



# PERRY TOWNSHIP POLICE DEPARTMENT

3025 Johnsville-Brookville Rd  
Brookville OH 45309

Administration: (937) 833-5487 Dispatch: (937) 225-4357 Fax: (937) 833-5263



## Police Officer Employment Application

### Applicant Information

*Please read carefully before completing application*

#### Complete your application:

- Incomplete or unreadable applications will not be considered for employment.
- A resume may be attached to the application, but the application must be filled out completely. "SEE RESUME" is not an acceptable response to an application question.
- Make sure you sign your application and verify that all information is complete and accurate.
- Read the "DISQUALIFYING CONDUCT" section of the application.
- Your application is a reflection of you and is the first impression of your work.
- Please submit your completed application for employment with a cover letter, resume and a copy of your Ohio Peace Officer Training Academy (OPOTA) Certificate in one of the following ways:

#### 1. MAIL

- PERRY TOWNSHIP POLICE DEPARTMENT  
ATTN: CHIEF OF POLICE  
3025 JOHNSVILLE-BROOKVILLE RD  
BROOKVILLE OH 45309

#### 2. IN-PERSON

- 3025 JOHNSVILLE-BROOKVILLE RD  
BROOKVILLE OH 45309

#### 3. E-MAIL

- [recruitment@perrytwppolice.org](mailto:recruitment@perrytwppolice.org)  
SUBJECT: PTPD APPLICANT

<b>FOR OFFICE USE ONLY</b>
Received Date/Time: _____
By: _____
Status: _____



# PERRY TOWNSHIP POLICE DEPARTMENT

3025 Johnsville-Brookville Rd  
Brookville OH 45309

Administration: (937) 833-5487 Dispatch: (937) 225-4357 Fax: (937) 833-5263



## Police Officer Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Have you ever worked for this company? YES  NO  If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony? YES  NO

If yes, explain: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_



# PERRY TOWNSHIP POLICE DEPARTMENT

3025 Johnsville-Brookville Rd  
Brookville OH 45309

Administration: (937) 833-5487 Dispatch: (937) 225-4357 Fax: (937) 833-5263



## References

**Please list three professional references.**

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

**Please list three personal references.**

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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



# PERRY TOWNSHIP POLICE DEPARTMENT

3025 Johnsville-Brookville Rd  
Brookville OH 45309

Administration: (937) 833-5487 Dispatch: (937) 225-4357 Fax: (937) 833-5263



## Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

## Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_



# PERRY TOWNSHIP POLICE DEPARTMENT

3025 Johnsville-Brookville Rd  
Brookville OH 45309

Administration: (937) 833-5487 Dispatch: (937) 225-4357 Fax: (937) 833-5263



## Disclaimer and Signature

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

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

*I understand that if I meet all requirements and characteristics as indicated in the job description, hiring may be contingent upon successful completion of drug and alcohol test, and medical examination. These costs will be borne by the Perry Township Police Department.*

*I understand that if employed:*

- I may be required to work additional or fewer hours at other than my current assignment as the needs of the Town require.*
- My employment is subject to complying with those rules, regulations, and conditions as established by management.*
- I will be required to conform to all existing and future policies and procedures of Perry Township Police Department.*
- The Perry Township Police Department reserves the right to change wages, hours, and working conditions, as deemed necessary.*

*I understand that if I am offered employment that I must provide appropriate documentation of my eligibility to work in the United States, in compliance with the Immigration Reform and Control Act. I also understand that if I fail to provide the documentation required by law prior to my first day of employment, I will not be allowed to begin work, and the offer of employment may be rescinded.*

*I understand that no employee is authorized to offer me employment, promise me salary increases, change of position, advancement, or any other advantages except those officially announced by the Perry Township trustees.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Equal Employment Opportunity Statement

The Perry Township Police Department provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, gender, sexual orientation, gender identity or expression, national origin, age, disability, genetic information, marital status, amnesty, or status as a covered veteran in accordance with applicable federal, state and local laws. The Perry Township Police Department complies with applicable state and local laws governing non-discrimination in employment in every location in which the Village has facilities. This policy applies to all terms and conditions of employment, including, but not limited to, hiring, placement, promotion, termination, layoff, recall, and transfer, leaves of absence, compensation, and training.

The Perry Township Police Department expressly prohibits any form of unlawful employee harassment based on race, color, religion, gender, sexual orientation, gender identity or expression, national origin, age, genetic information, disability, or veteran status. Improper interference with the ability of Perry Township employees to perform their expected job duties is absolutely not tolerated.



# PERRY TOWNSHIP POLICE DEPARTMENT

3025 Johnsville-Brookville Rd  
Brookville OH 45309

Administration: (937) 833-5487 Dispatch: (937) 225-4357 Fax: (937) 833-5263



## AUTHORITY FOR RELEASE OF INFORMATION

(Background Investigation Waiver)

To: Concerned Person or Authorized Representative of Any Organization, Institution or Repository of Records

APPLICANT'S NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ LAST 4 DIGITS OF SSN: \_\_\_\_\_

AGENCY REQUESTING BACKGROUND INFORMATION: Perry Township Police Department – Montgomery County, OH

ADDRESS: 3025 Johnsville-Brookville Rd., Brookville, OH 45309

Having made application for certification or employment as a law enforcement officer within the state of Ohio, I hereby authorize for one (1) year, from the date of execution hereof, any authorized representative of a law enforcement agency bearing this release to obtain any information pertaining to my employment, credit history, education, residence, academic achievement, personal information, work performance, background investigations, polygraph examinations, any and all internal affairs investigations or disciplinary records, including any files that are deemed to be confidential and/or sealed.

I also authorize release of any criminal justice records of arrests, citations, detentions, probation and parole records or any police reports or other police records in which I may be named for any reason, including any files that are deemed to be juvenile and confidential. I hereby direct you to release this information upon the request of the bearer, whether in person or by correspondence. I further authorize the bearer to make copies of these records.

This release is executed with the full knowledge and understanding that these records and information are for the official use in fulfilling official responsibilities, which may include sharing the records or information with other law enforcement agencies or the State of Ohio or release to third parties as may be required by Ohio public records laws. I hereby release you, as the custodian of such records, and employer, educational institution, physician, hospital or other repository of medical records, credit bureau or consumer reporting agency, including its officers, employees, and related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. A copy of this form will be as effective as the original.

I hereby authorize the National Records Center, St. Louis, Missouri, or other custodian of my military record to release information or copies from my military personnel and related medical records, including a copy of my DD 214, Report of Separation, or other official documents from the United States Military denoting discharge status or current active military status to:

Employer Immunity from Liability; disclosure of information regarding former or current employee's states: An employer who discloses information about a former or current employee to a prospective employer of the former or current employee upon request of the prospective employer or the former or current employer was knowingly false or violated any civil right of the former or current employee. *Disclosure of information is required unless contrary to state or federal law. Civil penalties may be available for refusal to disclose non-privileged legally obtainable information.*

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Address \_\_\_\_\_

### OATH

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, year \_\_\_\_\_, By \_\_\_\_\_

Signature of Notary Public – State of Ohio

Print, Type, or Stamp Commissioned name of Notary Public

Personally Known  OR Produced Identification

Type of Identification Produced \_\_\_\_\_

Effective: 11/04/2018

**Disqualifying Criminal Conduct**

- **Felonies:** All applicants who have been charged with, or convicted, in any court of a felony or the attempt, conspiracy or solicitation of a felony, including but not limited to, treason, murder, voluntary manslaughter, rape, robbery, arson, burglary, kidnapping and any other felony that involves physical force or the threat of physical force or crimes of dishonesty, will be disqualified.
- **Misdemeanors:** All applicants who have been charged with a crime of violence, convicted of any misdemeanor offense in court within five (5) years of the date of application may be disqualified. All applicants convicted of two (2) or more misdemeanors will be disqualified.
- **Drugs (excluding marijuana):** Any use of any prohibited substance or abuse of a controlled substance may be grounds for rejection. All applicants who have been convicted in court of the possession and/or sale of narcotics, dangerous drugs or hallucinogens or any other controlled substance or drug of abuse that relates to job performance or an attempt, conspiracy or solicitation to commit such a criminal act, will be disqualified.
- **Marijuana:** All applicants who have been convicted in court for the sale of marijuana, or an attempt, conspiracy or solicitation to commit such a criminal act, will be disqualified. All applicants who have been convicted in court for the possession of marijuana may be disqualified. All applicants who have used marijuana during the selection process will be disqualified.
- **Sex Offenses and Acts of Violence:** All applicants who have been convicted in court of a sex offense as defined in Chapter 2907 of the Ohio Revised Code, or an offense of causing or threatening bodily harm as defined in Chapter 2903 of the Ohio Revised Code, or an attempt, conspiracy or solicitation to commit such a criminal act, will be disqualified.
- **Guns, Concealed Weapons, and Dangerous Ordinance:** Any applicants who have been convicted in any federal, state or municipal court of violating any gun control ordinance, carrying any concealed weapon, or possession of any dangerous ordinance, may be disqualified. Any attempt to violate any law, statute, or regulation to the above may be grounds for rejection.
- **Traffic Offenses:** All applicants who have been convicted in the last five (5) years in any court of competent jurisdiction of any of the following offenses will be disqualified: driving while impaired by drugs or alcohol, vehicular homicide, leaving the scene, reckless driving, or revocation or suspension of driving privileges on two (2) or more occasions. Any applicant currently under suspension or revocation of driving privileges will be disqualified. Any applicant with (6) or more points on their current record may be disqualified. No applicant will be eligible for appointment as a sworn employee unless that person possesses a valid Ohio driver's license.
- Any applicant who is currently a member of any organization, or that routinely associates with members of organizations, that advocates crime or the violent overthrow of the United States government will be disqualified.
- All applicants who have made false statements regarding any material matter during the selection process or have omitted any requested material information on the questionnaire, or who have cheated during any portion of the selection process will be disqualified.

## **Disqualifying Employment-Related Conduct**

- All applicants who within five (5) years of the date of application have been discharged from previous employment for insubordination, serious misconduct at the job, unexcused absenteeism, or tardiness, may be disqualified. All applicants who within the past five (5) years have been suspended, reprimanded or disciplined for insubordination, misconduct on the job, unexcused absenteeism, tardiness, inefficiency, or neglect of duty on two (2) or more occasions, may be disqualified.
- Pilferage or thefts of cash, goods, or services from a place of employment may be cause for disqualification.

## **Miscellaneous Disqualifying Conduct**

- All applicants who have failed to obey or honor any judgments entered by a court of record, including, but not limited to, alimony or support payments, or have failed to pay any fine imposed by a court of record, may be disqualified.
- All applicants who have been other than honorably discharged from the United States military service for reasons that are job-related may be disqualified.
- All applicants who have made any intentional false alarm to any police agency may be disqualified.
- All applicants who admit a current pattern of alcohol, drug abuse or illegal gambling within the past five (5) years will be disqualified (i.e., conduct that is predictable, repetitive or continuing activity).
- Any applicant who has paid or accepted a bribe or favor to cover or hide any criminal offense, or acted in any manner to prevent discovery and/or apprehension of any criminal by any duly constituted law enforcement agency, or was involved in any plan or attempt to accomplish any of the above, may be disqualified.
- All applicants with an unstable work history may be disqualified i.e. including short terms of employment over the applicant's employment history; has a history of employment in an illegal occupation.
- All applicants who have demonstrated a failure to pay just debts. Applicants will be considered on a case-by-case basis due to the number of variables involved. Factors that will be considered include type and number of debts, repeated occurrences of issuing bad checks without sufficient funds, reasons for bad credit, extenuating circumstances, and the potential for the credit-related problems impacting the applicant's judgment and integrity.
- All applicants who admit during the selection process to committing any of these offenses listed above may be disqualified as though they had been convicted.

- Applicants who cannot pass the entry exam.
- Applicants who cannot pass the background check.
- Applicants who cannot pass the PERS physical exam.
- Applicants who cannot pass a drug screen.
- Applicants who cannot pass a physical agility exam, if administered.