

**APPLICATION FOR EMPLOYEMENT
OTTAWA COUNTY SHERIFF'S OFFICE
AN EQUAL OPPORTUNITY EMPLOYER**

PLEASE PRINT

Date of Application _____

Position(s) Applied For _____

Rate of Pay Expected _____

Referral Source ___ Advertisement ___ Friend ___ Relative ___ Walk-in ___ Other ___

Name _____
Last First Middle (Maiden)

Address _____
Number Street City State Zip

Telephone () _____ Social Security Number _____

If employed and you are under 18, can you furnish a work permit? ___ Yes ___ No

Have you filed an application here before? ___ Yes ___ No

If yes, give date _____

Are you employed now? ___ Yes ___ No

May we contact your present employer? _____

Are you prevented from lawfully becoming employed in this country because of VISA or Immigration Status? ___ Yes ___ No

On what date would you be available to begin working? _____

Are you available to work ___ Full-time ___ Part-time ___ Temporary

Are you on a lay off and subject to recall? ___ Yes ___ No

Within the past (7) seven years have you either: 1) Been convicted by any court of a felony or 2) been released from prison following conviction of a felony? ___ Yes ___ No

If yes, please explain _____

List professional, trade, business or civic activities and offices held. (May exclude those which indicate race, religion, color, sex or national origin) _____

Give name, addresses and telephone numbers of three references who are not related to you and who are not previous employers (Please give complete information).

EDUCATION

Elementary High School College Other

School Name: _____

Years Complete 5,6,7,8 9,10,11,12 1,2,3,4
(circle)

Diploma/Degree _____

Course of Study _____

Describe Specialized Training, Licenses, Certificates, Apprenticeship Skills and Extra Curricular activities _____

Honors Received _____

State any additional information you may feel helpful to us in considering your application, including typing speed, shorthand, computer experience _____

Do you presently hold a valid State of Ohio Driver's license? (This information will be considered for selection purposes only if such license is required by law to perform the duties for which you have applied) ___ Yes ___ No

If yes, type _____ Operators _____ Commercial
CDL Endorsements? _____ Yes ___ No

As an equal opportunity employer, Ottawa County will consider only the qualifications of all applicants and will not tolerate discrimination in provision of services or employment due to disability, race, color, creed, national origin, sex or age.

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names, which indicate race, color, religion, sex or national origin.

| | |
|---------------------|----------------------|
| Employer: _____ | Dates Employed |
| Telephone () _____ | From _____ To _____ |
| Address: _____ | Work Performed _____ |
| _____ | _____ |
| _____ | _____ |

| | |
|-------------------|----------------------------|
| Job Title: _____ | Hourly Rate/Salary |
| Supervisor: _____ | Starting _____ Final _____ |

Reason for Leaving _____

| | |
|---------------------|----------------------|
| Employer: _____ | Dates Employed |
| Telephone () _____ | From _____ To _____ |
| Address: _____ | Work Performed _____ |
| _____ | _____ |
| _____ | _____ |

| | |
|-------------------|----------------------------|
| Job Title: _____ | Hourly Rate/Salary |
| Supervisor: _____ | Starting _____ Final _____ |

Reason for Leaving _____

EMPLOYMENT EXPERIENCE CONTINUED

Employer: _____ Dates Employed
Telephone () _____ From _____ To _____
Address: _____ Work Performed _____

Job Title: _____ Hourly Rate/Salary
Supervisor: _____ Starting _____ Final _____

Reason for Leaving _____

Employer: _____ Dates Employed
Telephone () _____ From _____ To _____
Address: _____ Work Performed _____

Job Title: _____ Hourly Rate/Salary
Supervisor: _____ Starting _____ Final _____

Reason for Leaving _____

Please use a separate piece of paper if additional space is needed.

Thank you for your application and your interest in the Ottawa County Sheriff's Office.



Robert L. Bratton, Sheriff

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience.

Have you ever been bonded _____ Yes _____ No If yes, with what employers _____

State names of relatives working for Ottawa County _____

Who should be notified in case of an emergency?

Name: _____ Telephone () _____

Home Address: _____

Business Address: _____

Business Phone: () _____

APPLICANTS STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I further authorize all individuals and organizations named or referred to in this application and any law enforcement organization to give Ottawa County and the Ottawa County Sheriff's Office all information relative to such verification and hereby release such individuals, organizations and Ottawa County and the Ottawa County Sheriff's Office from any and all liability for any claim or damage resulting there from. I understand that this application is not and is not intended to be a contract of employment.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of Ottawa County and the Ottawa County Sheriff's Office.

SIGNATURE OF APPLICANT

DATE