

Employment History

List all previous employment for the last ten (10) years in chronological order, last position first

Employer: _____ Telephone: _____

Address: _____
Street City State Zip

Supervisor's name: _____ Title _____ Phone _____

Dates employed: From _____ to _____ Your title: _____

Job duties:

Reason for leaving: _____

May we contact this employer for a job reference:-----Yes No

Employer: _____ Telephone: _____

Address: _____
Street City State Zip

Supervisor's name: _____ Title _____ Phone _____

Dates employed: From _____ to _____ Your title _____

Job Duties:

Reason for Leaving: _____

May we contact this employer for a job reference:-----Yes No

Employer: _____ Telephone: _____

Address: _____
Street City State Zip

Supervisor's name: _____ Title _____ Phone _____

Dates employed: From _____ to _____ Your title: _____

Job duties

Reason for leaving: _____

May we contact this employer for a job reference:-----Yes No

Other Employers

Company	Dates Employed

Do you have any secondary or side line business or occupation that you would want to continue if hired by the Madison County Sheriff's Office? Yes No If yes, list the nature of your secondary occupation:

Education

Name of school or college	Location City, State Zip	Subject Degree/Major	Scholastic Average	Did you graduate?
High School:				Yes <input type="checkbox"/> No <input type="checkbox"/> Year completed: <input type="checkbox"/> 9, <input type="checkbox"/> 10, <input type="checkbox"/> 11, <input type="checkbox"/> 12 GED obtained: Yes <input type="checkbox"/> No <input type="checkbox"/>
College:				Yes <input type="checkbox"/> No <input type="checkbox"/>
College or other school:				Yes <input type="checkbox"/> No <input type="checkbox"/>
College or other school:				Yes <input type="checkbox"/> No <input type="checkbox"/>

Do you currently have an Ohio Police Officer Training Academy Certificate? Yes No

Describe briefly the type of work which you are best qualified to do by reason of background, education, previous employment or training and tell why you feel qualified for the position(s) for which you are applying:

List any special certifications or awards which help demonstrate your capability to perform the job for which you are applying:

Personal Data

How long have you lived at your current address _____

If hired, who should we contact in case of an emergency _____ Relationship: _____

• Address: _____ Phone: _____

Have you ever been employed by Madison County----- Yes No

• If yes, by which department _____

• Dates of employment From _____ to _____

Were you referred to the Madison County Sheriff's Office-----Yes No

• If Yes, by whom _____

Are you related to anyone employed by the Madison County Sheriff's Office----- Yes No

• If yes, state name and relationship: _____ / _____

Do you have time commitments that may interfere with your employment----- Yes No

• If yes, please explain:

Have you ever been dismissed from or asked to resign from any employment position-----Yes No

• If yes, please explain:

What status of employment are you applying for: Full-Time / Part-time / Seasonal / Special Deputy

• If you are applying for full-time employment, enter the date available to start: _____

• If you are applying for employment other than full-time, please indicated days and hours available:

Do you have a valid Ohio driver's license-----Yes No

• Driver's License # _____ Class _____

Personal data continued

Has your driver's license ever been suspended or revoked-----Yes No

- If yes, list details of the suspension or revocation:

Have you ever been convicted of a felony offense involving the use or operation of a motor vehicle-----Yes No

- If yes, give the details of the conviction:

Have you had any traffic violations in the past three (3) years-----Yes No

- If yes, please list below:

Offense	Approximate Date/Year

References

Other than former employers and relatives

Name	Complete address	Phone number

All persons seeking employment with this agency as a law enforcement officer must:

1. Be a United States citizen
2. Possess a valid Ohio Driver's License.
3. Have a high school diploma or GED.
4. Successfully complete the minimum training required for licensure.
5. Never have been convicted of a felony or misdemeanor involving moral turpitude or is not currently under indictment for any criminal offense.
6. Never been convicted of any family violence offense.
7. Not be prohibited by state or federal law from operating a motor vehicle.
8. Not be prohibited by state or federal law from possessing firearms or ammunition.
9. Be subject to a thorough background investigation and personal interviews by Madison County Sheriff's Office personnel.
10. Have never had a commission or peace officer license denied by final order or revoked.
11. Demonstrate honesty and integrity by successfully completing pre-employment CVSA (Certified Voice Stress Analyzer) and drug testing.
12. Demonstrate good general medical health as determined by a medical doctor, who is licensed by the Ohio State Board of Medical Examiners and physical performance testing. Applicant shall provide a copy of a physical within the last year
13. Be declared in satisfactory psychological and emotional health by a psychiatrist who is licensed by the Ohio State Board of Medical Examiners or psychologist, who is licensed by the Ohio State Board of Examiners of Psychologists.
14. Be fingerprinted and subjected to a search of local, state and national records and fingerprint files.
15. Must pass a background check

CERTIFICATION

I hereby affirm that the foregoing statements are true and complete to the best of my knowledge. I realize that any misrepresentation or false information presented in this application could lead to withdrawal of any offer of employment or termination after employment.

I understand that this application will be given every consideration, but its receipt does not guarantee nor imply that I will be granted a selection interview or employment. I further understand that this application will be maintained on file for future reference for two years.

I also understand that a background check and drug testing may be required prior to employment.

I understand and accept that any applicant who is under final consideration for a position that involves providing direct care to clients must undergo a criminal records check.

I understand and accept that, if I am selected for employment, my employment may be conditioned upon my passing any medical/psychological examination that the Employer deems necessary to determine whether I can perform the essential functions of the position, with reasonable accommodation when necessary.

I understand and accept that this may include drug, alcohol, or substance abuse testing.

I understand and accept that given the duties and responsibilities of the Madison County Sheriff's Office, I may be required to work weekends, evening hours, or at other times as determined by Madison County Sheriff's Office, including overtime hours.

In signing below, you are indicating that you understand that the misrepresentation or omission of facts is cause for termination of this application and/or separation from employment. Madison County shall not be liable in any respect if your employment is terminated for such cause.

Applicant's signature

Date

Notary Public

Sworn to before and subscribed by assignor: _____ in my presence this _____ day of _____ 20__

My Commission Expires _____ 20__ _____

Notary Public