CIVIL SERVICE COMMISSION SHELBY, OHIO APPLICATION FOR POLICE OFFICER Entry Level Application _____Lateral Entry Application

Please print your name below.

FIRST NAME

MIDDLE

LAST

FOR: Police Officer for the Police Department

Instructions to applicant:

Fill in completely – use typewriter or print in black ink.

<u>Failure to give truthful or complete information will result in rejection of your</u> <u>application or in your removal from your position if you receive the appointment.</u>

Applicants must be 21 years of age, as per ORC 124.41

Applicants must provide a valid Ohio Drivers License

Applicants must provide a current satisfactory record of employment from another jurisdiction while employed as a police officer, deputy sheriff, or state highway patrol officer

Applicants must provide a Basic Peace Officer Certification in the State of Ohio.

Candidates may be required to pass a physical ability test

Candidate(s) may go through an interview process and background check.

CITY OF SHELBY IS AN EQUAL OPPORTUNITY EMPLOYER.

PERSONAL INFORMATION

FIRST NAME	MIDDLE		LAST
ADDRESS			
CITY	STATE	ZIP	
HOME PHONE	CELL PHO	NE	
EMAIL ADDRESS			
How long have you been a re	esident at the above address	?	
If less than four years, give p	previous address:		
Are you legally authorized ir		Yes	No
Are you 21 years or older?		Yes	No
Name and address of person	to notify in an emergency:		
Do you drink intoxicating lic	juors?	Yes	No
To what extent?			
Did you ever serve in any branch		Yes	No
Primary Duties			

EDUCATION	SCHOOL NAMES & LOCATIONS	NUMBER OF YEARS ATTENDED	Course Of Study	GRADUATE	LAST YEAR Attended
Grammar School					
High School					
College Or University					
Night School					
Other Schools					

Have you ever before FILED AN APPLICATION for the position of Police Officer in the City of Shelby? _____Yes ____No If so, state when:_____

List below complete work history for the last five years starting with your present position and working back. List periods of unemployment.

Occupation	From – To	Name & Address Of Employer	Reason For Leaving	Part Time/Full Time

Give names and addresses of five references, other than relatives of city employees, and the length of time they have known you:

In the space below, describe any special qualifications in training and experience you have had that in your opinion will qualify you for the position for which this application is filed.

RELEASE

I understand that as an applicant for the position of police officer, I will be subject to a background investigation that will include a reference and credit check. I hereby give consent and authorize the Employer to conduct any investigation the Employer deems necessary.

I further authorize any past employer and any school I have attended to release my employment and/or education records to the City of Shelby.

STATE OF OHIO)
)ss
RICHLAND COUNTY)

Print Name below

_____, being first duly sworn, says that the statements in the foregoing application are true, as he/she verily believes.

Signature below **before the notary only**

_____, _____.

Sworn to before me and subscribed in my presence this _____day of

Notary Public

Seal