



**General Information**

Subjects of special study, interest or research work \_\_\_\_\_

Special skills \_\_\_\_\_

Off-duty activities: (hobbies, sports, civic, etc.) \_\_\_\_\_

U.S. Military Service Branch \_\_\_\_\_ Rank \_\_\_\_\_ Years of service: From \_\_\_\_\_ To \_\_\_\_\_

Current status in National Guard or Reserves \_\_\_\_\_

**Employment History**

List below the last three former employers, starting with the most recent one first

Date Month and Year	Name, Phone number and Address of Employer	Salary	Title	Duties and Responsibilities	Reason for Leaving
From					
To					
From					
To					
From					
To					

**References:**

Give the names of three persons, other than former employers or relatives, whom you have known for at least one year.

Name	Address and Phone number	Business/Occupation	Years Acquainted
1)			
2)			
3)			

I certify that all the information submitted by me on this application is true and complete. I authorize the Village of Lockland to verify the information provided and realize that false information (misrepresentation or omission of information called for) is a basis for disqualification or dismissal. I authorize the Village of Lockland to contact educational institutions and current and previous employers. I further authorize current and former employers to give you any and all information concerning my previous employment and any pertinent information they may have and release all parties from all liability for any damages that may result from furnishing such information.

I acknowledge that, if hired, my employment is for no definite period and may be terminated at any time with or without cause, with or without notice, by either me or the Village of Lockland. I understand this cannot be changed except in a writing signed by the Village Administrator that states that is intended to make that change. Anything said or implied to the contrary is not binding on the Village of Lockland.

I acknowledge that, if hired, the workload demand may require that I work extended hours, including weekends.

Before signing, be sure to complete the Application Supplemental Questions on page 4.

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

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**Equal Employment Opportunity**

Applicants being considered for all positions shall be treated in a fair and equitable manner based solely upon merit, fitness and such other occupational qualifications as each individual might possess. Decisions concerning any condition of employment shall not unlawfully discriminate on the basis of race, sex, sexual orientation, gender identity, age, religion, color, national origin, disability, and any other non job-related criteria.

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**Do Not Write Below this Line**

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Interviewed By \_\_\_\_\_ Date \_\_\_\_\_

Remarks \_\_\_\_\_

Rank \_\_\_\_\_

Hired: ( ) Yes ( ) No    Position \_\_\_\_\_ Dept. \_\_\_\_\_

Salary/Wage \_\_\_\_\_ Date Reporting to Work \_\_\_\_\_

Approved 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Finance Manager

Department Head

Administrator

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# Village of Lockland

## Application Supplemental Questions

“Yes” answers to the following four questions will not necessarily result in denial of employment. The Village will consider all the circumstances, including the date and nature of events that led to the actions described below. Your written explanation will assist the Village in determining your eligibility, qualifications and suitability for employment. Attach additional sheets if necessary.

1. Have you ever been convicted of, admitted committing, or are you awaiting trial for any crime (excluding only minor traffic violations not involving any allegation of drug or alcohol impairment)? You must answer “yes” even if the matter was later dismissed, deferred, vacated or expunged. If you answer “yes” you must provide dates of the proceedings, the court in which the proceedings occurred, a statement of the accusation against you and the final disposition of the case(s).

Yes  No Explanation: \_\_\_\_\_

2. Have you ever been dismissed (fired) from any job or resigned at the request of your employer or suspended while charges against you, for an investigation of your behavior, were pending? You must answer “yes” even if the matter was later resolved with any form of settlement or severance agreement, regardless of the terms. If you answer “yes,” you must provide the date of termination of employment, the address and telephone number of the employer(s) and a statement of the alleged reasons for termination.

Yes  No Explanation: \_\_\_\_\_

3. Have you ever had any license or certificate of any kind revoked or suspended, or have you in any way been sanctioned by, or is any charge or complaint now pending against you, before licensing, certification or other regulatory agency or body, public or private? If you answer “yes,” you must provide the dates of proceedings, name, address, and telephone number of the agency or body where proceedings took place, a statement of the accusations against you and the final disposition.

Yes  No Explanation: \_\_\_\_\_

4. Are you now being investigated for any alleged misconduct or other alleged grounds for discipline by any licensing by your current or any previous employer? If you answer “yes,” you must provide the name, address, and telephone number of the employer or licensing body and a statement of the accusations against you.

Yes  No Explanation: \_\_\_\_\_



# LOCKLAND POLICE DEPARTMENT

## Application for Employment

Pre-Employment Questionnaire / An Equal Opportunity Employer

### Authorization of Release of Records

Dear Organization, Establishment, Institution, or Agency,

I hereby authorize any police officer or other authorized representative of the Lockland Police Department bearing this release, or copy of this thereof, within one (1) year of its date, to obtain any information in your files pertaining to my employment, military credit or educational records including, but not limited to, academic achievement, attendance, athletic, personal history, disciplinary records, medical records, criminal history records, banking debt, bank checking and saving, and credit records. I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for the official use of the Lockland Police Department. Consent is granted for the Lockland Police Department to furnish such information, as is described above, to third parties in the course of fulfilling its official responsibilities. I hereby release you as the custodian of such records, and any school, college, university, or other educational institution, hospital, or other repository of medical records, credit bureau, criminal history record, lending institution, consumer reporting agency, bank, or retail business establishment including its officers, employees, or 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. Should there be any questions as to the validation of this release you may contact me as indicated below.

Full Name \_\_\_\_\_

Print

Address \_\_\_\_\_ Phone # \_\_\_\_\_

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

Sworn to and subscribed in my presence by \_\_\_\_\_

Signature Notary Public

this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Day

Month

Year

Driver's License Number: \_\_\_\_\_

State of Issue: \_\_\_\_\_

Expiration Year: \_\_\_\_\_