

**SYLVANIA TOWNSHIP POLICE DEPARTMENT  
4402 KING ROAD, SYLVANIA, OHIO 43560**

**APPLICATION FOR EMPLOYMENT – POLICE OFFICER**

**PERSONAL**

Name \_\_\_\_\_ SSN \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Email Address \_\_\_\_\_

Home Phone (     ) \_\_\_\_\_ Alternate Phone (     ) \_\_\_\_\_

Are you a U.S. citizen?                       Yes  No

Are you at least 21 years of age?             Yes  No

Do you have a valid driver's license?       Yes  No

**EDUCATION**

High School Name/Address \_\_\_\_\_

Diploma Achieved?    Yes  No                      If no, GED Achieved?             Yes  No

**College/Additional  
Education**

Name of College/University	Dates Attended	Major	Degree Completed (Y/N)	If degree not completed, indicate no. of credit hours-specify semester or quarter

Date Ohio Peace Officer Certification completed \_\_\_\_\_

Is your certification presently in force?       Yes  No

If yes, with what agency? \_\_\_\_\_

Did you serve in the military?             Yes  No    If yes, state which branch \_\_\_\_\_

Honorably Discharged?                       Yes  No    Dates served: from \_\_\_\_\_ to \_\_\_\_\_

**OTHER QUALIFICATIONS/ACHIEVEMENTS/SKILLS**

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

**PREVIOUS EMPLOYMENT EXPERIENCE**

Employer Name \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_

Address \_\_\_\_\_ Phone (     ) \_\_\_\_\_

Position Held/Duties \_\_\_\_\_

Employer Name \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_

Address \_\_\_\_\_ Phone (     ) \_\_\_\_\_

Position Held/Duties \_\_\_\_\_

Employer Name \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_

Address \_\_\_\_\_ Phone (     ) \_\_\_\_\_

Position Held/Duties \_\_\_\_\_

**REFERENCES**

Name \_\_\_\_\_ Personal or Business Reference? \_\_\_\_\_

Address \_\_\_\_\_ Phone (     ) \_\_\_\_\_

Name \_\_\_\_\_ Personal or Business Reference? \_\_\_\_\_

Address \_\_\_\_\_ Phone (     ) \_\_\_\_\_

THE APPLICANT HEREIN AUTHORIZES THE SYLVANIA TOWNSHIP POLICE DEPARTMENT TO INVESTIGATE INFORMATION SUPPLIED BY HIM/HER AND TO INQUIRE IN REGARDS TO THE APPLICANT'S BACKGROUND INCLUDING ACADEMIC, OCCUPATIONAL, HEALTH, AND CRIMINAL RECORDS IN ITS CONSIDERATION OF HIM/HER AS A PROSPECTIVE EMPLOYEE. IN MAKING THIS APPLICATION FOR EMPLOYMENT, IT IS UNDERSTOOD THAT AN INVESTIGATION MAY BE MADE WHEREBY INFORMATION IS OBTAINED THROUGH PERSONAL INTERVIEWS WITH NEIGHBORS, FRIENDS, OR OTHERS WITH WHOM YOU ARE ACQUAINTED. THIS INQUIRY INCLUDES INFORMATION AS TO YOUR CHARACTER, GENERAL REPUTATION, AND GENERAL CHARACTERISTICS. IT IS UNDERSTOOD THAT AS PART OF OUR HEALTH PROGRAM, YOU MAY BE ASKED TO COMPLETE A PHYSICAL EXAMINATION. I VERIFY THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE. I UNDERSTAND THAT FALSE OR MISLEADING STATEMENTS OR OMISSIONS ON THIS APPLICATION MAY BE CONSIDERED SUFFICIENT CAUSE FOR DISMISSAL.

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

\_\_\_\_\_  
Date

**\*\*IMPORTANT: In order for your application to be considered, you must attach the following documentation. Failure to attach all of the following will result in your application being rejected and you will not be able to participate in the competitive examination.**

- Certified Copy with seal of College Transcripts
- Copy of Ohio Peace Officer Certification
- DD214 (if military applies)
- Copy of valid driver's license
- Copy of social security card
- Copy of birth certificate or Naturalization Card showing U.S. citizenship

**SYLVANIA TOWNSHIP POLICE DEPARTMENT  
RECORD-MAINTENANCE FORM**

The Federal Guidelines on Employee Selection (1978) and the Ohio Revised Code require employers to maintain and have available for inspection, records or other information which will disclose the impact which the employer's tests and other selection procedures have upon employment opportunities of persons by identifiable race, sex, ethnic group, and age status. Compliance with this mandate requires that each applicant be requested to complete this Record Maintenance Form. This form will be detached from the application sheet prior to the establishment of the eligible list.

Information concerning your knowledge that a position was available will assist us in our recruitment and promotional efforts.

Thank you for your cooperation.

1. Position applied for: \_\_\_\_\_
  
2. Sex: (Please check one) \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Do not care to respond
  
3. Race: Please check the category that applied to you.  
 A. White  
 B. Black  
 C. American Indian (including Alaskan Natives)  
 D. Asians (including Pacific Islanders)  
 E. Hispanic (including persons of Mexican, Puerto Rican, Cuban, Central or South American origin or culture regardless of race)  
 F. Other (please specify)  
 G. Do not care to respond
  
4. Age: Please check the category that applies to you.  
 Less than 18 years  
 18 to 29 years  
 30 to 39 years  
 40 to 49 years  
 50 to 59 years  
 60 years and over  
 Do not care to respond
  
5. How did you hear about this position? (Please check one)  
 A. Newspaper Ad  
If yes, which newspaper \_\_\_\_\_  
 B. Web Site  
 C. Word of Mouth  
 D. Other, please specify \_\_\_\_\_