# Orange Village Police Application Packet

#### <u>ITEMS THAT MUST BE RETURNED WITH COMPLETED APPLICATION</u>

- 1) A copy of your Birth Certificate
- 2) A copy of your Social Security Card
- 3) A copy of your Military Discharge record (if applicable)
- 4) A copy of your Police Academy Certificate (if applicable)
- 5) A copy of your Driver's License
- 6) A copy of your High School diploma or G.E.D

\*The Orange Village Police Department is an Equal Opportunity Employer.

Orange Village Police Department

4600 Lander Road

Orange Village, OH 44022

Phone (440) 498-4401

### **VILLAGE OF ORANGE POLICE DEPARTMENT**

#### **APPLICATION FOR EMPLOYMENT**

\*This application is under oath, and any false statement or alteration of a certificate, or the presentation to the Village of Orange of a paper containing such false statement or alteration, is a violation of law and is punishable as such.

Name:			
Address:			
Telephone: Home	Work	Cell	
Place/Date of Birth:			
Social Security Number:	- <del></del>		
Driver's License Number:	State:		
	ense in any other State? YesN	No	
How long have you resided at th	e above mentioned address?		
•	lias that was not registered with the		
List any previous addresses for a	the past 10 years:		
	Do Not Write Below This	<u>Line</u>	
Date Application Filed:	Time Application Filed:		
Signature of Denartment Memb	er Accepting Application:		

# **EDUCATION**

	Name and location	Highest grade completed	
Grammer School			
High School			
College/ University			
Major(s) _			
Other(s) (GED)			
When your school records are checked, how many times will it show you were suspended or expelled? Give details			
Which subject did you li	ke best in school?		
Which subject did you li	ke least in school?		
Is there any information know? Yes N		ur education, or that you feel is important for us to	
If yes, explain:			
MEDICAL AND	PHYSICAL DATA	Disabilities Act", and questions concerning it are	
*This information is pro	riected under the Americans with	Disdonnies her, and questions concerning it are	
	offer of employment is made.	Disaottics net, and questions concerning it are	
restricted until after an		Disaottics net, and questions concerning it are	
restricted until after an a	offer of employment is made.		
restricted until after and In the event that an offer Are you willing to take o	offer of employment is made.	ition? Yes No	

### **MILITARY HISTORY**

Have you ever been in the United States Armed Forces? Yes	No
If no, got to next page.	
Branch of Service:	
Date of Induction:	
Date of Discharge:	
Type of job in Military:	
List any medals, honors or awards you have received:	
How many times did you:	
Receive disciplinary action? (Captain's Mass	, Article 15, Summary Punishment)
Get taken into custody by Military Authorities	?
Get Court Martialed?	
Get your rank reduced?	
Explain any answers with a number other than zero:	
Did you keep any of your service equipment when discharge	d? Yes No
If yes, explain:	
Is there anything you are now concealing, or think is import History? Yes No	ant for us to know concerning your Military
If yes, explain:	

# **FINANCIAL INFORMATION**

How much money would it take to pay off all of your outstanding loans, bills, charges and debts? \$
How many charge cards do you have with an outstanding balance?
When a credit check is performed, how many debts will it show you are currently behind on?
In the last seven years, how many times have you:
Defaulted on a loan or bill?
Had your wages garnished?
Declared bankruptcy?
Had to appear in court due to bad debt?
Been refused a loan by a bank or store?
Had an overdraft on your checking account?
Explain any answers with a number other than zero:
Is there anything you are now concealing about your financial information, or that you think is important for u to know? Yes No
If Yes, explain:

### **GENERAL INFORMATION**

Are you married? Yes	s No	_		
If yes, give spouse's i	nformation:			
Name:		DOB:		
Social Security Numb	er:			
Were you a party to a	n marriage(s) that is nov	v dissolved? Yes	_ No	
If yes, give former spe	ouse (s) information:			
Name:		DOB:		_
Social Security Numb	er:			_
Have you ever been i	nvolved in a paternity p	roceeding? Yes	<i>No</i>	
If yes, explain:				
Give the name of ever	ry member of your famil	ly. (Mother, Father, Sis	ters & Brothers)	
Name	Address	Relationship	Phone Number	

## **GENERAL INFORMATION**

Please list any vehicles registered to you:				
YEAR	MAKE	MODEL	LICENSE PLATE	
Have you ever	r been convicted	of a traffic offense? Yes _	No	
If yes:				
OFFENSE		WHEN	WHERE	
Have you ever	r committed a sei	rious crime that you have t	not been arrested or convicted of?	
Yes	No			
If yes, please	explain:			

#### **EMPLOYMENT HISTORY**

Are you currently employed? Yes No
In the last 5 years how many Full Time jobs have you had?
In the last 5 years how many Part Time jobs have you had?
In your entire life, how many times have you been fired from a job?
List each job you have been fired from and explain:
When we check your personnel files for the last 12 months of your employment, how many times will it indicate
that you were:
Late Absent Disciplined
How many times at a job have you:
Been warned about absence or lateness?
Been asked to resign?
Quit because you thought you would be fired?
Had personality problems on the job?
Left because of personality problems?
Explain any answers which have a number other than zero:

On the next page(s) list all your places of full, part time or temporary employment during the past ten years. BEGIN WITH YOUR CURRENT OR LAST JOB AND WORK BACKWARDS. \* FAILURE TO LIST A PLACE OF EMPLOYMENT WILL BE GROUNDS FOR REJECTION.

### **EMPLOYERS**

Dates of employment: From	To:	Your Position	
Name of Employer:		Supervisor	
Address:		Phone	
Your Duties:			
Reason for Leaving:		Salary/ Hourly wage	
Dates of employment: From	To:	Your Position	
Name of Employer:		Supervisor	
Address:		Phone	
Your Duties:			
Reason for Leaving:		Salary/ Hourly wage	
Datas of aurilary out From	To	Vous Dogicion	
		Your Position	
		Supervisor Phone	
Your Duties:			
		Salary/ Hourly wage	
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Your Duties:			
		Salary/ Hourly wage	
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Address:		Phone	
Your Duties:			
Reason for Leaving:		Salary/ Hourly wage	
Dates of employment: From	To:	Your Position	
Name of Employer:		Supervisor	
		Phone	
Your Duties:			
		Salary/ Hourly wage	

### PERSONAL SUMMARY

In this section, the Orange Police Department would like you tell us why you applied here and why you would be an asset to our department. This section <u>must</u> be filled out in your own handwriting.	

#### ORANGE POLICE DEPARTMENT

#### **AUTHORITY TO RELEASE INFORMATION**

	DATE:
TO WHOM IT MAY CONCERN:	
or a copy thereof, within one year of its date, to deducational records including, but not limited to, records. I hereby direct you to release such information is for the official use of the Oran Department to furnish such information, as is deshereby release you, as the custodian of such reco collectively, from any and all liability or claims for associates because of compliance with this aut	er or authorized representative of the Orange Police Department bearing this release, obtain any information in your files pertaining to my employment records or achievement, attendance, personal history and disciplinary records; and medical mation upon request of the bearer. This release is executed with full knowledge that ge Village Police Department. Consent is granted for the Orange Village Police scribed above, to third parties in the course of fulfilling its official responsibilities. I rds, including its officers, employees, or related personnel, both individually and for damages of whatever kind; which may at any time result to me, my heirs, family chorization and request to release information, or any attempt to comply with it. It this release, you may contact me as indicated below.
FULL NAME:	
	(Signature)
FULL NAME:	(Typed or Printed)
DATE:	
CURRENT ADDRESS:	
TELEPHONE NUMBER:	
SOCIAL SECURITY NUMBER:	
DATE OF BIRTH:	
Sworn to and subscribed before me this _	day of
ľ	My commission expires
Netern Dublic State of Object Large	
Notary Public, State of Ohio at Large	

THIS FORM MUST BE COMPLETED AND SUBMITTED BY THE APPLICANT WITH THE APPLICATION.

# ORANGE POLICE DEPARTMENT AUTHORITY TO RELEASE CREDIT INFORMATION

TO WHOM IT MAY CONCERN	N
Department bearing this release, or a cop	cer or authorized representative of the Orange Village Police by thereof, within one year of its date, to obtain any information in your all there be any question as to the validity of this release, you may
FULL NAME:	(SIGNATURE)
FULL NAME:	(TYPED OR PRINTED)
ADDRESS:	
<u> </u>	
TELEPHONE NUMBER:	
SOCIAL SECURITY NUMBER:	
DATE OF BIRTH:	
Sworn to and subscribed before me this _	My commission expires,
Notary Public State of Ohio at Large	

THIS FORM MUST BE COMPLETED AND SUBMITTED BY THE APPLICANT WITH THE APPLICATION.