

**Village of Terrace Park**  
**EMPLOYMENT APPLICATION**  
428 Elm Avenue  
Terrace Park, OH 45174

The Village of Terrace Park, an equal opportunity employer, does not discriminate on the basis of race, sex, color, religious creed, national origin or ancestry. Also, the Village does not discriminate based on age of any person between the ages of 40 and 70, nor on the basis of handicap not limiting the applicant's ability to satisfactorily perform the job available. The questions below are not intended to secure information to be used for such discrimination.

The Village of Terrace Park will give this application every consideration. However, in accepting this application, the Village makes no commitment of employment to the applicant.

**APPLICANT QUESTIONNAIRE**

Please complete the following questions completely and accurately. An extensive background investigation will be conducted of your personal history. Applicants for Law Enforcement Officer Positions will be required to take a drug screen for illegal narcotics as well as complete a semi-auto handgun proficiency qualification. Officer applicants may also be required to take a medical examination. Civilian applicants may be requested to take a drug screen. Any false, misleading or incomplete information will be grounds to disqualify applicant for employment with the Village of Terrace Park.

**I have read and fully understand the above** \_\_\_\_\_  
Signature

***FOLLOW DIRECTIONS CAREFULLY***

1. Use ink. Complete this form in your own handwriting.
2. Write or print legibly.
3. **Answer each question completely and correctly.** If additional space is needed, write on the back of the page or use a supplemental sheet.
4. Read each question carefully.
5. **Do not** leave a question blank. If it does not apply to you, write N/A in the space.

## 1. PERSONAL DATA

Date Applied \_\_\_\_\_

Name: \_\_\_\_\_

	<b>Last</b>		<b>First</b>		<b>Middle</b>
<b>Telephone:</b>					
Home	( )	_____ - _____			<b>Social Security Number:</b>
Business	( )	_____ - _____			_____ - _____
Alternate	( )	_____ - _____			

Mailing Address: \_\_\_\_\_

List Any Other Names You Have Ever Used: \_\_\_\_\_

**Work Desired:**

Police: \_\_\_\_\_ Fire: \_\_\_\_\_ EMS: \_\_\_\_\_ Office: \_\_\_\_\_ Maintenance: \_\_\_\_\_ Other: \_\_\_\_\_

**Work Status:**

Full Time: \_\_\_\_\_ Part Time: \_\_\_\_\_ Auxiliary: \_\_\_\_\_ Volunteer: \_\_\_\_\_ Seasonal: \_\_\_\_\_

Starting with your present address, list the addresses where you have lived for the past twenty (20) years including your addresses in the military service.

Dates					
To	From	Street Address	City	County	State

## 2. REFERENCES

List three (3) references (not relatives, former employees or neighbors) who are responsible adults and who have known you well during the past five years.

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Telephone:

Home: ( ) \_\_\_\_\_ - \_\_\_\_\_  
Business: ( ) \_\_\_\_\_ - \_\_\_\_\_  
Alternate: ( ) \_\_\_\_\_ - \_\_\_\_\_

How many years have you known  
this person: \_\_\_\_\_

Residence or Business Address: \_\_\_\_\_

Street

City

State

Zip Code

<b>Name:</b>	<b>Occupation:</b>		
<b>Telephone:</b>	<b>How many years have you known this person?</b> _____		
Home ( ) _____ - _____			
Business ( ) _____ - _____			
Alternate ( ) _____ - _____			
<b>Residence or Business Address</b>			
<small>Street</small>	<small>City</small>	<small>State</small>	<small>Zip Code</small>

<b>Name:</b>	<b>Occupation:</b>		
<b>Telephone:</b>	<b>How many years have you known this person?</b> _____		
Home ( ) _____ - _____			
Business ( ) _____ - _____			
Alternate ( ) _____ - _____			
<b>Residence or Business Address</b>			
<small>Street</small>	<small>City</small>	<small>State</small>	<small>Zip Code</small>

### 3. EDUCATION

Do you have (check one):  College Degree  GED Certificate  High School Diploma

**List all schools, colleges and universities you have attended:**

Dates Attended	Name of School	Address City, State & Phone Number	Diploma Received
Elementary			
Jr. High			
High School			
College			
<b>Other Schools</b>			

List Honors earned, extra curricular activities while in school, and current hobbies:

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Please indicate other abilities, experience skills or special knowledge that you believe would further qualify you for the type of work for which you are applying. This experience can include armed forces, volunteer work, etc.. Please do not include any organizations that refer to religion, ethnic group, ancestry or national origin.

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#### 4. MILITARY SERVICE

**Branch served:** \_\_\_\_\_

Years served: \_\_\_\_\_ Date discharged: \_\_\_\_\_ Rank upon separation: \_\_\_\_\_

**Discharge:**

Honorable: \_\_\_\_ General: \_\_\_\_ Dishonorable: \_\_\_\_

**Applicants who apply with military service must attach a copy of Form DD 214.**

#### 5. EMPLOYMENT HISTORY

Have you ever been dismissed or asked to resign from any employment? \_\_Yes\_\_No

Have you filed employment applications with any other sources recently? \_\_Yes\_\_No

If yes, list below those sources with whom you have currently applied.

Firm Name

Address

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Please list employment history in chronological order starting with your most recent employer.

From _____	To _____	Job Title: _____
Name of Employer: _____	Name and Title of Supervisor: _____	
Address of Employer: _____	Phone Number: _____	
Street _____	Beginning Salary: _____	Ending Salary: _____
City _____	State _____	Zip _____
Describe your duties: _____		
_____		
Reason for Leaving: _____		
_____		

From _____	To _____	Job Title: _____
Name of Employer: _____	Name and Title of Supervisor: _____	
Address of Employer: _____	Phone Number: _____	
Street _____	Beginning Salary: _____	Ending Salary: _____
City _____	State _____	Zip _____
Describe your duties: _____		
_____		
Reason for Leaving: _____		
_____		

From _____	To _____	Job Title: _____
Name of Employer: _____	Name and Title of Supervisor: _____	
Address of Employer: _____	Phone Number: _____	
Street _____	Beginning Salary: _____	Ending Salary: _____
City _____	State _____	Zip _____
Describe your duties: _____		
_____		
Reason for Leaving: _____		
_____		

From _____	To _____	Job Title: _____
Name of Employer: _____		Name and Title of Supervisor: _____
Address of Employer: _____		Phone Number: _____
Street _____	Beginning Salary: _____	Ending Salary: _____
City _____	State _____	Zip _____
Describe your duties: _____		
Reason for Leaving: _____		

### 6. CRIMINAL HISTORY

Have you ever been convicted of any crime other than traffic?    \_\_\_ Yes    \_\_\_ No  
 If yes, explain in detail: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### 7. DRIVING HISTORY

List all driver or chauffeur licenses that you currently hold. Indicate if you have ever had your license revoked or suspended.

State	Type of License	Expiration Date	License Number	Revoked or Suspended

### 8. DUI/DRUG USE

Have you ever been convicted for driving under the influence?    \_\_\_ Yes    \_\_\_ No  
 Have you illegally used drugs in the last 15 years?    \_\_\_ Yes    \_\_\_ No  
 (include marijuana, LSD, peyote, heroin, opium, cocaine, abuse of prescription drugs, etc.)  
 If yes, please explain what was the illegally used drug? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### 9. ORGANIZATION MEMBERSHIP

Are you a current or former member of any foreign or domestic organization, association, movement, group, or combination of persons which is totalitarian, fascist, communist, or subversive, or which has adopted or shows a policy of advocating or approving the commission of acts of force or violence to deny other persons of their rights under the constitution of the United States or the State of Ohio. Are you a current or former member of any organization that seeks to alter the form of government of the United States, or the State of Ohio, by any unlawful or unconstitutional means?

\_\_\_ Yes    \_\_\_ No  
 If Yes, please EXPLAIN on the reverse.

**Village of Terrace Park Police Department  
Consent & Release Form for Law Enforcement  
Employee's/Applicants Only**

I, \_\_\_\_\_, as an employee/applicant of the Village of Terrace Park Police Department, hereby acknowledge that the Village of Terrace Park Police Department policy requires me to submit drug and/or alcohol test for employment as a Law Enforcement Officer.

I further understand that the purpose of this analysis is to determine or rule out the presence of non-prescribed or prohibited dangerous controlled substances in my system.

I hereby freely and voluntarily consent to this request for a designated sample (i.e. blood, breath, or urine) for drugs and/or alcohol, and agree to participate in the testing program.

I hereby and herewith release the Village of Terrace Park Police Department, the Village's employees, agents and contractors, from any and all liability whatsoever arising from this request for testing, from the actual testing procedures and from decisions made concerning my application for our continuation of employment, based on the results of the analysis.

I agree to cooperate in all aspects of the testing program.

I hereby authorize the release of my drug and/or alcohol test results to the contractor's Medical Review Officer (MRO), and/or to the Village of Terrace Park Police Department's examining physician, as provided by the Village of Terrace Park Police Department.

I further acknowledge that the Village of Terrace Park Police Department has provided me with an opportunity to ask questions related to its drug and alcohol testing program and that all my questions have been answered.

Employee/Applicant Signature: \_\_\_\_\_

Employee/Applicant Printed Name: \_\_\_\_\_

Signature of Witness: \_\_\_\_\_

Printed Name of Witness: \_\_\_\_\_

Date of Signatures: \_\_\_\_\_

**Village of Terrace Park Police Department  
Police Handgun Qualification Test for Law  
Enforcement Applicants Only**

To determine the selection of the Law Enforcement Officers for the Village of Terrace Park, a handgun qualification course must be completed by the applicant. The applicant must then pass this test to be considered for employment. All applicants will be given a minimum of one week notice, prior to the range date, to prepare for the qualification. In addition, applicants will need the following items listed below:

**Handgun (if caliber is other than 9mm, the applicant will have to provide the ammunition. A minimum of 120 rounds will be needed.)**

**3 Magazines**

**Duty Belt**

**Duty Holster**

**Magazine Pouch**

**Eye protection**

**Ear protection**

**Flashlight**

Any applicant who is late on the **date and time** of the **range** will be considered an **automatic failure** and will not be allowed to shoot the course. Applicants will be given **TWO** opportunities to pass an SPO. If the applicant fails an SPO two times, the applicant will then fail the entire course. All rounds fired must be in the Preferred Area of the Target.

Applicants are encouraged to meet with one of the department's firearms officers prior to the test date to work on any issues with the chosen handgun. This assistance from the department will help increase the applicant's success. **NO HANDGUNS WILL BE SUPPLIED BY THE DEPARTMENT.**

I have read and understand the above requirement for selection as a Law Enforcement Officer with the Village of Terrace Park. Also, I have been issued a copy of the Handgun Qualification Rules and a copy of the Handgun Qualification Course.

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Print Name of Applicant

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Signature of Applicant

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Date

**AUTHORIZATION FOR RELEASE OF INFORMATION**

I, \_\_\_\_\_, do hereby authorize the Veterans Administration, U.S. Navy, Army, Air Force, Marine Corps, Coast Guard, current and/or former employers, medical and/or psychological doctors, insurance companies, schools, colleges, universities, state and federal tax bureaus, and credit bureaus to furnish the Village of Terrace Park Police Department with any and all available information regarding me in order that the Village may determine my suitability to work.

I authorize the Village of Terrace Park Police Department to make inquiry of my present and past employers regarding my character, integrity, and reputation. Exceptions, if any, please list below:

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**Exceptions: (Make note if you do not wish your present employer contacted, and state why.)**

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_