Employment Application Clinton Township Division of Police

An Equal Opportunity Employer

| Date of Application: | | | | | | |
|--------------------------------------|----------------------|--------------------------|---------------|--------------|-------------------------|---|
| Hours Available to W | /ork: — Part-time | Full or part-time | ○ Temp | porary | Clinton Townshi 3820 | p Division of Police O Cleveland Avenue Columbus, OH USA |
| Name: | | | | | PI | 43224 hone: 614.471.1480 |
| Address: | | | | | www.clintor | Fax: ntwp-columbus.org |
| State: | | | | | | |
| Zip/Postal Code: | | | | | | |
| Home Phone: | | | | | | |
| Cell Phone: | | | | | | |
| Positions Applied fo | r: | | | | | |
| Rate of Pay Expected | ı | | | | | |
| | | | | | | |
| | | | | | | |
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| | | | | | | |
| When available to be | egin work? | | | | | |
| | | | | | | |
| Education | | | | | | |
| Type of Scho | ool | Name of School and Co | mplete Mai | ling Address | No. Years Completed | Major or Degree |
| Grammar | | | | | | |
| High School | | | | | | |
| College | | | | | | |
| Trade/Technical | | | | | | |
| Have you ever k If yes, please ex | | of a crime: yes ı | no | | | |
| | | | | | | |
| Do you have a d | rivers license? | ○ yes ○ no | | | | |
| State of issue: | | | | | | |
| Have you had a | ny accidents in | the past 3 years? | ○ yes | Ono | How many? | |
| Do you had any | moving violati | ons in the past 3 years? | ○ yes | Ono | How many? | |

Previous Employment (list up to 3)

| 1. | | | | | | |
|--|---|--|--|--|--|--|
| Name of Employer: | | | | | | |
| Name of last superv | risor: | | | | | |
| Dates of employme | nt: | | | | | |
| From: | То: | | | | | |
| Salary: | | | | | | |
| From: | То: | | | | | |
| Complete Address: | | | | | | |
| Phone #: | | | | | | |
| Last job title: | | | | | | |
| Reason for Leaving | (be specific): | | | | | |
| | | | | | | |
| List the jobs you he | ld, duties performed, skills used or learned, advancements, or promotions while you worked at this company: | | | | | |
| May we contact you | ır employer: O yes O no | | | | | |
| 2. | | | | | | |
| Name of Employer: | | | | | | |
| Name of last superv | visor: | | | | | |
| Dates of employme | nt: | | | | | |
| From: | То: | | | | | |
| Salary: | | | | | | |
| From: | То: | | | | | |
| Complete Address: | | | | | | |
| Phone #: | | | | | | |
| Last job title: | | | | | | |
| Reason for Leaving | (be specific): | | | | | |
| | | | | | | |
| List the jobs you he | ld, duties performed, skills used or learned, advancements, or promotions while you worked at this company: | | | | | |
| | | | | | | |
| May we contact your employer: yes no | | | | | | |

| 3. | | | | |
|---------------------------|-----------------------|--------------------------|----------------|--|
| Name of Employer: | | | | |
| Name of last superviso | or: | | | |
| Dates of employment: | | | | |
| From: | То: | | | |
| Salary: | | | | |
| From: | То: | | | |
| Complete Address: | | | | |
| Phone #: | | | | |
| Last job title: | | | | |
| Reason for Leaving (be | specific): | | | |
| | - | | | |
| List the jobs you held, | duties performed, ski | lls used or learned, adv | ancements, | or promotions while you worked at this company: |
| | | | | |
| | | | | |
| May we contact your e | mployer: () yes (| no | | |
| | | | | |
| Skills: | | | | |
| Typing: | | | | |
| Computer: OPC | Mac Both | 1 | | |
| Applications (list all th | at apply): | | | |
| Other Skills: | | | | |
| | | | | |
| | | | | |
| | | | . • | |
| | 'eterences o | ther than rela | itives a | nd previous employers |
| Name | | | | |
| Position | | | | |
| Company | | | | |
| Telephone | | | | |
| Use this space to add a | ny additional informa | tion necessary to descr | ribe your full | l qualifications for the position which you are applying |
| | | | | |
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