

MEDINA COUNTY JUVENILE DETENTION CENTER

EMPLOYMENT APPLICATION

Return application to: 655 Independence Dr. Medina, OH 44256 Phone: 330.764.8408 Fax: 330.764.8412

The MCJDC provides equal opportunity with regard to all terms and conditions of employment. The MCJDC complies with all Federal and State laws prohibiting discrimination on the basis of race, color, religion, creed, national origin, ancestry, age, sex, marital status, disability or handicap, or veteran status. *Please note that this form becomes public record when submitted to a governmental agency.*

PERSONAL INFORMATION

Position applying for: _____ Application date: _____

Last name _____ First _____ Middle initial _____

Address _____ Apt. _____ City _____ State _____ Zip _____

Home ph. (____) _____ Cell ph. (____) _____ Work ph. (____) _____

Email address _____ SSN _____ - _____ - _____

Referral source _____ Desired salary _____ Available start date _____

- 1) Are you at least 21 years of age? Yes No
- 2) Do you have a valid Ohio Driver License Yes No
- 3) Have you ever been employed by the State of Ohio or Medina County? Yes No
- 4) You are applying for a position requiring a high level of public trust. Is there anything from your past that might prevent you from obtaining employment with us? Yes No

If yes to question #3 or #4, provide dates and details: _____

SOCIAL SECURITY NUMBER NOTICE

Social Security Numbers (SSNs) are used to match individuals with their application/examination file. Disclosure of your SSN is voluntary; however, a nine-digit number is necessary to process your application. Upon appointment and pursuant to Section 5101.312 of the Revised Code and certain other laws and regulations, a request for an SSN is mandatory. Your SSN may be used for purposes including, but not limited to; identification of obligors under child support orders, detection of welfare fraud, processing background checks, tax information, or general employee information.

UNITED STATES ARMED SERVICES STATUS

Are you a veteran? Yes No Branch of service _____ Years of service _____

Are you currently serving in the U.S. military? Yes No

PERSONAL REFERENCES

(Persons you have known for at least three years, not including relatives or former employers)

Name _____ Occupation _____ Phone _____

Address _____ Email: _____ Years known _____

Name _____ Occupation _____ Phone _____

Address _____ Email: _____ Years known _____

Name _____ Occupation _____ Phone _____

Address _____ Email: _____ Years known _____

EMPLOYMENT HISTORY *(Starting with most recent employer)*

EMPLOYER 1 _____ Type of business _____
Address _____ Employed from _____ until _____
City _____ State _____ Zip Code _____ Phone # _____
Starting job title _____ Final job title _____ Salary _____
Most recent immediate supervisor name & title _____
Supervisor email: _____ Reason for leaving _____
Duties performed: _____
=====

EMPLOYER 2 _____ Type of business _____
Address _____ Employed from _____ until _____
City _____ State _____ Zip Code _____ Phone # _____
Starting job title _____ Final job title _____ Salary _____
Most recent immediate supervisor name & title _____
Supervisor email: _____ Reason for leaving _____
Duties performed: _____
=====

EMPLOYER 3 _____ Type of business _____
Address _____ Employed from _____ until _____
City _____ State _____ Zip Code _____ Phone # _____
Starting job title _____ Final job title _____ Salary _____
Most recent immediate supervisor name & title _____
Supervisor email: _____ Reason for leaving _____
Duties performed: _____
=====

EMPLOYER 4 _____ Type of business _____
Address _____ Employed from _____ until _____
City _____ State _____ Zip Code _____ Phone # _____
Starting job title _____ Final job title _____ Salary _____
Most recent immediate supervisor name & title _____
Supervisor email: _____ Reason for leaving _____
Duties performed: _____
=====

EMPLOYER 5 _____ Type of business _____
Address _____ Employed from _____ until _____
City _____ State _____ Zip Code _____ Phone # _____
Starting job title _____ Final job title _____ Salary _____
Most recent immediate supervisor name & title _____
Supervisor email: _____ Reason for leaving _____
Duties performed: _____

EDUCATIONAL BACKGROUND

High School & location _____ Graduate? Yes No

Major area(s) of study _____

GED certificate number: _____ GED issued by: _____

College & location _____ Graduate? Yes No

Major area(s) of study _____

Graduate school/location _____ Graduate? Yes No

Major area(s) of study _____

TECHNICAL BUSINESS, PROFESSIONAL, ETC...

Vocational or other training _____ Graduate? Yes No

Major area(s) of study _____

CERTIFICATIONS/LICENSES

License/certification: _____ Issued by: _____ Date _____

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Are you able and willing to work varying shifts? YES NO

VOLUNTEER EXPERIENCE

Please list any volunteer experience that you feel has been beneficial to you, and that may be relevant to the position you are applying for.

SUMMARY OF QUALIFICATIONS

Briefly describe any experience, education, training, and other factors that qualify you for the position you are interested in.

