later than 5:00 PM on Wednesday, April 9, 2025. Applications may be mailed or delivered in person. Applications will not be accepted by either email or facsimile. Applications will not be accepted at or by any of the identified municipalities participating in this joint testing process.** Only the following four items are to be submitted to SHACOG:

   1) the completed, signed Application,
   2) the signed Applicant's Release,
   3) the signed Physician's Certification, and
   4) the non-refundable application fee in the amount of $50.00, payable in cash, check, or money order.

   Checks should be made payable to SHACOG.
   The Physician's Certification must be on the SHACOG form provided with the Application Material. The Physician's Certification must be dated no more than sixty (60) calendar days prior to the date of the Physical Agility Test.

Incomplete applications will be returned. No additional attachments or resumes are to be included with the submission.

5. Providing false or inaccurate information will subject the applicant to immediate disqualification.

6. The **Physical Agility Test** is scheduled to be conducted between 9:00 AM and 12:00 noon and the **Written Examination** will be administered between 1:00 PM and 3:00 PM on **Saturday, May 3, 2025,** at Keystone Oaks High School, 1000 Kelton Avenue, Pittsburgh, PA 15216. These times may be adjusted based on circumstances, with the written examination time possibly being moved up or back. Registration is from 8:00 AM to 8:45 AM on the day of the test. Identification containing the applicant's photograph will be required at the test site to be admitted to the test. **The applicant must pass all elements of the Physical Agility Test to be eligible to take the Written Examination.** Failure of any one of the events in the Physical Agility Test is a failure of the entire test. If one event is failed, the testing process is terminated for the applicant at that point.

7. Passing the Physical Agility Test and the Written Examination does not guarantee employment. Upon receipt of the test results, each of the municipalities identified by the applicant will further process the applicant pursuant to its needs and procedures. All further processing will be according to each municipality's own civil service rules and regulations and/or hiring practices and policies.

EXHIBIT A
MINIMUM ELIGIBILITY REQUIREMENTS

MUNICIPALITY	AGE	EDUCATION	(1) ACT 120 CERTIFICATION	US CITIZENSHIP	LICENSED MOTOR VEHICLE OPERATOR	EQUIVALENT CREDENTIALS	MINIMUM WRITTEN TEST SCORE	OTHER
DORMONT BOROUGH	21	60 College Credits	Must be Certified at the Time of Appointment	Required	Required	Approved MPOETC waiver of training and successful completion of certification exam accepted	70%	• Must reside within 35 mile radius of Dormont. • Visible Tattoos on neck, hands, and face must be covered while on duty.
PETERS TOWNSHIP	21	• Bachelor's Degree, or • Assoc. Degree w/3 yr continuous full-time police experience, or • Assoc. Degree w/honorable discharge from the military	Must be Certified by the Time of Appointment	Required	Required	Approved MPOETC waiver of training and successful completion of certification exam accepted	75%	• No visible tattoos, branding, body piercing, or surgical body modifications above the collarbone. • Officers must live in and maintain their primary residence within 15 miles of the PTPD police station within two (2) years of their date of hire.
PLEASANT HILLS BOROUGH	21	High School Diploma or GED	All applicants shall be eligible to be certified by Act 120 by date of hire or enrolled in a PA Academy at the time of hire	Required	Required	N/A	70%	• Be physically and mentally fit to perform the duties of a police officer as determined by physical and psychological testing. • No visible tattoos, branding, and body piercing above the neckline or below the wrist lin of the arms.
WEST MIFFLIN BOROUGH	21	High School Diploma or GED/High School Equivalency	Must be Certified by the Time of Appointment	Required	Required	N/A	70%	N/A

(1) The applicant is responsible for securing the required training and certification by the stipulated time at his or her own expense. The participating municipalities will not send an applicant to an academy.

The information listed above is a summary of the minimum eligibility requirements for the municipalities participating in this application and testing process. It is not intended to be all-inclusive of additional individual requirements that may be mandated by any of the listed municipalities. If more detailed information is needed, the municipalities should be contacted directly.

APPLICATION

2025 SHACOG JOINT POLICE TEST

The municipalities listed below are participating in this testing process. Please check the corresponding boxes of the municipality(ies) to which you are applying. **Test results will be submitted to those municipalities only.**

☐ Borough of Dormont ☐ Borough of Pleasant Hills

☐ Peters Township ☐ Borough of West Mifflin

PLEASE TYPE OR PRINT CLEARLY ALL INFORMATION

1. Mr./Ms.	2. Last Name	3. First Name	4. Middle Name
5. Street Address; Apartment No.			
6. City	7. State	8. Zipcode	
9. Cell Phone Number	10. Home Phone Number	11. Work Phone Number	
12. Email Address			
13. Do you meet the age requirements(s) for the municipality(ies) to which you are applying as set forth in Exhibit A?	☐ YES	☐ NO	
14. Are you a citizen of the United States?	☐ YES	☐ NO	
15. Do you possess a High School Education or GED Equivalency?	☐ YES	☐ NO	
16. Do you possess a valid Motor Vehicle Operator's License?	☐ YES	☐ NO	
17. What is the name of the State or Territory that issued your current Operator's License?			

I hereby certify that the information provided above is true and correct to the best of my knowledge and belief. The undersigned understands that the statements herein made are subject to the penalties of 18 Pa. Cons. Stat. An. §4904 relating to unsworn falsification to authorities.

Signature: _____

Date: _____

FOR SHACOG USE ONLY:

Date Received: _____ Time Received: _____ Payment Received: _____

APPLICANT'S RELEASE

PHYSICAL AGILITY TEST

As an applicant for the Examination for Entry Level Police Officer, I understand that I will be required to undergo a Physical Agility Test consisting of the following:

SIT-UPS

With legs bent at a 90-degree angle, heels on the mat or ground, fingers interlocked behind the head, lift the body, touch elbows to knees, and return to the starting position, shoulders touching the mat or ground, 30 times. Feet may be together or apart and may be held but not knelt upon by another. Fingers must stay interlocked behind the head throughout the event. The back cannot be arched and the buttocks cannot be lifted from the mat. There is no time limit.

300 METER RUN

Cover the required distance of 300 meters within 66.0 seconds.

PUSH-UPS

From a front supported position, hands and feet (toes), lower body as a unit with shoulders, hips and legs in the same plane, lowering the body by bending the elbows until the upper arms are parallel to the ground, and return to a front supported position by straightening the arms, 25 times. Rest is permitted in the up position. There is no time limit.

1.5 MILE RUN

Cover a measured distance of 1.5 miles on an assigned course within a 15:54 minute time frame.

I have read and understand the requirements of the Physical Agility Test set forth above and knowing this, I believe myself to be in good health and physically fit to participate in this test. I represent that to the best of my knowledge and belief I have no physical condition that would likely cause physical injury, disability, or illness as a result of attempting to perform the elements of the test as described above. In consideration of processing my application, and intending to be legally bound, I hereby release, indemnify and hold harmless the South Hills Area Council of Governments (SHACOG), its Board of Directors and Executive Director, Borough of Dormont, Peters Township, Borough of Pleasant Hills, Borough of West Mifflin and their agents, their elected officials, their appointed officials, their respective Civil Service Commissions and their members, where applicable, and the owners, custodians, directors and employees of the property on which the test is given from all claims, demands and suits which may arise or result from any injury or illness which is caused by or results from taking or attempting to take the test as set forth above.

_____

(Signature)

_____

(Applicant's Name, Typed or Printed)

(RETURN WITH APPLICATION)

PHYSICIAN'S CERTIFICATION

I, _____ , M.D., have examined
(Physician's Name, Typed or Printed)

_____ and understand that this applicant will have to
(Applicant's Name, Typed or Printed)

complete a Physical Agility Test consisting of the following elements:

Event	Required Time
30 Sit-Ups	N/A
300 Meter Run	66.0 Seconds
25 Push-Ups	N/A
1.5 Mile Run	15:54 Minutes

which are described in greater detail on the "Applicant's Release - Physical Agility Test". Having

examined the said _____ , I hereby certify that he/she
(Applicant's Name, Typed or Printed)

is physically able to undertake the described Physical Agility Test.

_____
(Physician's Signature)

_____
(Address)

_____

_____

_____
(Date)

_____
(Physician's DEA Number)

(RETURN WITH APPLICATION)