



**CIVIL SERVICE APPLICATIONS ACCEPTED  
POLICE OFFICER LATERAL ENTRY  
AVON LAKE POLICE DEPARTMENT**

**General Requirements**

- U.S. Citizen.
- Valid Ohio Driver's License.
- High school degree/ GED equivalent.
- Currently or previously employed as a Peace Officer for two (2) years or more.
- If previously employed as Peace Officer, no more than a one-year break in service.
- OPOTA certified.
- Must provide current physical agility certificate from a reputable police physical agility testing program not less than 6 months before original appointment.
- Must successfully pass a thorough background check, polygraph examination, psychological and medical evaluation, oral interview, and drug screening.
- Ability to perform essential job functions.

**Age Requirement – Civil Service Rule 14 B**

1. No person shall be eligible to receive an original appointment as a police officer unless the person has reached the age of twenty-one (21) years. No person shall be eligible to receive an original appointment as a police officer on and after the person's forty-first (41) birthday. (Ord. 22-76)
2. Any person forty-one (41) years of age or more may be permitted to claim credit for full-time law enforcement service. Any person who desires to request this credit shall provide documentation of their credited full-time law enforcement service from a recognized Local, State or Federal Public Pension System at time of application and not later than the day of Civil Service examination. Upon receipt and verification, the person shall be eligible to have up to ten (10) years of their total full-time law enforcement service deducted from their current age. If the total number of years credited, when subtracted from their current age, equals less than forty-one (41) on the date of appointment, they shall be eligible for original appointment as a police officer.

## **General Information**

Applications, general requirements, the job description, and details of the position are available online ([www.avonlake.org](http://www.avonlake.org)) or for pickup at the Avon Lake Municipal Building, 150 Avon Belden Road, 1<sup>st</sup> Floor, between 8:00 a.m. and 4:30 p.m. beginning on Monday, August 28, 2023. **Completed applications must be returned by 4:30 p.m. on Friday, September 29, 2023.**

## **Examination by Interview**

An examination by interview will be conducted of qualified candidates for the purpose of creating an eligibility list for original appointment to the position of Police Officer in the Avon Lake Police Department.

## **Additional Credit for Military Service**

In accordance with Avon Lake Civil Service Rule 9(B), Veterans who qualify for Military Service Credit may receive either 5 or 10 points added to the final passing score of their civil service examination. In order to qualify for the credit, **candidates must submit the required documentation at time of application.** Required documentation shall be any official documentation from a branch of the U.S. Armed Forces (e.g. DD214 Member 4 Copy) and/or the U.S. Department of Veterans Affairs that identifies:

- a. Branch of service
  - b. Dates of service
  - c. Total amount of active service
  - d. Character of service (e.g., honorable, under honorable conditions, general)
- (And as Applicable)**
- e. The present existence of a compensable service-connected disability of 30 percent or more

The \$25 filing fee is payable to the City of Avon Lake upon returning your completed application to the Municipal Building. Said fee shall be in the form of cash or personal check payable to the City of Avon Lake.

**THE CITY OF AVON LAKE IS AN EQUAL OPPORTUNITY EMPLOYER.**



# Civil Service Application No. \_\_\_\_\_

## SUBSTITUTE APPLICATIONS WILL NOT BE ACCEPTED

\$25.00 Filing Fee – cash or personal check/money order payable to “City of Avon Lake”

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Date \_\_\_\_\_

Position Applied For \_\_\_\_\_

Name \_\_\_\_\_  
(Last) (First) (Middle)

Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Length of Time at Address \_\_\_\_\_

Phone Numbers \_\_\_\_\_  
(Home) (Cell)

Email Address \_\_\_\_\_

TO BE COMPLETED BY OFFICE:  
\_\_\_\_\_ Application Complete  
\_\_\_\_\_ Exam By Interview  
\_\_\_\_\_ Bonus Points  
\_\_\_\_\_ Total Score  
\_\_\_\_\_ Reviewed By  
\_\_\_\_\_ Rank

# EDUCATION

High School or G.E.D. \_\_\_\_\_

College \_\_\_\_\_

Degree \_\_\_\_\_ Year Earned \_\_\_\_\_

Major \_\_\_\_\_

Minor(s) \_\_\_\_\_

Technical School \_\_\_\_\_

Course Work Area \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## TRAINING SCHOOL(S)/PROGRAM(S)

Subject or Title of Training	Organization	Length of Training
------------------------------	--------------	--------------------

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If selected for employment, will you be able to produce evidence that you are eligible for employment in the United States?

Yes      No

State your age if you are under 21 \_\_\_\_\_

Have you ever been employed in the city or state or county service in Ohio?

Yes      No

If yes, complete the following:

Employer \_\_\_\_\_

Address \_\_\_\_\_

Years Worked \_\_\_\_\_

Have you filed an application with the City of Avon Lake before?      Yes      No

If yes, indicate date(s) and position(s):

---

---

Are you able to perform the “essential functions” of the job for which you are applying (with or without reasonable accommodation)?

Please note: This question is not designed to elicit information about an applicant’s disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.

Yes      No      Need more information about the job’s “essential functions” to respond.

Have you entered into an agreement with any former employer or other party (such as a non-competition agreement) that might, in any way, restrict your ability to work for the City?

Yes      No

If yes, please explain:

---

---

---

## EXEMPTION FROM PUBLIC RECORDS

Are you a current or former law enforcement officer or firefighter, other covered employee or the spouse or child of one who’s information is exempt from public records. R.C. 149.43 (A) (1) (p).

Yes      No

# WORK EXPERIENCE

Give your present or most recent job first and work back to your first job. Attach additional sheets, if necessary.

1. Current or Most Recent Employer:

Dates of Employment \_\_\_\_\_  
(From) (To)

Title of Position \_\_\_\_\_

Name and Address of Employer \_\_\_\_\_

Phone Number \_\_\_\_\_ Supervisor/Title \_\_\_\_\_

Duties of Job \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Starting Salary \_\_\_\_\_ Per \_\_\_\_\_ Last Salary \_\_\_\_\_ Per \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Employer:

Dates of Employment \_\_\_\_\_  
(From) (To)

Title of Position \_\_\_\_\_

Name and Address of Employer \_\_\_\_\_

Phone Number \_\_\_\_\_ Supervisor/Title \_\_\_\_\_

Duties of Job \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Starting Salary \_\_\_\_\_ Per \_\_\_\_\_ Last Salary \_\_\_\_\_ Per \_\_\_\_\_

Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Employer:

Dates of Employment \_\_\_\_\_  
(From) (To)

Title of Position \_\_\_\_\_

Name and Address of Employer \_\_\_\_\_

Phone Number \_\_\_\_\_ Supervisor/Title \_\_\_\_\_

Duties of Job \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Starting Salary \_\_\_\_\_ Per \_\_\_\_\_ Last Salary \_\_\_\_\_ Per \_\_\_\_\_

Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Employer:

Dates of Employment \_\_\_\_\_  
(From) (To)

Title of Position \_\_\_\_\_

Name and Address of Employer \_\_\_\_\_

Phone Number \_\_\_\_\_ Supervisor/Title \_\_\_\_\_

Duties of Job \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Starting Salary \_\_\_\_\_ Per \_\_\_\_\_ Last Salary \_\_\_\_\_ Per \_\_\_\_\_

Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



5. Employer:

Dates of Employment \_\_\_\_\_  
(From) \_\_\_\_\_ (To)

Title of Position \_\_\_\_\_

Name and Address of Employer \_\_\_\_\_

Phone Number \_\_\_\_\_ Supervisor/Title \_\_\_\_\_

Duties of Job \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Starting Salary \_\_\_\_\_ Per \_\_\_\_\_ Last Salary \_\_\_\_\_ Per \_\_\_\_\_

Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# REFERENCES

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Relationship \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Relationship \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Relationship \_\_\_\_\_

# APPLICANT'S STATEMENT

I certify that all information I have provided in order to apply for and secure work with the City of Avon Lake is true, complete, and correct.

I expressly authorize, without reservation, the City, its representatives, employees, or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees, or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations, or organizations for furnishing such information about me.

I understand that the City of Avon Lake does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state, or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the City is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the City's representative.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

The City of Avon Lake does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, genetic information, citizenship, age, disability, or any other protected status under applicable federal, state, or local law. The City of Avon Lake likewise does not tolerate harassment based on sex, race, color, religion, national origin, genetic information, citizenship, age, disability, or any other protected status. Examples of prohibited harassment include, but are not limited to, unwelcome physical contact, offensive gestures, unwelcome comments, jokes, epithets, threats, insults, name-calling, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. Harassment of our employees is strictly prohibited, whether it is committed by a manager, coworker, subordinate, or non-employee (such as a vendor or customer). The City of Avon Lake takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

I authorize an investigation of all statements contained in this application for employment. The investigation shall be necessary to arrive at an employment decision.

I understand that false or misleading information in my application, reference/background check, interviews, or physical examination will result in disqualification for employment.

I understand as part of the employment process, I may be required to participate in a written exam, several interviews, an agility exam, a physical examination, a psychological examination and a polygraph test. I may also be required to be insured by the City's insurance carrier.

I understand that following a conditional offer of employment by the City, I will be required to take, and successfully pass a test for illegal drug use performed by a laboratory selected by the City. I further understand that the City will withdraw the conditional offer of employment if the results of the test are positive, unless such positive test result is explained to the satisfaction of the City as the result of legally prescribed medication.

In the event of employment, I understand that false or misleading information given in my application, interviews, physical or psychological examinations, or polygraph test will result in discharge regardless of when found.

I understand that I am required to abide by all rules and regulations of this City and those of the Civil Service Commission to ensure continued employment.

I certify that I have read, fully understand, and accept all terms of the foregoing applicant statement.

---

(Print Name)

---

(Signature)

---

(Date)

# APPLICANT DATA RECORD

Please help us to comply with government record keeping by filling out the information requested below.  
We appreciate your cooperation.

This data is for periodic government reporting and will be kept in a **Confidential File** separate from the Application for Employment.

(PLEASE PRINT)

Date \_\_\_\_\_

Position(s) Applied For \_\_\_\_\_

Referral Source          Walk-In                          Friend                          City Website                          Relative  
Internet - Website \_\_\_\_\_  
Advertisement List newspaper \_\_\_\_\_

Name \_\_\_\_\_  
(Last)    (First)    (Middle)

Address \_\_\_\_\_  
(Number)   (Street)    (City)    (State)                          (Zip)

Phone (    ) \_\_\_\_\_

## Affirmative Action Survey

Government agencies require periodic reports on the sex, ethnicity, handicapped and veteran status of applicants.  
This data is for analysis and affirmative action only. **Submission of information is voluntary.**

Male                          Female

Race/Ethnic Group          White                          Black                          Hispanic  
American Indian/Alaskan Native          Asian/Pacific Islander

Check if any of the following are applicable:

Vietnam Era Veteran                          Handicapped Individual  
Gulf War Veteran                          Disabled Veteran