

## Kernersville Police Department Sworn Officer Applicant

Dear Applicant,

I am pleased that you have expressed an interest in a career as a Police Officer with the Town of Kernersville. We have a rich history of service to the community and our success is directly related to the quality of the officers we hire. This letter is designed to help you navigate the hiring process. Our process is extensive and designed to provide the citizens of Kernersville with the most professional and dedicated officers available. The Kernersville Police Department is committed to recruiting, developing and retaining highly competent and dedicated employees.

The Kernersville Police Department is actively seeking new members to join our department and serve the citizens of Kernersville in both full time and reserve officer capacities. We want to extend a special invitation to women, minorities and bilingual applicants to consider a career with the Kernersville Police Department. As a full-time paid member of our department, you will receive competitive salary and benefits, cutting edge equipment and a take home vehicle. As a volunteer Reserve Officer you will receive the same exceptional training and equipment as our full time officers while maintaining the ability to work full-time in another occupation.

I wish you the best of luck as you pursue your interest in becoming a Police Officer with the Town of Kernersville. If you have any questions about the Town or the Kernersville Police Department please contact me or Captain Steve Bowman, our Patrol Division Commander.

Sincerely,

*Scott Cunningham*

Scott Cunningham  
Chief of Police

I look forward to assisting you in the hiring process once we receive your application. The process is lengthy and can take up to four months to complete. In order to expedite this process, please make sure you have the following information available and ready to be turned in to your background investigator: Driver's License, Social Security Card, Certified Copy of Birth Certificate, Original or Certified copy of High School and College Diploma and/or Transcripts, Credit Report ( Equifax, Transunion or Experian), Criminal Records Check from each county you have lived in since 16 years of age and Signed Authorization for Release of Personal Information (enclosed).

Once you **fully** complete and submit your application you will begin the hiring process detailed below:

**Applicant Phase**

- Review Application
- Panel Interview

**Candidate Phase**

- Background Investigation & Written Exercise
- Computerized Voice Stress Analysis
- Patrol Division Commander Review
- Chief of Police Review
- Conditional Offer of Employment
  - Drug Screen
  - Psychological
  - Medical Exam
  - POPAT
  - Firearms Qualifications

Candidates who are not selected for a position will be notified in writing. Applicants may reapply in six months provided any deficiencies have been corrected. Full-time Sworn Officer and Reserve Officer applications are accepted at all times. Full-time Sworn Officer applications will only be processed when a position is posted. Any questions that you have can be directed to me at (336) 992-5477 or tsummers@toknc.com.

Sincerely,

*Tim Summers*

Captain Tim Summers  
Patrol Division Commander



# Town of Kernersville Employment Application

An Equal Opportunity/Drug Free Employer

134 East Mountain Street-P.O. Box 728-Kernersville, North Carolina 27285-0728  
(336) 992-0306 [www.TOKNC.com](http://www.TOKNC.com)

**IMPORTANT!** Please print or type. Fill out all sections of this application completely and to the best of your ability. Your application will be used as part of the examination process and, therefore, should represent your best effort. Unsigned and incomplete applications may not be considered. Once submitted, application materials become the property of the Town. An application must be received by the Human Resources Office by 5:00 p.m. on the closing date posted to ensure consideration. The Town only accepts originally signed applications for employment. The Town does not accept applications by fax or e-mail. Applications must be completed in ink or typed.

## CURRENT INFORMATION

1. Position applied for \_\_\_\_\_ Date: \_\_\_\_\_
2. When will you be available for employment: \_\_\_\_\_
3. Name: \_\_\_\_\_  
Last First Middle
4. Address: \_\_\_\_\_  
Street & NO. or PO Box City State Zip
5. Telephone: (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ If neither, where can you  
Home Business be reached? (\_\_\_\_) \_\_\_\_\_
6. Email Address: \_\_\_\_\_
7. Are you 18 or older? YES ☐ NO ☐ If NO, what is your birthday? \_\_\_\_\_  
If NO, do you have a work permit? Yes ☐ NO ☐

## GENERAL INFORMATION (Attach additional sheet if needed)

If you need to explain any answer, use the space under item 27, EXPLANATIONS.

8. Have you ever been employed with the Town of Kernersville? If YES, what dept. & when? YES ☐ NO ☐  
\_\_\_\_\_
9. Have you applied to the Town of Kernersville before? IF YES, indicate what position and when? YES ☐ NO ☐  
\_\_\_\_\_
10. Will you accept employment requiring occasional/regular night work or weekend work or rotation shifts? YES ☐ NO ☐  
\_\_\_\_\_
11. Are you now or were you previously related by blood or marriage to any Town Employee? YES ☐ NO ☐  
If YES, give name, relationship and department \_\_\_\_\_
12. Are you able to perform all the duties of the job for which you have applied if reasonable accommodations are made? (A job description is available for review in the Town's Human Resources Department) YES ☐ NO ☐
13. Have you ever been convicted of a crime? If YES, explain under EXPLANATIONS. YES ☐ NO ☐  
(Excluding traffic offenses where court costs and fine were less than \$100.00)

NOTE: A conviction record is not an absolute bar to employment. The Town will consider the nature and gravity of the offense, the time that has passed since conviction, and the nature of the job for which you have applied.

14. Are you an American citizen or do you currently have authorization to work in the United States? YES ☐ NO ☐

**EDUCATION**

Give your complete education history

Circle highest school year completed.

1 2 3 4 5 6 7 8 9 10 11 12

15. High School \_\_\_\_\_

Name

City

State

16. Have you received a high school diploma or equivalent: YES ☐ NO ☐

Education Beyond High School	Name and Location	Did you Graduate? (Please Circle)	Credit Hours	Degree, Diploma or Certificate Earned - or - Number of Years Completed	Major Subject ----- Minor Subject
17. Undergraduate College(s) Universities		YES NO			-----
		YES NO			-----
18. Graduate or Professional School		YES NO			-----
		YES NO			-----
19. Tech. Inst.		YES NO			-----
		YES NO			-----

**SKILLS, KNOWLEDGE & ABILITIES**

20. Please list any skills, knowledge, or abilities you have that you feel are applicable to the position(s) for which you are applying. Include skills with equipment or machines you operate including computer equipment and software packages. Include typing speed if applicable.

(a) \_\_\_\_\_

(d) \_\_\_\_\_

(b) \_\_\_\_\_

(e) \_\_\_\_\_

(c) \_\_\_\_\_

(f) \_\_\_\_\_

**REGISTRATION, LICENSES, CERTIFICATIONS**

21. List fields of work for which you have been registered, licensed or certified.

Registration: \_\_\_\_\_ State: \_\_\_\_\_ No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Registration: \_\_\_\_\_ State: \_\_\_\_\_ No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Other: \_\_\_\_\_

PLEASE COMPLETE IF THE OPERATION OF A MOTOR VEHICLE IS A REQUIREMENT FOR THE POSITION TO WHICH YOU ARE APPLYING

22. Please list your driver's license number and the state in which it was issued. If you do not have a driver's license, please put "NONE".

# \_\_\_\_\_ State \_\_\_\_\_

23. Is your driver's license a Commercial Driver's License? YES ☐ NO ☐ If Yes, indicate the class \_\_\_\_\_

## EMPLOYMENT

Record your complete work history in the spaces below. Begin with your current or most recent position. (Include military and related volunteer experience.) Attach as many sheets as are necessary to account for your complete record. Be sure to account for gaps in your employment history. Please be thorough, including completing the "Duties" lines. "See attached resume" is not acceptable in the DUTIES space

### A. CURRENT OR MOST RECENT EMPLOYMENT (or explain gap in employment)

Job Title: \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_ Full-time ☐ Part-time ☐

Name and title of Supervisor \_\_\_\_\_ No. Employees supervised by you \_\_\_\_\_

Employer or company \_\_\_\_\_ Telephone (\_\_\_\_\_) \_\_\_\_\_

Date Employed \_\_\_\_\_ Address \_\_\_\_\_  
Street City State

Date Separated \_\_\_\_\_ Duties in order of Importance \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

### B. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment)

Job Title: \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_ Full-time ☐ Part-time ☐

Name and title of Supervisor \_\_\_\_\_ No. Employees supervised by you \_\_\_\_\_

Employer or company \_\_\_\_\_ Telephone (\_\_\_\_\_) \_\_\_\_\_

Date Employed \_\_\_\_\_ Address \_\_\_\_\_  
Street City State

Date Separated \_\_\_\_\_ Duties in order of Importance \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

### C. NEXT EMPLOYMENT (or explain gap in employment)

Job Title: \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_ Full-time ☐ Part-time ☐

Name and title of Supervisor \_\_\_\_\_ No. Employees supervised by you \_\_\_\_\_

Employer or company \_\_\_\_\_ Telephone (\_\_\_\_\_) \_\_\_\_\_

Date Employed \_\_\_\_\_ Address \_\_\_\_\_  
Street City State

Date Separated \_\_\_\_\_ Duties in order of Importance \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

**PERSONAL REFERENCES:**

Please list references that have personal knowledge of your work performance. Do not include family members or past supervisors.

NAME	PHONE NUMBER	ADDRESS	RELATIONSHIP	YEARS KNOWN
1.				
2.				
3.				

**OTHER INFORMATION**

24. Have you had disciplinary action taken against you in the past 12 months of employment? YES ☐ NO ☐  
If YES, explain under item 27, EXPLANATIONS. (A YES, will not automatically disqualify you.)
25. Have you ever been dismissed or forced to resign from any job? YES ☐ NO ☐  
If YES, explain under item 27, EXPLANATIONS. (A YES, will not automatically disqualify you.)
26. May we contact your present employer for reference? YES ☐ NO ☐

27. EXPLANATIONS: Indicate item # to which answers apply.

ITEM#	

I authorize the Town of Kernersville to conduct a personal background investigation in connection with my application. This investigation may include information from educational institutions, police and/or court records, Department of Motor Vehicle records, listed personal references and/or other references, previous employers and other appropriate sources.

I authorize the release of any information the Town of Kernersville may request from the above sources. I further waive all rights to inspection or review of any information compiled.

I fully understand all information gained from such investigation is confidential.

I agree to provide any further information which may be requested and hereby certify that there are no willful or negligent misrepresentations, omissions, or falsifications in any of the applications or documents furnished or answers to questions. I am aware should any investigation disclose any willful misrepresentations, omissions, or falsifications that my application may be rejected. Additionally, I am aware that willful misrepresentations, omissions, or falsifications in any of the applications or documents furnished or answers to questions are grounds for termination should I be employed by the Town of Kernersville.

I hereby release the Town of Kernersville, its agents and representatives and any person(s) so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such document, records, and other information for the investigation made by the Town of Kernersville.

Furthermore, I understand that Employment with the Town of Kernersville is contingent upon the successful completion of a drug-screening test to be administered after an offer of employment is made. (Successful completion of the test means that the person tested negative for illegal drugs and substance abuse.)

SIGNATURE\_\_\_\_\_

DATE\_\_\_\_\_

**SUPPLEMENT TO EMPLOYEE APPLICATION  
TOWN OF KERNERSVILLE  
APPLICANT INFORMATION**

The Town of Kernersville is an Equal Opportunity Employer. We need the following information in order to comply with the reporting requirements for the Equal Employment Opportunity Commission. This form will be separated from our employment application. Other than the information you provide in Section I, the information on this form will not be used in any way in our selection process or for any personnel action following employment. It will be maintained in personnel files, which must be kept confidential under State Law. Public disclosure of this information without your consent would be violation of state general statutes.

**I**

**POSITION APPLIED FOR:** \_\_\_\_\_ **DATE OF APPLICATION:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

\_\_\_\_\_ **LAST** \_\_\_\_\_ **FIRST** \_\_\_\_\_ **MIDDLE** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_ **STREET & NO., RFD OR PO BOX** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**II**

**SEX** (Please select) **MALE** **FEMALE** **DATE of BIRTH** \_\_\_\_\_

**III**

**ETHNIC CATEGORY:** ( Please select)

*White -- Origins in any of the original peoples of Europe, North Africa, the Middle East. (Not Hispanic).*

*Black -- Origins in any of the Black racial groups of Africa. (Not Hispanic).*

*Asian/Pacific Islander -- Origins in the Far East, Southeast Asia, the Indian Subcontinent or the Pacific Islands.*

*Hispanic -- Mexican, Puerto Rican, Cuban, Central or South American or other Spanish Culture or origin regardless of race.*

*American Indian/Alaskan/Native -- Origins in any of the original peoples of North America.*

**IV**

**HOW DID YOU LEARN OF THIS OPENING:** (Indicate below by placing a check beside the source)

\_\_\_\_\_ *Newspaper (Specify):* \_\_\_\_\_

\_\_\_\_\_ *Employment Security Commission*

\_\_\_\_\_ *Came to Municipal Building*

\_\_\_\_\_ *From a current employee of the Town.*

\_\_\_\_\_ *Internet*

\_\_\_\_\_ *Other (Specify):* \_\_\_\_\_

**V**

**SELECTIVE SERVICE REGISTRATION:** If male and age 18 to 26, have you registered for Selective Service?

Please Circle **YES** **NO**

If not, you will have 30 days to comply if selected for a position as required by Federal Law

*Providing this information as an applicant is voluntary and is only used as a personal identifier for internal record keeping. Should you be employed, your SSN will be required for wage reporting, internal records and as a personal identifier for the Town's use.*

# APPLICANT INFORMATION

**EQUAL EMPLOYMENT OPPORTUNITY:** It is the policy of the Town of Kernersville to foster, maintain, and promote equal employment opportunity. The Town shall select employees on the basis of applicants' qualifications and without regarding the age, sex, race, color, creed, religion, nondisqualifying handicap, political affiliation, or national origin, except where specific age, sex, or physical requirements constitute a bona fide occupational qualification necessary for job performance.

**LEARNING ABOUT VACANCIES:** The Human Resources Office administers the recruitment and application process for full-time, part-time, seasonal and temporary vacancies. Vacant positions are posted on the website and with the Employment Security Commission. We do not accept applications unless there is a posted vacancy.

**OBTAINING AN APPLICATION:** The Town of Kernersville application form is available 8:30 a.m. - 5:00 p.m., Monday - Friday in the Human Resources Department. The Human Resources Office will also mail applications upon request. However, we cannot guarantee that applications which are mailed out will be received in time for applicants to meet the closing dates. Applications which are mailed to the Town must be postmarked on or before the closing date.

**COMPLETING AN APPLICATION:** You must complete, sign and return the Town's application form even though you may have already provided us with a letter or resume. Your application is our primary source of information in considering you for employment. Please follow all instructions and answer questions completely. Applications should be typed or completed in ink. Identify the vacancies in which you are interested by title. If you want to apply for vacancies in different occupational areas you must submit separate applications. A complete job description is available for viewing in the Human Resources office.

Minor omissions or deficiencies will not result in the automatic rejection of your application. However, providing false or misleading information or documentation or concealing requested information to gain employment may result in your application being disqualified or your dismissal, if employed. The disclosure of Equal Opportunity Information is voluntary. Its sole use is to monitor our recruitment efforts. This information no way affects you as an applicant.

**SUBMITTING YOUR APPLICATION:** We accept applications only for positions for which we are actively recruiting. To ensure consideration, a Town of Kernersville application must be received by the Human Resources Department by 5:00 p.m. on our closing date or by mail if postmarked on or before the closing date. We do not accept applications by FAX. Applications received after the closing date are considered ONLY when the application pool is judged by us to be deficient in quality or quantity. When no closing date appears, the position may be filled without notice. Once submitted, the application becomes the property of the Town.

## **SCREENING, REFERRAL AND SELECTION:**

Your application will be considered only for those vacancies you specify by title. Your education, experience, skills, work record and availability will be evaluated in relation to job requirements. Due to a high volume of applications received, the hiring department will not contact all applicants. Your application will be referred to the appropriate department who has the option to contact you. Based on job related requirements, a select number of applicants will be interviewed. Applicants will be notified when a vacancy has been filled. If you have questions, please call us at (336) 992-0306.

You will be asked to submit to a background investigation and drug testing as a condition of employment. Some positions require a credit history. Certain positions require physicals and other screening methods, which are paid for by the Town. In some instances these physicals will only be scheduled after a job offer has been extended. Employment is contingent upon a recommendation from our physician indicating that the candidate can perform the essential functions of the job. Police Officer positions require an extensive background investigation, psychological examination, medical and drug screening, physical agility testing, oral review board, writing and other tests.. The law enforcement background investigation and employment process is lengthy and can take up to four months to complete. The assigned background investigator will keep the candidate informed, throughout the process, as to the progress of the application.

**REAPPLYING:** If you wish to apply for another vacancy at a later date, you may use the application already on file providing that no changes are required to be made on the application on file and provided that the application is less than 90 days old. You must make a request to the Human Resources Department to have your application placed in the file for the new position. To assure consideration, the request must be made to the Human Resources Department by 5:00 p.m. on the closing date.

**IDENTITY AND EMPLOYMENT:** If employed, you must submit proof of identity and eligibility for legal employment by your third day of work. The Human Resources Department can be contacted for a more complete list of acceptable documents.

**JOB CLASSIFICATION AND PAY:** Positions with similar duties and responsibilities are assigned the same job classification, salary grade and range. Starting salaries are based on the selected applicant's relevant training and experience, labor-market consideration, internal salary equity and the availability of funds.

**OVERTIME COMPENSATION AGREEMENT:** For employees subject to the overtime provisions of the Fair Labor Standards Act (FLSA), we generally allow the employee to choose between time off or pay for overtime worked. However, either is subject to supervisory approval or departmental policy and may be affected by budgetary constraints.

**PROBATIONARY PERIOD:** Most new employees are subject to a probationary period of six (6) months, Police Officers and Firefighters serve a twelve (12) month probationary period. If performance and conduct meet acceptable standards, a regular appointment status is given. If not, employment may be terminated any time during the period.

**PERSONNEL POLICY:** This Applicant Information is adapted from the Town of Kernersville Personnel Policy. A copy of the policy is available in the Human Resources Office for review by applicants. If you are employed by the Town, you will receive a copy of the policy that explains the matters referred to herein in greater detail.

## **CURRENT BENEFITS**

### **EMPLOYEE BENEFITS:**

Vacation Leave – accrual rate based on schedule/length of service  
Sick Leave – accrual rate based on schedule  
Paid Holidays  
Contributory Retirement System (LG ERS) – Employee contributes 6% with additional employer contribution into the plan.  
401(k) Deferred Compensation Plan Eligibility  
457(b) Deferred Compensation Plan Eligibility  
Medical / Hospitalization Insurance – Dependent coverage available  
Dental Insurance– Dependent coverage available  
Short Term Disability, Voluntary Long Term Disability available  
Life Insurance Coverage – Voluntary Supplemental Life Insurance available  
Voluntary Vision coverage available  
Employee Assistance Program  
Credit Union Membership Eligibility  
Education Tuition Assistance  
Progressive Pay Plan  
Annual Bonus  
Employee Birthday Gift Certificate  
Annual Employee Outing





# Benefits

**G. Raeford Smith, Human Resources Director (336) 992-0319**

## **ALL TOWN POSITIONS**

### **EMPLOYEE BENEFITS**

- Vacation Leave - accrual rate based on schedule/length of service
- Sick Leave – accrual rate based on schedule
- Paid Holidays
- Contributory Retirement System (LGRS) – employee contributes 6% with additional employer contribution into the plan
- 401(k) Deferred Compensation Plan Eligibility
- 457(b) Deferred Compensation Plan Eligibility
- Medical/Hospitalization Insurance - Dependent coverage available
- Dental Insurance - Dependent coverage available
- Short Term Disability - Voluntary Long Term Disability available
- Life Insurance coverage - Voluntary Supplemental Life Insurance available
- Voluntary Vision Coverage available
- Employee Assistance Program
- Credit Union Membership Eligibility
- Education Tuition Assistance
- Progressive Pay Plan
- Annual Bonus
- Employee Birthday Gift Certificate
- Annual Employee Outing

Additional Police Officer and Firefighter benefits available upon request.

## **Additional Sworn Law Enforcement Benefits**

### **Supplemental Retirement Income Plan - 401(K)**

As a law enforcement officer, you are automatically a member of the Supplemental Retirement Income Plan (NC 401(k) Plan). The Town pays an amount equal to 5% of your salary into your account in the Plan, and you may elect to make additional contributions on a tax-deferred basis. You decide how the contributions in your account are invested and also how you want to receive the contributions when you separate from employment. Prudential Retirement administers the NC 401(k) Plan, and they can give you further details about the Plan.

### **Separate Insurance Benefits Plan – Disability/Hospital Benefits (Plan administered by Hartford Life Insurance Company)**

**Active Service Disability due to an Accident:** (May be aggregated up to a maximum of 52 weeks for one period.)

\$140 per week for a maximum of 13 weeks in the hospital

\$60 per week if you are not in the hospital

**Active Service, Retired or receiving a disability benefit and enter the hospital due to Sickness**

\$140 per week of hospitalization for a maximum of 13 weeks in any one period.

**Retired or Receiving a Disability Benefit and Enter the Hospital due to Accident**

\$140 per week for a maximum of 13 weeks if you are under age 65

\$105 per week for a maximum of 13 weeks if you are over age 65

### **Separate Insurance Benefits Plan – Death Benefits**

Active Service - \$5,000

Line of Duty Related – \$7,100

Retired - \$4,000

**(Claims may be obtained from the Police Administrative Offices)**

### **Police Separation Allowance**

As a law enforcement officer, if you retire on a service retirement allowance (i.e., 30 years of creditable service at any age, or age 55 with at least five years of credit as a law enforcement officer), you may be eligible for a monthly separation allowance payable until you reach age 62, or until you return to any employment with the local government if a LGERS retiree. Other conditions also apply.

The Town is responsible for making all determinations of eligibility and for making these benefit payments when they become payable. If you qualify for this benefit, the Town will pay you, in bi-weekly installments, .85% of your final base salary times the number of years service you have in the Retirement System. For example, if you retired with 30 years of creditable service in the Retirement System and at least the last five were as a sworn officer, the Town will pay you an amount equal to 25.5% of your final base salary. This separation allowance will be paid to you through the month in which you reach age 62, or until you return to any employment with a North Carolina Local Governmental Employees Retirement System employer, except that a local government employer may employ retired officers in a public safety position in a capacity not requiring participation in the Local Governmental Employees Retirement System, and doing so shall not cause payment to cease to those officers under the provisions of G.S. 143-166.42.

### **Public Safety Officers' Benefits Program (PSOB)**

A unique partnership effort of the U.S. Department of Justice; local, state, tribal, and federal public safety agencies; and national organizations, the Public Safety Officers' Benefits (PSOB) Programs provide death and education benefits to survivors of fallen law enforcement officers, firefighters, and other first responders and disability benefits to officers catastrophically injured in the line of duty.

Line of Duty Death Benefits – As of October 1, 2012 this amount is \$328,612.73. Disability Benefit for officers permanently and totally disabled by a catastrophic personal injury sustained in the line of duty Survivors Benefits may include college assistance.

## **North Carolina Retirement System**

Sworn Law Enforcement Officers are entitled to an additional death benefit of a minimum of \$25,000 to a maximum of \$50,000, through the state retirement system. For officers with arrest power, there is an additional supplement of \$4,000.00.

You may also be entitled to additional benefits such as: A line-of-duty death benefit of \$50,000 which is administered jointly by the North Carolina Industrial Commission and the State Treasurer.

## **Receipt of Badge and Service Gun upon Retirement**

Sworn Law Enforcement officers who retire from the Town of Kernersville and qualify for "full", "reduced", or "disability" benefits through the NC Local Governmental Employees' Retirement System will be eligible to receive their badge and service gun upon retirement in accordance with NCGS 20-187.2.

## **Other Benefits Including Associations**

The North Carolina Bar Association offers scholarships to **children** of law enforcement officers killed in the line of duty. The scholarship is based on need and merit. The recipient must be **under 27 years old** and must be accepted or enrolled at an accepted vocational school or institute of higher education.

The scholarships are disbursed twice a year to qualifying children. The amount of the scholarship depends on the amount allotted from the North Carolina Bar Foundation Endowment Fund. A child may apply for and receive the scholarship **more than once**.

**For more information or for an application, call or write: Scholarship Program, North Carolina Bar Association, 8000 Weston Parkway, Cary, North Carolina 27513, telephone (919) 677-0561 or at contact them via email [ncba@ncbar.org](mailto:ncba@ncbar.org). Applications and additional information may be obtained at the following web address: <http://younglawyers.ncbar.org/media/207370/childrenofslainorpermanentlydisabledlawenforcementofficers.pdf>**

## **Peer Support**

Established in 1984, **Concerns of Police Survivors, Inc., (C.O.P.S.)**, is a national, non-profit organization that works with law enforcement agencies, police organizations, mental health professional, and local peer-support organizations to provide assistance to surviving families of law enforcement officers killed in the line of duty. C.O.P.S. has become a "lifeline" to police survivors nationwide. **Contact the C.O.P.S. National Office or visit [www.nationalcops.org/chap.htm](http://www.nationalcops.org/chap.htm) for information on a chapter in your area.**

***Associations - The following associations are voluntary in nature at the discretion of the officer and placed herein for reference purposes only. The Town of Kernersville does not encourage/discourage participation in outside associations.***

## **North Carolina Fraternal Order of Police**

The North Carolina State Lodge of the **Fraternal Order of Police** provides a life insurance policy for their member which pays a basic benefit of \$3,000 for a death by natural causes. An additional benefit of \$3,000 in the event of an accidental death, and another \$3,000 in the event of line of duty death. i.e.: Natural - \$3,000; Accidental - \$6,000; Line of Duty - \$9,000.

If a member dies for any reason, the death benefit claims form must be filled out and submitted along with the death certificate (with a raised seal) and sent to the State Office for processing. A copy of the police report if, an accidental or line of duty death, must be attached. (The claim form can be found in the Lodge manual as well as on the NC State FOP Lodge Website at [www.ncfop.org](http://www.ncfop.org)).

**Contact: North Carolina State Fraternal Order of Police, 1500 Walnut Street, Cary, NC 27511-5927, (919) 461-4939, email [ncfop@nc.rr.com](mailto:ncfop@nc.rr.com). NC - 8 - Rev. 05/10**

### **North Carolina Law Enforcement Officers' Association**

Provision of a **\$2,500** benefit for officers killed in the line of duty. Annual membership dues must be current and only active association members are considered eligible for this benefit. Designated beneficiaries may file a claim by contacting the Association.

The **North Carolina State Law Enforcement Officers' Association** provides a **\$1,000** survivor benefit to the beneficiaries of active duty sworn law enforcement officers in good standing with dues paid.

**Contact:** North Carolina Law Enforcement Officers' Association, PO Box 41368, Raleigh, NC 27629, telephone (919) 876-0687, toll free (800) 889-7118, fax (919) 878-7413, email [elaine@execman.net](mailto:elaine@execman.net).

### **Southern States Police Benevolent Association, Inc.**

The PBA member's beneficiary will receive their base salary for one year if they are killed accidentally or intentionally while performing their law enforcement duties (maximum payout: \$60,000). The beneficiary will receive \$5,000 if it is not an occupational death or if you are a retired or reserve member. Any active Southern States PBA member in good standing and dues current will receive this benefit. There is also a benefit clause which covers death due to heart or circulatory malfunction.

**Contact:** Southern States Police Benevolent Association, Inc., 2155 Highway 42 South, McDonough, Georgia 30252, telephone (770) 389-5391 or toll free (800) 233-3506 or visit [www.sspba.org](http://www.sspba.org).

### **National Rifle Association Line of Duty Death Benefit**

Provider: **National Rifle Association (NRA)**

**Amount:** \$25,000

**Summary:** If an officer, with or without compensation, is feloniously killed in the line of duty (according to government guidelines) and is a current member of the National Rifle Association, the surviving spouse/family is entitled to a \$25,000 death benefit.

**Contact:** [National Rifle Association \(NRA\) website](http://www.nra.org) - National Rifle Association (NRA), 11250 Waples Mill Road, Fairfax, VA 22030 (800) 672-3888

**Details & Applicable Instructions:** A \$25,000.00 insurance benefit to the widow or survivors of any NRA-member law enforcement officer who is killed in the line of duty. Coverage is automatic for all law enforcement officers who are NRA members. Contact the NRA to file a line of duty death benefit claim.

Read more: <http://www.odmp.org/benefits/state?state=North+Carolina#ixzz1y9sdAIGO>

### **Woodmen of the World 1st Responders Benefit**

**Provider:** Woodmen of the World

**Amount:** \$10,000

**Summary:** Woodmen of the World will pay a \$10,000 fraternal death benefit if a qualified member is killed while performing his or her duties as a non-military first responder. To be eligible for this benefit, an individual must be a good standing benefit member. First Responders include firefighters, EMT/paramedics, police or a person performing a supporting role to such individuals.

**Contact:** [Woodmen of the World website](http://www.woodmen.org), Woodmen of the World, Woodmen Tower, 1700 Farnam Street, Omaha, NE 68102 (800) 225-3108 Read more: <http://www.odmp.org/benefits/state?state=North+Carolina#ixzz1yAGc4LdN>