PRINT CLEARLY AND ANSWER ALL QUESTIONS

Date of	Application:		Position Applied For:	Records Clerk
is foun		mplete all sections completely and isleading or excluded, the applited to may be terminated.		
Α.	6. Possess data entry skill o	n; age or older; alge or older; bloma or GED; er's License; ls of 55 words per minute or highe f 6,000 keystrokes per hour or high ency rate of (80%) eighty percent of tigation to Include; ination; ination; xamination; or Reference Interviews; Examination;	ner;	
B.	GENERAL INFORMATION			
Name:	Last	First	<u> </u>	Middle (Full)
Addition	nal Names:			
Addres	s: Number Street	City	/	State Zip
()	tact Phone Number	Social Security Number		nail Address
Con	lact Phone Number	Social Security Number		
Drive	er's License No. State	Date of Birth	☐ Yes Are You a Citizen of	□ No the United States of America?
	Peace Officer Acade	emy Attended	Date Completed	Certificate No.
	Corrections Officer Aca	ademy Attended	Date Completed	Certificate No.
1. Hav	ve you ever had any type of pro	otection order filed against you?		Yes □ No □
If YE	S, please list the date(s) of iss	ue and type:		
2. Hav	ve you filed an application with	Richland County before?		Yes □ No □
If Y	ES, when?	Which	Department/Office?	

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3.	Do you have relatives currently e	employed at the Richland	County Sheriff's Office?	Yes □ No □
	If YES, list their name(s):			
C.	MILITARY SERVICE INFOR	RMATION		
1.	Are you a United States Military	Veteran? Yes □ No		
lf Y	ES, Branch of Service		Highest Rank Achieved	
Tot	tal Length of Consecutive Active [Outy Time	-	
Туј	oe of Discharge		(Less than Honorable Discha	arge will not be considered)
Re	serve or National Guard Status _			
D.	EDUCATION INFORMATIO	N High School Diplor	na □ G.E.D. □ Date Received	
1.				
	High School	City		State
	Course of Study	Degree Con	npleted	Dates Attended
2			·····	
	College	City		State
	Course of Study	Degree Con	npleted	Dates Attended
3.	Other	City		State
	Course of Study	Degree Con	npleted	Dates Attended
E.	PERSONAL REFERENCE I	NFORMATION		
1.				
	Name A	ddress	Phone	Relationship
2.	Name A	ddress	Phone	Relationship
3.				
	Name A	ddress	Phone	Relationship
4.	Name A	ddress	Phone	Relationship

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F. EMPLOYMENT HISTORY INFORMATION

Account for ALL times of employment including periods of unemployment. Begin with PRESENT position or occupation. If you need more room, use a separate piece of paper. A resume is welcome in addition to this application, however, it MAY NOT be substituted for any part of this application. Incomplete information may prevent your application from being processed.

Company				
Name	Address			Phone
Dates of Employment: From	(MM/DD/YYYY)	To (MM/DD/YYYY)	_ Job Title:	
Current Salary: \$	Per Hour	Your Duties:		
Reason for Leaving:				
CompanyName				DI.
Name	Address			Phone
Dates of Employment: From	(MM/DD/YYYY)	To (MM/DD/YYYY)	_ Job Title:	
Current Salary: \$	Per Hour	Your Duties:		
Reason for Leaving:				
CompanyName				
Name	Address			Phone
Dates of Employment: From	(MM/DD/YYYY)	To (MM/DD/YYYY)	_ Job Title:	
Current Salary:\$	Per Hour	Your Duties:		
Reason for Leaving:				
Company Name				
Name	Address			Phone
Dates of Employment: From	(MM/DD/YYYY)	To (MM/DD/YYYY)	_ Job Title:	
Current Salary: \$	Per Hour	Your Duties:		
Reason for Leaving:				

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Company				
Name	Address			Phone
Dates of Employment: From	(MM/DD/YYYY)	To (MM/DD/YYYY)	_ Job Title:	
Current Salary: \$	Per Hour	Your Duties:		
Reason for Leaving:				
CompanyName				
Name	Address			Phone
Dates of Employment: From	(MM/DD/YYYY)	To (MM/DD/YYYY)	_ Job Title:	
Current Salary: _\$	Per Hour	Your Duties:		
Reason for Leaving:				
CompanyName	Addraga			Dhono
				Phone
Dates of Employment: From	(MM/DD/YYYY)	To (MM/DD/YYYY)	_ Job Title:	
Current Salary: \$	Per Hour	Your Duties:		
Reason for Leaving:				
Company				
Name	Addiess			Phone
Dates of Employment: From	(MM/DD/YYYY)	To (MM/DD/YYYY)	_ Job Title:	
Current Salary: \$	Per Hour	Your Duties:		
Reason for Leaving:				
Company				
Name	Address			Phone
Dates of Employment: From	(MM/DD/YYYY)	To (MM/DD/YYYY)	_ Job Title:	
Current Salary: \$	Per Hour	Your Duties:		
Reason for Leaving:				

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G. RELEASE AND AUTHORIZATION – PLEASE READ CAREFULLY

I certify that all statements contained herein or at any step of the employment process are true, complete, and correct to the best of my knowledge. I understand that a false answer or material omissions may be grounds for dismissal from the Richland County Sheriff's Office.

By signing this waiver, I expressly authorize the Richland County Sheriff's Office to complete a thorough investigation of my past employment and activities which may include, but not be limited to, an operator license record check, criminal history check, financial credit check, etc. I also authorize the Richland County Sheriff's Office to complete an inquiry of my former employer(s) concerning my work record, job qualifications and performance. I authorize my former employer to furnish the Richland County Sheriff's Office with this information upon their request. I recognize the right of the Richland County Sheriff's Office to treat, at its discretion, certain sources as confidential, and its right to withhold from me or my agent the names of such confidential sources, and information obtained there from.

Signature of Applicant	Date
Printed Name of Applicant	

Applications may be filed in person or mailed to the following listed location. After submitting an application, please do not call the Sheriff's Office to inquire as we will notify you on the decision made to either cease or continue with the employment process. Thank you for your interest in serving our community.

Richland County Sheriff's Office Attn: Records Section Applications 597 Park Ave. East Mansfield, Ohio 44905

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Affirmative Action Data Record

To be returned with application

Richland County Sheriff's Office

MISSION STATEMENT

The Richland County Sheriff's Office is dedicated to providing a safe and secure community for the citizens and visitors of Richland County through integrity, professionalism and efficiency of services.

Applicants are treated during the hiring process and employment without regard to race, color, creed, religion, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

As an employer with an affirmative action program, the Richland County Sheriff's Office complies with government regulations, including affirmative action responsibilities where applicable.

The purpose of this form is to comply with government record keeping and reporting requirements. The Sheriff's Office may be required to file reports on the following information. The completion of this form is optional. If you choose to volunteer the requested information, please note that this information is kept in a confidential file separate from you application. **PLEASE NOTE**: YOUR COOPERATION IS VOLUNTARY. INCLUSION OR EXCLUSION OF ANY DATA HEREIN WILL NOT AFFECT ANY EMPLOYMENT DECISION.

Date:	
Positio	on Applied for:
1. Hov	w did you learn about this position? (Check One):
	Agency Internet Site
	Social Media, i.e. Facebook, Twitter etc.
	Private Employment Web Site.
	Other Internet Site.
	Poster.
	Newspaper.
	Magazine.
	TV/Radio.
	Student association.
	Private Employment Office.
	State Employment Office.
	Federal, state, or local Job Information Center.
	Agency Human Resources Department (bulletin board or other announcement).
	Agency or other Federal government on campus.
	Religious organization.
	School or college counselor or other official.
	Job Fair (give location:).
	Friend or relative working for this agency.
	State Vocational Rehabilitation Agency.
	Professional organization or publication.

	Other
2.	Sex (Check One
	Male Female
3.]	Date of Birth
4. (Check if any of the following are applicable:
	Vietnam Era Veteran Disabled Veteran Disabled Individual
3.	Ethnicity (Check One):
	Hispanic or Latino—a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
	Not Hispanic or Latino.
4.	Race (Check all that apply):
	American Indian or Alaska Native—a person having origins in any of the original peoples of North or South America (including Central America), and who maintains tribal affiliation or community attachment.
	Asian—a person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, or Vietnam.
	Black or African American—a person having origins in any of the black racial groups of Africa.
	Native Hawaiian or Other Pacific Islander—a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific islands.
	White—a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.