



CITY OF KETTERING

Application for Employment

POSITION: _____

Full-Time _____
Part-Time _____
Temporary _____

BASIC EMPLOYMENT DATA

A. GENERAL INFORMATION

Name: _____

Address: _____

City State Zip Code

Phone No. _____ Work Phone No. _____

Cell/Other _____ E-Mail Address _____

Social Security No. _____

Military Service? YES _____ NO _____ (If yes, indicate branch, inclusive dates of service and rank at discharge.)

Do you have a valid Ohio Driver's License? YES _____ NO _____ (If yes, indicate type of license.)

Operator's _____ Commercial Driver's License _____

State here any additional information required to answer the above questions adequately or that you feel would be helpful for pre-employment inquiry. _____

Are you related to any City employee? YES _____ NO _____ If so, who is the City employee or part-paid volunteer firefighter and what is the relationship? _____

Are you a minor (under 18) child or stepchild of a current City of Kettering employee or part-paid volunteer firefighter? YES _____ NO _____

If yes, name of employee or part-paid volunteer firefighter _____

B. EDUCATION AND TRAINING

Circle the highest school grade completed.

High School College
9 10 11 12 13 14 15 16 17 18 19 20

Degrees obtained or areas of study: _____

List any job-related schools attended or vocational training received: _____

C. PAST WORK EXPERIENCE
(List most recent first)

Month From	Year To	Month To	Year	Title of Your Position	Annual Salary
Name of Employer: _____					
Nature of Duties: _____					
Reason for Leaving: _____					
Month From	Year To	Month To	Year	Title of Your Position	Annual Salary
Name of Employer: _____					
Nature of Duties: _____					
Reason for Leaving: _____					
Month From	Year To	Month To	Year	Title of Your Position	Annual Salary
Name of Employer: _____					
Nature of Duties: _____					
Reason for Leaving: _____					
Attach additional sheet of paper if necessary to report experience adequately or if you wish to include volunteer work experience.					

D. REFERENCES
(Relatives are not acceptable references)

Name & Title	Occupation	Address	Phone
1.			
2.			
3.			
4.			

CERTIFICATION: I hereby certify that all the information I have provided on BOTH SIDES of this application form is true, complete and correct to the best of my knowledge and belief, and is made in good faith. I agree and understand that all statements made by me are subject to being investigated for verification. I further agree and understand that any omissions or misstatement of facts contained in this application may disqualify me for any employment or result in my removal from employment with the City of Kettering.

Signature of Applicant

Date

EQUAL OPPORTUNITY EMPLOYER

As an Equal Opportunity Employer, the City of Kettering is committed to give equal consideration to all applicants without regard to race, color, religion, gender, age, national origin, ethnic heritage, or disability.

**CITY OF KETTERING
CIVILIAN JAILER QUESTIONNAIRE**

Applicant's Name: _____

Please print legibly and answer the following questions as completely as possible. You may attach additional pages if necessary.

1. How many years of experience have you had as a **Jailer/Corrections Officer**?

2. When did you obtain your OPOTC Corrections Officer Basic Training Certificate?

3. Briefly describe any awards or recognition demonstrating quality performance that you may have received during your career.

4. What were the overall ratings you received on your last two (2) performance evaluations? Please indicate the period of time each covered.

5. Have you ever received disciplinary action of record? Please describe.

6. Describe special courses or training you have participated in during your career.

CERTIFICATION: I hereby certify that all the information I have provided on this questionnaire is true, complete and correct to the best of my knowledge and belief, and is made in good faith. I agree and understand that all statements made by me are subject to being investigated for verification. I further agree and understand that any misstatement of facts contained in this questionnaire may disqualify me for any employment or result in my removal from employment with the City of Kettering.

Signature of Applicant

Date



EQUAL EMPLOYMENT OPPORTUNITY STATISTICAL SUPPLEMENT

PLEASE DO NOT PLACE YOUR NAME ON THIS FORM.

Applicants for employment are requested, but not required, to provide the following supplementary data. Availability of this data assists in the maintenance of an Equal Employment Opportunity Program. Please **DO NOT** place your name on this form. **THIS FORM IS VOLUNTARY AND DOES NOT AFFECT YOUR EMPLOYMENT STATUS.**

1. Position:

_____ Jailer _____

____ Full-time
____ Part-time
____ Temporary

2. Date of Application:

____/____/2019
mo day year

3. Gender:

____ M

____ F

4. Race or Ethnic Origin:

____ **White (not of Hispanic Origin)**

A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

____ **Black (not of Hispanic Origin)**

A person having origins in any of the Black racial groups of Africa.

____ **Hispanic**

A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

____ **Asian or Pacific Islander**

A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.

____ **American Indian or Alaskan Native**

A person having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

____ **Other (Two or More Races)**

A person who identifies with two or more of the above race/ethnicity categories.

PLEASE RETURN TO:

City of Kettering
Human Resource Department
3600 Shroyer Road, Kettering, OH 45429
FAX: 937-296-3371