City of Cheviot

APPLICATION FOR EMPLOYMENT

| If you are interested in any or a | ull-time Police Offic Il positions available, che | er Part-tineck all boxes that ap | me Police Officer [oply. | ☐ Auxiliary | Police Office |
|---|--|------------------------------------|--------------------------|-------------|---------------|
| Date: | | | | | |
| Full Name: | | Em | ail Address: | - | |
| Address: | | G: | | | |
| | Cell | City | Soc. Sec. #: | State | Zip |
| Home | Cell | | | | - |
| Are you legally authorized to wo Can you provide proof of eligibi Are you at least 21 years of age? | ility to work in the U.S.? | Yes: ☐ No: Yes: ☐ No: | | | |
| Education: | | | | | |
| High School Graduate? | Yes: □ No: □ | GED? | Yes: □ No: □ | | |
| High School Name | City, State | Num | aber of years attended | | |
| College or Other Special Tr | raining: Graduate? | Yes: □ No: | | | |
| chool name(s) | City, State | Number of ye | | | Degree/Major |
| | | <u></u> | | | |

Employment: (List employers, starting with the most recent)

| Phone# | / to / |
|------------------------|----------------------------|
| | Month Year Month Year |
| | |
| | Salary: |
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| | Month Year to / Month Year |
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| | Month Year Month Year |
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| | / to/ |
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| | |
| | Month Year Month Year |
| | Supervisor: |
| | Salary: |
| | |
| ween employment dates: | |
| | |
| | |
| | |
| | Phone#Phone# |

|)ate: | Presiding Court: |
|---------------------------------|--|
| lature of off An affirmative | ense: answer will not automatically disqualify you from being considered as a candidate for employment.) |
| eferences: | (List at least three responsible adults who have knowledge of your work ethic, experience and abilities.) Address Phone Occupation |
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| dditional D | ata: List other job-related or educational experience, licensing, certifications, specialized training. |
| dditional D prenticeships, | ata: List other job-related or educational experience, licensing, certifications, specialized training, skills or any additional information you feel may be helpful to us in considering your application. |
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| prenticeships, | |
| prenticeships, | skills or any additional information you feel may be helpful to us in considering your application. |
| prenticeships, pplicant Acc | skills or any additional information you feel may be helpful to us in considering your application. cepted: Rejected: Reason: took the examination for Position/Title |
| oplicant AccasisApplicant | skills or any additional information you feel may be helpful to us in considering your application. cepted: Rejected: Reason: took the examination for Position/Title Their grade was and their position on the eligible list was |
| oplicant AccasisApplicant | skills or any additional information you feel may be helpful to us in considering your application. cepted: Rejected: Reason: took the examination for Position/Title |



Chief of Police

City of Cheviot, Ohio

Police Department



3814 Harrison Ave. Cheviot, Ohio 45211 Office: (513) 661-2917 Fax: (513) 661-2128 E-mail: estone@cheviot.org

Job Applicant's Agreement and Certification:

I authorize you, at the time of my application for employment or during the course of my employment, to obtain information from any source as to my education, experience, competence and character as it relates to the position for which I applied. I agree that all statements made in this application may be investigated. I agree to cooperate in such investigation and release from all liability or responsibility all persons, companies or corporations supplying information. I certify that the information contained in this application is true, complete and correct to the best of my knowledge. I understand that any falsification or omission of information may cause my immediate dismissal or rejection of this application. Further, I understand that in the event I am employed, such employment is at will. Neither the employer nor I have agreed on any specific period of employment unless otherwise set forth in a separate contract.

I agree that any claim or lawsuit relating to my service with the City of Cheviot must be filed no more than six (6) months after the date of the action that is the subject of the claim or lawsuit. I waive any statute of limitations to the contrary.

I understand that I may be required to take a drug test as a part of the application process, as a condition of employment or at any time during employment. I may also be required to take and pass a physical exam if I am selected for employment and before beginning employment.

I have read and understand the contents of this employment application and am fully able and competent to complete it.

| Signature | Date | | |
|-----------|--------------------------------------|--|--|
| | WE ARE AN EQUAL OPPORTUNITY EMPLOYER | | |