

2023 POLICE OFFICER
ENTRY LEVEL ANNOUNCEMENT
CITY OF EUCLID

By order of: Euclid Civil Service Commission

The City of Euclid Police Department will be accepting applications for Entry Level Police Officer throughout the year of 2023. NOTE: This announcement is for candidates who are not current police officers. Current police officers with at least 1 year full time (or 2 years part-time) experience can apply for Lateral Transfer. The written test for the entry level examination will be conducted by the National Testing Network by appointment.

MUST BE WILLING TO WORK IRREGULAR HOURS AND DAYS, ENFORCE LAW REGARDLESS OF PERSONAL ETHICS OR FEELINGS, WEAR THE UNIFORM FURNISHED BY THE DEPARTMENT AND COMPLY WITH DEPARTMENTAL GROOMING STANDARDS, CARRY A FIREARM AND WORK UNDER ADVERSE OR POTENTIALLY HAZARDOUS CONDITIONS.

MUST ALSO BE OF GOOD CHARACTER, AND FREE FROM ANY PHYSICAL, EMOTIONAL, OR MENTAL CONDITION WHICH WOULD PRECLUDE ONE FROM SUCCESSFULLY PERFORMING THE ESSENTIAL FUNCTIONS OF THE JOB; MENTALLY AND PHYSICALLY CAPABLE OF TAKING THE LIFE OF ANOTHER IF JUSTIFIED AND NECESSARY IN TERMS OF EXISTING LAWS, POLICIES, AND PROCEDURES; AND HAVE SKILL TO READ AND INTERPRET COMPLEX TECHNICAL DOCUMENTS WRITTEN IN ENGLISH, SUCH AS LAWS, ORDINANCES, COURT DECISIONS, AND TRAINING BULLETINS.

Application Requirements:

OPOTA Police certification is NOT required to apply.

Qualified applicants must:

- Be a citizen of the United States
- Be a high school graduate (or equivalent)
- Be at least twenty-one (21) years of age on date of appointment
- Be in possession of a valid motor vehicle operator's license
- Have NO felony convictions (or convictions from another state that would constitute a felony in Ohio)

Candidates must complete an application for employment to the City of Euclid which can be found at www.euclidpd.org or www.cityofeuclid.com. Candidates must also register for the written examination through the National Testing Network website: www.nationaltestingnetwork.com. The cost of the written examination is \$55 payable to the National Testing Network. There is no additional fee for application to the City of Euclid.

The written test will consist of the Law Enforcement – Frontline National Exam and the Public Safety Self-Assessment exam. There are two local testing centers at Tri-C community colleges. The first local testing center is at Cuyahoga Community College at their Campus Public Safety Training Center, 7029 Homewood Ave., Parma Heights, Ohio 44130. The second location is at Cleveland - Cuyahoga Community College - Law Enforcement, 3409 Woodland Ave (Room 139) Advanced Technology Training Center, Cleveland OH 44115. Testing can also be done virtually online or at any Testing Center sponsored by NTN.

DO NOT RETURN THIS SHEET.

CITY OF EUCLID, OHIO
EMPLOYMENT APPLICATION - POLICE OFFICER

The Civil Service Commission has authorized the following credits to add to your test score. The maximum extra points that can be earned is 20%. Extra points will only be added if a candidate achieves a passing score of 70% or higher on the written exam:

An applicant for competitive entrance examination for the Police Department who holds either a current certification from the State of Ohio Peace Officer Training (OPOTA – Basic Peace Officer Certification) showing satisfactory completion (must be currently certified, hold a certificate of completion, or be eligible for a refresher) or Bachelor’s Degree in any field from an accredited college in the United States of America, will be credited with an additional ten percent (10%) of the applicant’s combined basic score for all parts of the entrance examination, as weighted by the Civil Service Commission, provided the applicant has first completed all parts of said examination and has attained the minimum qualifying score of 70% or higher.

An applicant for this entrance examination who has had active duty (1 or more years of active duty) in the United States Military Forces evidenced by an honorable discharge or certificate of completion thereof, shall be credited with an additional ten percent (10%) of their score on the written examination, provided they have first attained the minimum qualifying score of 70% on the written examination.

An applicant for this entrance examination who has served or is serving in the United States Military in a reserve status, with less than 1 year of active duty service, evidenced by an honorable discharge (DD-214), or an Associate’s Degree in any field from an accredited college in the United States of America, shall be credited with an additional five percent (5%) of their score.

If an applicant is currently serving in the United States Military and can prove either of the above categories through official documentation (in good standing), they will be awarded the appropriate percentage points. Candidates will not be awarded points for BOTH an active duty status and a reserve status, they will receive the highest point category that they qualify for.

Applications will be available starting on January 10th, 2023. Applications will be available throughout the year of 2023. They will be available online at (www.euclidpd.org OR www.cityofeuclid.com) or they can be picked up at Euclid Police Station (545 East 222nd Street, Euclid) anytime. Applications can be dropped off at the police station or emailed to joinepd@cityofeuclid.com. The application packet contains information on occupational requirements, disqualifiers, and instructions on completing the application.

The Euclid Police Department offers a salary range of \$65,584 – \$77,653 plus excellent benefits (including \$2,300 initial uniform allowance and \$1,750 annual uniform maintenance not reflected in base pay, 16 paid holidays, and Longevity bonus 2.5% after 5 years.)

The Euclid Police Department offers a number of career opportunities that include patrol, detectives, and narcotics & vice unit, regional tactical team assignment, K-9-unit, task force assignments, traffic division, and community policing.

DO NOT RETURN THIS SHEET.

CITY OF EUCLID, OHIO
EMPLOYMENT APPLICATION - POLICE OFFICER

Hiring Process

Candidates shall be subject to an investigation of personal history, a thorough background investigation, a polygraph examination, and personal interviews. Following a job offer, if any, applicants shall be required to successfully complete comprehensive medical and psychological examinations. The medical examination will include job-related medical tests, examinations and review of medical history to determine each applicant's condition and fitness to perform the tasks demanded by the position, and to document eligibility for the Ohio Police and Fire Pension Fund. These will include without limitation, medical fitness, psychological exam, physical fitness, stress and capacity testing, hearing and vision examinations.

A Physical Fitness Test (based on the Tri-C Test) will be administered at the police department prior to appointment. If you possess a valid Tri-C Certificate it will not be required.

RETURN OF APPLICATION MATERIALS CHECKLIST

DIRECTIONS

USE THIS CHECKLIST TO ENSURE YOU RETURN ALL REQUIRED ITEMS TO THE CITY OF EUCLID POLICE DEPARTMENT, 545 EAST 222ND STREET, EUCLID, OHIO, 44123.

IT IS NOT NECESSARY THAT THIS FORM BE RETURNED. IT IS PROVIDED SOLELY FOR YOUR CONVENIENCE.

- Employment Application** (Further Detailed Information Will Be Required of Applicants Selected for Further Consideration After Initial Screening)
- Document Certification Form** (With Attachments)
- Entry Police Officer Affidavit**
- Resume**
- Equal Employment Opportunity (EEO) Survey (Optional)**
- Copy of Peace Officer Certification (If Completed/Not Required)**
- Copy of Driver's License**
- Any other Certifications or Documents**

Any Civil Service rule inquiry should be directed to Carrie Insana, Administrative Secretary for the Civil Service Commission at the City of Euclid (Phone: 216-289-2746 or email: cinsana@cityofeuclid.com.) Inquiries regarding these application instructions should be directed to joinepd@cityofeuclid.com

EUCLID IS AN EQUAL OPPORTUNITY EMPLOYER

All decisions regarding recruiting, hiring, promotion, assignment, training, termination, and other terms and conditions of employment will be made on a non-discriminatory basis, and without regard to race, color, national origin, ancestry, sex, sexual orientation, gender identity or expression, religion, age, pregnancy, disability, work-related injury, covered veteran status, political ideology, genetic information, marital status, or any other factor that the law protects from employment discrimination.

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**CITY OF EUCLID, OHIO
EMPLOYMENT APPLICATION - POLICE OFFICER**

TO ALL CANDIDATES,

Thank you for your interest in employment with the Euclid Police Department. We look forward to meeting many of you as the selection process moves forward.

This document provides additional information regarding the testing process and includes a brief application for employment. Those selected for additional screening after initial review will be required to complete a questionnaire that will include significantly greater detail.

The application must be returned to the Euclid Police Department in order for your written exam score to be considered. If you prefer, you can email the application to joinepd@cityofeuclid.com. If you choose this option, maintain the original documents; you will be required to submit them if you are selected to continue the process after initial screening. Please note that the attached affidavit must be notarized.

All candidates will be required to submit a copy of their high school diploma or GED certificate and a copy of their driver's license.

Thank you again for your interest and efforts thus far.

Good luck during the upcoming selection process.

Captain Mike Janson
Operations Division
Euclid Police Department

DO NOT RETURN THIS SHEET.

**CITY OF EUCLID, OHIO
EMPLOYMENT APPLICATION - POLICE OFFICER**

ADDITIONAL INFORMATION

ANY OF THE FOLLOWING WILL DISQUALIFY A CANDIDATE FROM CONSIDERATION:

- ANY FELONY CONVICTION (OR A CONVICTION FROM ANOTHER STATE THAT WOULD CONSTITUTE A FELONY IN OHIO)
- CURRENTLY ON PROBATION OR PAROLE WITH ANY CITY, COUNTY, STATE OR FEDERAL AGENCY FOR ANY OFFENSE.
- ANY CONVICTION OF OFFENSES INVOLVING DOMESTIC VIOLENCE.
- REFUSAL TO SUBMIT TO A POLYGRAPH EXAMINATION.
- CURRENTLY UNDER ACTIVE INVESTIGATION BY FEDERAL, STATE, COUNTY OR LOCAL AUTHORITIES OR OTHER LAW ENFORCEMENT AGENCIES.
- FAILURE OR REFUSAL TO SUCCESSFULLY COMPLETE ANY AND ALL PORTIONS OF THE HIRING PROCESS.
- FAILURE TO REPORT MATERIAL CHANGES TO STATUS (ARREST, ETC) DURING PENDING CANDIDACY
- WILLFUL MISREPRESENTATION, OMISSION, OR FALSIFICATION, EITHER ORAL OR WRITTEN

ANY OF THE FOLLOWING MAY CAUSE REMOVAL OF THE APPLICANT FROM THE HIRING PROCESS:

- CONVICTION OF ANY CRIMES NOT LISTED HEREIN.
- TERMINATION FOR CAUSE FROM ANOTHER PUBLIC SAFETY AGENCY.
- RELEASE FROM ANOTHER PUBLIC SAFETY AGENCY DURING PROBATIONARY PERIOD OR RESIGNATION IN LIEU OF TERMINATION.
- DRIVING RECORD THAT INDICATES A PATTERN OF UNSAFE DRIVING.
- DISCIPLINARY HISTORY INDICATING A PATTERN OF NEGATIVE WORK PERFORMANCE AT PAST EMPLOYERS.
- UNDETECTED CRIMINAL ACTS.

IF DURING THE HIRING PROCESS ONE OR MORE OF THE ABOVE LISTED FACTORS BECOMES APPLICABLE TO AN APPLICANT, SUCH AS THE APPLICANT IS ARRESTED, TAKEN INTO CUSTODY, DETAINED FOR INVESTIGATION, CHARGED WITH A CRIME OR DECLARES BANKRUPTCY, THE APPLICANT MUST IMMEDIATELY NOTIFY THE RECRUITING CONTACT OR BACKGROUND INVESTIGATOR CONDUCTING THE APPLICANT'S BACKGROUND INVESTIGATION.

APPLICANTS MUST ANSWER TRUTHFULLY AND FULLY ALL QUESTIONS ASKED OF THEM. ANY MISREPRESENTATION OR OMISSION OF ANY MATERIAL FACT ON THE APPLICATION; DURING THE BACKGROUND INVESTIGATION; OR IN ANY PHASE OF THE SELECTION PROCESS SHALL DISQUALIFY THE APPLICANT. IF AN INVESTIGATION DISCLOSES A WILLFUL MISREPRESENTATION, OMISSION, OR FALSIFICATION, THE APPLICATION WILL BE REJECTED.

DO NOT RETURN THIS SHEET.

CITY OF EUCLID, OHIO
EMPLOYMENT APPLICATION - POLICE OFFICER

IF YOU MEET THE MINIMUM QUALIFICATIONS, CAREFULLY READ AND COMPLY WITH THE FOLLOWING INSTRUCTIONS:

READ AND FOLLOW ALL INSTRUCTIONS ON EACH PAGE.

PRINT OR TYPE ALL RESPONSES CLEARLY AND LEGIBLY.

COMPLETE ALL INFORMATION REQUESTED IN THE APPLICATION PACKET. MAKE SURE RESPONSES ARE AS COMPLETE AND DETAILED AS POSSIBLE. USE EXTRA PAPER AS NEEDED. INCLUDE YOUR NAME, THE DATE, AND THE POSITION YOU ARE APPLYING FOR ON ALL EXTRA PAGES. THE INFORMATION YOU PROVIDE WILL HELP US DETERMINE THE EXTENT OF YOUR QUALIFICATIONS.

ATTACH YOUR RÉSUMÉ AND ANY OTHER INFORMATION YOU THINK RELEVANT TO OUR CONSIDERATION OF YOUR APPLICATION. **WRITE YOUR INITIALS AT THE BOTTOM RIGHT CORNER OF ANY DOCUMENT YOU ATTACH.**

HAVE PAGE 6 OF THE APPLICATION NOTARIZED.

ALL INFORMATION INCLUDED WITH THE APPLICATION PACKET IS SUBJECT TO VERIFICATION THROUGH INTERVIEW(S), BACKGROUND INVESTIGATION, REFERENCE CHECK, AND POLYGRAPH EXAMINATION. **SUBMISSION OF FALSE INFORMATION WILL RESULT IN DISQUALIFICATION FROM THE APPLICATION PROCESS, ELIGIBILITY LIST, APPOINTMENT, AND/OR EMPLOYMENT IF DISCOVERY OF FALSIFICATION OCCURS AFTER APPOINTMENT.**

RETURN (IN PERSON OR MAIL) ALL APPLICATION MATERIALS PRIOR TO YOUR SCHEDULED WRITTEN EXAMINATION DATE TO THE CITY OF EUCLID POLICE DEPARTMENT (545 EAST 222ND STREET, EUCLID, OHIO, 44123) OR EMAIL TO joinepd@cityofeuclid.com. DOCUMENTS MAY BE SCANNED AND SUBMITTED BY EMAIL (PLEASE RETAIN ORIGINAL DOCUMENTS).

IF YOU CHANGE RESIDENCE ADDRESS, TELEPHONE NUMBER, OR EMAIL ADDRESS ANY STAGE OF THE APPLICATION PROCESS YOU MUST IMMEDIATELY NOTIFY THE EUCLID POLICE DEPARTMENT. THE EUCLID POLICE DEPARTMENT ASSUMES NO RESPONSIBILITY FOR LOCATING CANDIDATES WHO HAVE CHANGED THEIR CONTACT INFORMATION.

INQUIRIES OR ASSISTANCE REGARDING THESE INSTRUCTIONS OR ANY OTHER MATTER RAISED HEREIN SHOULD BE DIRECTED TO joinepd@cityofeuclid.com .

DO NOT RETURN THIS SHEET.

CITY OF EUCLID, OHIO
EMPLOYMENT APPLICATION - POLICE OFFICER
APPLICATION FOR EMPLOYMENT

EQUAL EMPLOYMENT POLICY: IT IS THE POLICY OF THE CITY OF EUCLID TO SEEK AND EMPLOY THE BEST QUALIFIED INDIVIDUALS FOR ALL POSITIONS, TO PROVIDE EQUAL OPPORTUNITY FOR THE ADVANCEMENT OF EMPLOYEES, INCLUDING UPGRADING, PROMOTION AND TRAINING, AND TO ADMINISTER THESE ACTIVITIES IN A MANNER WHICH WILL NOT DISCRIMINATE AGAINST ANY PERSON BECAUSE OF RACE, RELIGION, SEX, AGE, DISABILITY, COLOR OR NATIONAL ORIGIN.

PERSONAL INFORMATION			
LAST NAME	FIRST NAME	MIDDLE INIT.	
HOME ADDRESS	CITY	STATE	ZIP
HOME PHONE	OTHER PHONE	EMAIL ADDRESS	

POSITION APPLIED FOR		
DEPARTMENT: POLICE	DEPT. NUMBER: 4243	POSITION TITLE: POLICE OFFICER

EDUCATION			
NAME OF SCHOOL AND LOCATION	CIRCLE LAST YEAR COMPLETED	TYPE OF DEGREE OR DIPLOMA	MAJOR AREA OF STUDY
COLLEGE	1 2 3 4 5 6 GRADUATE? Y N		
HIGH SCHOOL	9 10 11 12 GRADUATE? Y N		

CONVICTION INFORMATION			
CONVICTIONS WILL NOT NECESSARILY BAR AN APPLICANT FROM EMPLOYMENT.			
HAVE YOU EVER BEEN CONVICTED OF A CRIME OTHER THAN A MINOR TRAFFIC VIOLATION? <input type="checkbox"/> YES <input type="checkbox"/> NO			
(IF YES, COMPLETE BELOW)			
DATE	REASON	DISPOSITION OF CASE	PLACE (CITY, STATE)

EMPLOYMENT			
PRESENT EMPLOYER		ADDRESS	
DATE STARTED	STARTING PAY	ENDING PAY	PHONE NUMBER
DUTIES PERFORMED			
NAME, TITLE, AND PHONE NUMBER OF IMMEDIATE SUPERVISOR			

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT FALSE STATEMENTS OR OMISSIONS ON THIS APPLICATION ARE GROUNDS FOR IMMEDIATE DISQUALIFICATION OR DISMISSAL UPON DISCOVERY THEREOF. I AUTHORIZE ALL PERSONS, SCHOOLS, COMPANIES, AND GOVERNMENT AGENCIES TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY BACKGROUND, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM LIABILITIES FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING THE SAME TO YOU. I UNDERSTAND THAT I MAY BE REQUIRED TO UNDERGO MEDICAL EXAMINATIONS BEFORE BEGINNING WORK TO DETERMINE MY ABILITY TO PERFORM THE DUTIES OF THE POSITION APPLIED FOR AND FAILURE TO UNDERGO SUCH MEDICAL EXAMINATIONS SHALL BE GROUNDS FOR DISQUALIFICATION.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO ABIDE BY THE CITY OF EUCLID'S ORDINANCES, AND THE POLICIES, PROCEDURES, RULES, AND REGULATIONS OF THE EUCLID POLICE DEPARTMENT. I UNDERSTAND THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED WITH OR WITHOUT CAUSE AND WITH OR WITHOUT PRIOR NOTICE, AT ANY TIME, AT THE OPTION OF EITHER THE CITY OR MYSELF. I UNDERSTAND THAT NO MANAGER OR SUPERVISOR OTHER THAN THE MAYOR HAS ANY AUTHORITY TO EMPLOY PERSONS ON BEHALF OF THE CITY, BUT NOT CONTRARY TO THE FOREGOING.

I HEREBY AUTHORIZE THE CITY OF EUCLID TO RELEASE THIS APPLICATION TO PRIVATE OR PUBLIC EMPLOYERS SEEKING TO FILL JOB OPENINGS.

SIGNATURE

DATE

DOCUMENT CERTIFICATION FORM

Complete and return this form with your application to the City of Euclid Police Department,

CITY OF EUCLID, OHIO
EMPLOYMENT APPLICATION - POLICE OFFICER
 545 East 222nd Street, Euclid, Ohio, 44123.

Application must be submitted prior to scheduled written examination date

PRINT YOUR NAME	DATE OF BIRTH	SOCIAL SECURITY NUMBER	
NAME OF HIGH SCHOOL	DATE OF DIPLOMA	IF NO DIPLOMA, DATE OF G.E.D.	COPY OF DIPLOMA OR G.E.D. ATTACHED? <input type="checkbox"/> YES <input type="checkbox"/> NO
OHIO DRIVER'S LICENSE NUMBER?	IF OUT-OF-STATE DRIVER'S LICENSE, NUMBER AND ISSUING STATE		COPY OF LICENSE ATTACHED? <input type="checkbox"/> YES <input type="checkbox"/> NO
OPOA TRAINING CERTIFICATE NUMBER (IF APPLICABLE)/ ACADEMY ATTENDED	CERTIFICATE DATE (MM/YY)/ OR EXPECTED GRADUATION DATE		COPY OF CERTIFICATE ATTACHED? <input type="checkbox"/> YES <input type="checkbox"/> NO
ASSOCIATE OR BACHELOR DEGREE (IF APPLICABLE)	SCHOOL NAME, DATE OF DEGREE:		COPY OF DEGREE ATTACHED? <input type="checkbox"/> YES <input type="checkbox"/> NO
MILITARY DISCHARGE DOCUMENTATION (DD214) (IF APPLICABLE)	BRANCH OF SERVICE, DATE OF DISCHARGE;		COPY OF DD214 ATTACHED? <input type="checkbox"/> YES <input type="checkbox"/> NO

I CERTIFY THAT THE STATEMENTS CONTAINED HEREIN ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT FALSE STATEMENTS OR OMISSIONS ON THIS APPLICATION ARE GROUNDS FOR IMMEDIATE DISQUALIFICATION OR DISMISSAL UPON DISCOVERY THEREOF NO MATTER WHEN THE FALSIFICATION OR OMISSION IS DISCOVERED. I FURTHER ACKNOWLEDGE THAT ANY FALSEHOODS MAY SUBJECT ME TO PROSECUTION UNDER OHIO REVISED CODE SECTION 2921.13.

I AUTHORIZE ALL PERSONS, SCHOOLS, COMPANIES, AND GOVERNMENT AGENCIES TO GIVE YOU ANY AND ALL INFORMATION, PERSONAL OR OTHERWISE, THAT THEY MAY HAVE, AND I RELEASE ALL PARTIES FROM LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SUCH INFORMATION.

I UNDERSTAND THAT I MAY BE REQUIRED TO UNDERGO FURTHER EXAMINATIONS TO INCLUDE, BUT NOT LIMITED TO, MEDICAL AND PSYCHOLOGICAL EXAMINATIONS BEFORE BEGINNING WORK TO DETERMINE MY ABILITY TO PERFORM THE DUTIES OF THE POSITION APPLIED FOR AND FAILURE TO UNDERGO SUCH EXAMINATIONS SHALL BE GROUNDS FOR DISQUALIFICATION.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO ABIDE BY THE CITY OF EUCLID'S ORDINANCES, AND THE POLICIES, PROCEDURES, RULES, AND REGULATIONS OF THE EUCLID POLICE DEPARTMENT. I UNDERSTAND THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED WITH OR WITHOUT CAUSE AND WITH OR WITHOUT PRIOR NOTICE, AT ANY TIME, AT THE OPTION OF EITHER THE CITY OR ME. I UNDERSTAND THAT NO MANAGER OR SUPERVISOR OTHER THAN THE MAYOR HAS ANY AUTHORITY TO EMPLOY PERSONS ON BEHALF OF THE CITY, BUT NOT CONTRARY TO THE FOREGOING.

MY SIGNATURE BELOW INDICATES MY ACKNOWLEDGEMENT THAT THE ABOVE STATEMENTS APPLY EQUALLY TO ALL PORTIONS OF THIS APPLICATION AND TO ANY ADDITIONAL DOCUMENTS I HAVE ATTACHED, TO ALL OF WHICH I HAVE AFFIXED MY INITIALS AT THE BOTTOM RIGHT CORNER.

SIGNATURE

DATE

CITY OF EUCLID, OHIO
EMPLOYMENT APPLICATION - POLICE OFFICER
AFFIDAVIT

DIRECTIONS: READ EACH QUESTION BELOW CAREFULLY. MARK THE APPROPRIATE BOX (YES/NO) WITH AN "X".

ANY OMISSION ON THIS PAGE, OR ANSWERING "YES" TO ANY QUESTION MAY RESULT IN YOUR APPLICATION BEING REMOVED FROM FURTHER CONSIDERATION.

<u>QUESTION</u>	<u>YES</u>	<u>NO</u>
HAVE YOU EVER BEEN CONVICTED OF A FELONY?	<input type="checkbox"/>	<input type="checkbox"/>
HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR RELATED TO SEX CRIMES, CRIMES AGAINST PERSONS, FRAUD, OR MORAL TURPITUDE?	<input type="checkbox"/>	<input type="checkbox"/>
HAVE YOU EVER HAD A DOMESTIC VIOLENCE RELATED ARREST, CONVICTION, DIVERSION, OR EXPUNGEMENT?	<input type="checkbox"/>	<input type="checkbox"/>
HAVE YOU HAD ANY MISDEMEANOR CONVICTIONS, DIVERSIONS, OR EXPUNGEMENTS WITHIN THE LAST THREE (3) YEARS?	<input type="checkbox"/>	<input type="checkbox"/>
HAVE YOU HAD ANY DUI CONVICTIONS, DIVERSIONS, EXPUNGEMENTS, OR BREATH TEST REFUSALS IN THE PAST FIVE (5) YEARS?	<input type="checkbox"/>	<input type="checkbox"/>
HAVE YOU BEEN CONVICTED OF DUI MORE THAN ONCE?	<input type="checkbox"/>	<input type="checkbox"/>
HAS YOUR DRIVER'S LICENSE BEEN SUSPENDED IN THE PAST FIVE (5) YEARS (NOT INCLUDING SUSPENSIONS UNDER THE FINANCIAL RESPONSIBILITY ACT)?	<input type="checkbox"/>	<input type="checkbox"/>
HAVE YOU EVER ILLEGALLY SOLD, DELIVERED, DISTRIBUTED, OR MANUFACTURED DRUGS?	<input type="checkbox"/>	<input type="checkbox"/>
HAVE YOU EVER USED ILLEGAL NARCOTICS OR ABUSED PRESCRIPTION DRUGS AFTER HAVING BEEN EMPLOYED BY ANY LAW ENFORCEMENT AGENCY OR IN A LAW ENFORCEMENT CAPACITY?	<input type="checkbox"/>	<input type="checkbox"/>

MY SIGNATURE BELOW CONSTITUTES MY CERTIFICATION THAT MY RESPONSES ARE TRUE AND COMPLETE. MY SIGNATURE FURTHER CONSTITUTES MY AUTHORIZATION FOR THE CITY OF EUCLID TO INVESTIGATE THE FACTS SUBMITTED AND FOR THOSE WITH RELEVANT INFORMATION TO RELEASE SUCH INFORMATION TO THE CITY OF EUCLID.

I FURTHER UNDERSTAND AND AGREE THAT SHOULD ANY INVESTIGATION DISCLOSE ANY SUCH MISREPRESENTATION, FALSIFICATION, OMISSION, OR CONCEALMENT OF FACT, MY APPLICATION MAY BE REJECTED AND MY NAME REMOVED FOR FURTHER CONSIDERATION FROM THE ELIGIBILITY LIST, OR I MAY BE TERMINATED FROM EMPLOYMENT WITH THE CITY OF EUCLID POLICE DEPARTMENT NO MATTER WHEN THE FALSIFICATION OR OMISSION IS DISCOVERED.

I FURTHER CERTIFY THAT THE EMAIL ADDRESS PROVIDED ON THE APPLICATION FOR EMPLOYMENT IS UNDER MY SOLE CONTROL, AND ANY COMMUNICATION TO THIS EMAIL ADDRESS IS PRESUMED RECEIVED BY ME, AND ANY EMAIL RECEIVED FROM THIS ADDRESS IS PRESUMED FROM ME.

SIGNATURE

DATE

SWORN TO BEFORE ME AND SUBSCRIBED IN MY PRESENCE THIS _____ DAY OF _____, _____

NOTARY PUBLIC



**CITY OF EUCLID, OHIO
EMPLOYMENT APPLICATION - POLICE OFFICER**

CITY OF EUCLID

EQUAL EMPLOYMENT OPPORTUNITY

Responses to these questions are **OPTIONAL**.

Choose to Complete

Choose not to Complete

These questions are included to assist our equal employment opportunity efforts. Providing this information is **VOLUNTARY** and will in no way affect the processing of your application or your being considered for employment. We will process your responses to these confidential questions separately. Responses will be used for statistical purposes only.

Position Applied For _____ Date _____

1. **OPTIONAL:** Please indicate your sex: ___ Male ___ Female

2. **OPTIONAL:** Please select your age group:

___ Under 18 ___ 18-25 ___ 26-39 ___ 40-54 ___ 55-69 ___ 70+

3. **OPTIONAL:** Please indicate your Race/Ethnicity:

___ **WHITE:** All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.

___ **BLACK or AFRICAN AMERICAN:** All persons having origins in any of the Black racial groups of Africa.

___ **HISPANIC or LATINO:** All persons of Mexican, Puerto Rican, Cuban, Central or South America, or other Spanish culture or origin, regardless of race.

___ **ASIAN:** All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent (for example, China, India, Japan and Korea).

___ **NATIVE HAWAIIAN or PACIFIC ISLANDER:** All persons having origins in any of the original peoples of the Hawaiian Islands and Pacific Islands (for example, Hawaii, Philippine Islands and Samoa).

___ **AMERICAN INDIAN or ALASKAN NATIVE:** All persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.

___ **OTHER:** Please self define _____

4. **OPTIONAL:** Are you an individual with a physical or mental impairment which substantially limits one or more of your major life activities? ___ Yes ___ No

5. **OPTIONAL:** Are you a veteran? ___ Yes ___ No

6. **OPTIONAL:** If you answered Yes to the previous question, please indicate if one or more of the following apply.

___ **MILITARY STATUS:** The performance of duty in a uniformed service, to include active duty, active duty for training, initial active duty for training, inactive duty for training, full-time National Guard duty.

___ **DISABLED VETERAN:** A person whose discharge or release from active duty was for a disability incurred or aggravated in the line of duty.

___ **DESERT STORM/SHIELD VETERAN:** A person whose active duty was performed after August 2, 1990, in the Persian Gulf Conflict.

___ **VIETNAM ERA VETERAN:** A person served on active duty for a period of more than 180 days, any part of which occurred between August 5, 1964, and May 7, 1975.