



# New Middletown Police Department

Village of New Middletown  
10711 Main Street New Middletown, OH 44442  
(330)542-2846/ (330)542-2239 (Fax)  
Chief Timothy Dobbins

## POLICE OFFICER

## EMPLOYMENT APPLICATION PACKET

Completing the Police Officer Employment Application Packet is the first step in the employment process. Read all of the questions carefully and answer all questions completely and honestly. The information on these forms will be used to judge your qualifications for the position of police officer.

You must complete this application packet yourself. Print the forms using a ball point pen. Do not leave any spaces blank. If a question does not apply, write "NA" or "Not Applicable" in the answer space. All information in this application is subject to verification. Any false, incomplete, or misleading information will result in your application being eliminated for consideration.

This packet contains the following forms:

- Police Officer Employment Application
- Waiver of Liability and Release Form
- Police Officer Position Description

*The Village of New Middletown is an Equal Opportunity Employer and maintains a policy of Equal Employment Opportunity for all employees and applicants. The Village of New Middletown does not discriminate in employment or the provision of services on the basis of race, color, national origin, ancestry, sex, religion, age, disability, military status, genetic information, pregnancy, or any other characteristic protected by Federal or State law.*

Return the entire packet to the address below:

**New Middletown Police Department  
10711 Main Street  
New Middletown, OH 44442**

# POLICE OFFICER EMPLOYMENT APPLICATION

## Instructions

You must complete this application yourself. Print in ball point pen. Your ability to completely and honestly complete this application is part of the process to determine your suitability for employment. If you intentionally leave out any information that might be detrimental to obtaining a job, such as past drug use or other crimes, it will automatically eliminate you from consideration for employment. The fact that you may have used drugs, committed a theft or another illegal act will not automatically eliminate you, but the omission of it during the application process will. Once submitted, this application becomes the property of the Village of New Middletown.

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### Basic Personal Information

Name: \_\_\_\_\_  
Last First Middle

Please list any other names that you have used: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street City State Zip

Social Security Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Telephone: \_\_\_\_\_  
Home Number Daytime Number Cell Number

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

Place of birth: \_\_\_\_\_  
City State Country

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### Eligibility

1. Are you at least 21 years of age? Yes \_\_\_ No \_\_\_
2. Do you have a legal right to work in the United States? \_\_\_ U.S. Citizen  
\_\_\_ Permanent Resident Status \_\_\_\_\_ Other (Specify)
3. Are you a licensed peace officer in the State of Ohio? Yes \_\_\_ No \_\_\_
4. If yes, where and when did you obtain your license? \_\_\_\_\_  
*OPOTA Training Academy or Department*

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Address City State Zip Date

5. Has your OH peace officer's license ever been suspended? Yes \_\_\_ No \_\_\_
6. If yes, please explain the circumstances on a separate sheet and attach to application.
7. Are you a commissioned/licensed peace officer in another state in the U.S.? Yes \_\_\_ No \_\_\_
8. If yes, which state did you receive your commission/license? \_\_\_\_\_
9. If yes, when and where did you obtain your license? \_\_\_\_\_  
*Training Academy or Department*
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- |                |             |              |            |             |
|----------------|-------------|--------------|------------|-------------|
| <i>Address</i> | <i>City</i> | <i>State</i> | <i>Zip</i> | <i>Date</i> |
|----------------|-------------|--------------|------------|-------------|
10. Have you ever applied for a position with the Village before? Yes \_\_\_ No \_\_\_
11. If yes, when and previous position (s) applied for: \_\_\_\_\_
12. Indicate if you are applying for a part-time or full-time position. Part-time \_\_\_ Full-time \_\_\_

### Military Service

Please make copies of all applicable service records including any discharge papers and attach to this application.

- Branch: \_\_\_\_\_ Serial Number: \_\_\_\_\_
- Date of Service: \_\_\_\_\_ to \_\_\_\_\_ Reserve Status: \_\_\_\_\_
- Type of discharge: \_\_\_\_\_ If not honorable, explain: \_\_\_\_\_
- Grade and duty assignment at discharge/separation: \_\_\_\_\_
- Are you registered for the Selective Service? Yes \_\_\_ No \_\_\_
- Selective Service Number: \_\_\_\_\_ Classification: \_\_\_\_\_
- Are you a member of the Reserves or National Guard? Yes \_\_\_ No \_\_\_
- If yes, give unit, location, grade, and duty assignment: \_\_\_\_\_  
*Unit*

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<i>Location</i>	<i>Grade</i>	<i>Duty Assignment</i>
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### Education

Please complete the information that applies and attach copies of your diplomas or copies of your course schedule and grades to the application.

- If you did not complete high school, do you have a GED? Yes \_\_\_ No \_\_\_

SCHOOL NAME	ADDRESS, PHONE NUMBER	GRADUATE Yes/ No Dates Enrolled	COURSE OF STUDY/ MAJOR
HIGH SCHOOL			
COLLEGE/ UNIV.			
GRADUATE SCHOOL			
OTHER			

### Personal History

1. Do you know of any reason that you could not pass a background check? Y \_\_\_ N \_\_\_
2. Have you ever stolen from an employer? Y \_\_\_ N \_\_\_
3. Have you ever committed a crime for which you were not arrested? Y \_\_\_ N \_\_\_
4. Have you ever received disciplinary action from an employer? Y \_\_\_ N \_\_\_
5. Have you ever falsified a police report? Y \_\_\_ N \_\_\_
6. Have you ever accepted money not to report a crime? Y \_\_\_ N \_\_\_
7. Have you ever been fired or asked to resign from a job? Y \_\_\_ N \_\_\_
8. Have you ever assisted someone in committing a crime? Y \_\_\_ N \_\_\_
9. Has any driver's license issued to you ever been suspended or revoked? Y \_\_\_ N \_\_\_
10. Have you ever slept on the job? Y \_\_\_ N \_\_\_
11. Have you ever used, sold, or otherwise handled in an illegal manner  
any controlled substance? Y \_\_\_ N \_\_\_
12. Have you ever been bonded? Y \_\_\_ N \_\_\_
13. Have you ever been refused bond? Y \_\_\_ N \_\_\_

**If you have answered "yes" to any of the questions listed above, please write a brief explanation for each on a separate sheet of paper.** List the questions by number. Any "yes" answers will be closely examined during the background check. If you are interviewed, you will be asked about any "yes" answers. A "yes" answer does not automatically eliminate you from consideration for employment with the department. **Your omission of these facts will automatically eliminate you from consideration.**

### Specialized Skills and Training

Do you speak another language other than English? Y \_\_\_ N \_\_\_      Fluent? Y \_\_\_ N \_\_\_

If yes, please list: \_\_\_\_\_

Please list any social internet sites (Facebook, Instagram, TikTok, Snapchat, personal blogs, etc.) that you have an active or past account with:

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List any training or skills, including firearms, that would be assistance to the position/job you are applying for. If you have copies of certificates please attach them to the application:

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Briefly list any computer skills you have. If you have copies of certificates for any computer training you have received, please attach them to this application:

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### **Traffic, Civil Court, and Criminal Record**

Please list your history of any traffic citations, any civil court actions in which you were or are a defendant, any arrests, court actions, and convictions. If additional space is needed, please continue on a separate sheet and attach to the application.

	<i>Type of case</i>	<i>Jurisdiction</i>	<i>City, State</i>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____

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### **Employment History**

Please list your work experience for the past 3 years beginning with your most recent job held. Account for any periods of unemployment by stating the nature of your activities. If additional space is needed, list on a separate sheet and attach it to the application.

Company: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Dates from \_\_\_\_\_ to \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Telephone No.: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Dates from \_\_\_\_\_ to \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Telephone No.: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Dates from \_\_\_\_\_ to \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Telephone No.: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Dates from \_\_\_\_\_ to \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Telephone No.: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Dates from \_\_\_\_\_ to \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Telephone No.: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Dates from \_\_\_\_\_ to \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Telephone No.: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

## Residences

List the last (3) residences where you have lived during the past five years. Begin with your present address and work backwards. List the complete address including street number, street name, city, state, and zip code. If additional space is needed, list on a separate sheet.

ADDRESS	CITY	STATE	ZIP CODE	DATES

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## Personal References

List three references that are familiar with your work history and experience. Do not list relatives, friends or personal references. Do not use former or current employers. Be sure to include all of the information requested.

NAME	ADDRESS, CITY STATE, ZIP CODE	AREA CODE & PHONE NUMBER

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## Remarks

Please tell us about yourself. Include any awards, honors, licenses or certificates that you have received. What are your hobbies and interests? You can also use this section to expound upon any answers to any questions on this application:

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**AUTHORIZATION TO RELEASE INFORMATION**

TO: Any Doctor, physician, psychologist, dentist, hospital, nursing home, medical association  
U.S. Armed Forces, Maritime Service, Veteran Association

Any academic dean, registrar, principal, guidance counselor, or any authorized person at any:  
school, college, university, business, school, trade school, or elementary school

Any local, state or federal law enforcement agency, any past employer, present employer, credit  
bureau, retail merchants association, U.S. selective service system or any government agency;

I, \_\_\_\_\_, of \_\_\_\_\_,  
have applied for employment with the NEW MIDDLETOWN POLICE DEPARTMENT. I am aware  
that my entire background is to be investigated thoroughly. I hereby authorize and request  
release of any and all information you may have concerning me, including, but not limited to, my  
employment, military, credit, psychological, criminal, medical or educational (including transcript  
of any academic record) and any other records relating to credit records. I hereby authorize you  
to release this information with full knowledge and understanding that the information is for the  
official use of the NEW MIDDLETOWN POLICE DEPARTMENT. Consent is hereby granted for the  
NEW MIDDLETOWN POLICE DEPARTMENT to furnish the information as described above to third  
parties in the course of fulfilling its official responsibilities relative to my employment with the  
NEW MIDDLETOWN POLICE DEPARTMENT. I hereby release you as custodian of such records, and  
employer, educational institution, physician, psychologist, psychiatrist, hospital or other  
repository of medical records, credit bureau, consumer reporting agency, or military or  
government entity, including its officers, employees, or related personnel, both individually and  
collectively, from any and all responsibility of liability for damages of whatever kind, which may  
result to me, my heirs, family or associates because of compliance with this authorization and  
request to release information, or any attempts to comply with it. I am willing that a Photostat of  
the authorization be accepted with the same authority as the original.

\_\_\_\_\_  
Full Name (Signature)

\_\_\_\_\_  
Current Address

\_\_\_\_\_  
Full Name (Printed)

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Witnessed By

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Witnessed By



# New Middletown Police Department

Village of New Middletown  
10711 Main Street New Middletown, OH 44442  
(330)542-2846/ (330)542-2239 (Fax)  
Chief Timothy Dobbins

## Please Read Carefully Before Signing This Application

### APPLICATION FORM WAIVER

In consideration of the Village of New Middletown Police Department, Ohio, hereinafter referred to as the Agency, processing my application for employment, I, \_\_\_\_\_ hereby irrevocably agree to the following:  
*Full Name (printed)*

Neither the acceptance of this application nor the subsequent entry into any type of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Village practices, shall serve to create an actual or implied contract of employment. Both the undersigned and the New Middletown Police Department, Village of New Middletown, may end the employment relationship at any time, without specified notice or reason during the one-year probationary period. If employed, I understand that the New Middletown Police Department may unilaterally change or revise their benefits, policies and procedures as they see fit.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts in this application is cause for dismissal at any time without any previous notice. I hereby give the New Middletown Police Department, permission to contact schools, previous employers (unless otherwise indicated), references and others, and hereby release the New Middletown Police Department, from any liability as a result of such contract.

I also understand that (1) the New Middletown Police, has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based the on the successful passing of job-related physical examinations.

I understand that in connection with the routine processing of your employment application, the New Middletown Police Department, may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from the New Middletown Police Department, Village of New Middletown, will provide me with an additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the New Middletown Police Department, shall be probationary for a period of one-year (365) days and further that at any time during the probationary period, my employment relation with the New Middletown Police Department, is terminable at will for any reason by the New Middletown Police Department, and/or Chief of Police.

Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_\_

*The New Middletown Police Department, is an equal employment opportunity employer; we adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age, disability, veteran status or any other characteristic protected by federal or state law. We assure you that your opportunity for employment with the New Middletown Police Department, Village of New Middletown, depends solely on your qualifications.*

**CRIMINAL BACKGROUND CHECK  
NEW MIDDLETOWN POLICE DEPARTMENT**

The New Middletown Police Department is committed to providing the public with a well-trained staff who possess moral character and standards. Conducting criminal background checks on all prospective employees helps to protect employees, visitors, the general public and property.

The New Middletown Police Department requires a criminal background check as a part of the hiring process for all prospective employees.

Background checks will be performed prior to an offer of employment with the New Middletown Police Department.

All employment offers are contingent upon satisfactory results of a criminal background check.

Criminal background information released to the New Middletown Police Department will be used only for purposes of assisting in employment decisions.

If a background check identifies issues, which may preclude employment, the applicant will be notified and the candidate will no longer be considered for employment.

Applicants will be required to sign a **Criminal Background Check Authorization Form**, which includes inquiries about criminal, and traffic convictions. The form also includes questions regarding credit worthiness, medical tribulations, past worker compensation claims and civil judgements. Refusal to provide adequate correct information or to provide consent for investigation will result in withdrawal of the application for consideration of employment.

If the background check identifies a criminal conviction not disclosed on the **Criminal Background Check Authorization Form**, or the applicant has not completed the form truthfully, he or she will be notified and the candidate will no longer be considered for employment.

Reasonable efforts will be made to ensure that results of criminal background checks are kept as confidential as possible with a limited number of persons authorized to review the results.

ANY DECISION TO REJECT OR ACCEPT AN APPLICATION IS SOLELY  
AT THE DISCRETION OF THE NEW MIDDLETOWN POLICE DEPARTMENT

I, the undersigned, have read and understand the above policy of the New Middletown Police Department.

\_\_\_\_\_  
Applicant (Please Print)

\_\_\_\_\_  
Applicant (Please Sign)

\_\_\_\_\_  
Witness (Please Print)

\_\_\_\_\_  
Witness (Please Sign)

## DISCLAIMER AND SIGNATURE

I certify all the information in this application is true and complete. I authorize New Middletown Police Department to fully investigate all statements contained in this application. I acknowledge that if any false information, omissions or misrepresentations are discovered, my application may be rejected, and if I am employed, my employment may be terminated.

\_\_\_\_\_  
*Initials*

In consideration of my employment, I agree to conform to New Middletown Police Department's rules and regulations. I agree that the New Middletown Police Department, Village of New Middletown, may end the employment relationship at any time, without specified notice or reason during the one-year probationary period. I acknowledge and agree that the terms and conditions of my employment may be charged with or without cause and with and without notice at any time by New Middletown Police Department. I understand that only the Village Council has the authority to enter into any agreement for employment in writing, for any specific period of time, or to agree to terms and conditions contrary to the foregoing.

\_\_\_\_\_  
*Initials*

I understand and accept that if selected for employment, my employment may be conditioned upon my passing any medical examination the New Middletown Police Department deems necessary to determine whether I can physically 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.

\_\_\_\_\_  
*Initials*

If employed I understand and accept that, depending upon the department to which I am applying for employment, I may be required to work evening shifts, night shifts, weekends, and may be on-call to work mandatory overtime hours.

\_\_\_\_\_  
*Initials*

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

In case of an emergency, notify: \_\_\_\_\_

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

*It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin or other protected classification.*

