

This section to be completed by Boardman Township personnel.

FILING No. \_\_\_\_\_

Filing Date \_\_\_\_\_ Filing Time \_\_\_\_\_

Accepted By (Boardman Township Employee): \_\_\_\_\_

Date/Time: \_\_\_\_\_

## CIVIL SERVICE COMMISSION BOARDMAN TOWNSHIP, OHIO

### APPLICATION (2026 QUALITATIVE OPEN PERIOD)

JOB TITLE: Police Officer \_\_\_\_\_

**HOW TO FILE THIS APPLICATION:** This application must be filled out completely and received by the by Boardman Township personnel (Boardman Civil Service or Boardman Township Police Department) no later than the last day for applications indicated on the announcement of the open application period. All previous applications submitted to Boardman Township for this position are hereby void and unacceptable for this application period.

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

\_\_\_\_\_  
Address Number & Street City State Zip Code

Primary Telephone# \_\_\_\_\_ Are you a U.S. Citizen? Yes \_\_\_\_\_ No \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age: \_\_\_\_\_ Social Security#: \_\_\_\_\_

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

**Veteran's Credit:** Any person who has completed service in the uniformed services who has been honorably discharged from the uniformed services or transferred to reserve with evidence of satisfactory service, and who is a resident of this state, may file with the Commission a certificate of service or honorable discharge and upon this filing shall receive qualitative credit points as outlined in Attachment A.

A person who has been discharged from the uniformed services for medical reasons must submit written proof that said person was completely and honorably discharged from the uniformed services in order to receive Veteran's Credit. A person is not eligible for Veteran's Credit following an honorable or a medical discharge, unless that person has served on active duty in the armed forces for at least one hundred eighty (180) days.

Proof of satisfactory service or honorable discharge shall be submitted when the application for examination is filed with the Commission, or before the scheduled application period. This deadline may be waived by the Commission in specific and unusual situations whereby the Commission believes an extended submission date is justified.

Form DD214 Member 4 Copy is the standard form, which proves **honorable** service or discharge from the Armed Forces of the United States.

**U.S. MILITARY SERVICE**

Have you served in the U.S. Armed Forces? Yes \_\_\_\_\_ No \_\_\_\_\_

Branch of Service \_\_\_\_\_

Date Entering Service \_\_\_\_\_

Date Leaving Service \_\_\_\_\_

Rank at Discharge \_\_\_\_\_ Type of Discharge \_\_\_\_\_

**Educational Credit-** Any applicant for original appointment for police officer, who at the time of certification of the list from the examination possesses an associate degree from an accredited college or university, may file with the Commission acceptable certification of such degree.

Any applicant for original appointment for police officer, who at the time of certification of the list from the examination possesses a Bachelor's Degree from an accredited college or university, may file with the Commission acceptable certification of such degree.

Educational credit is non-cumulative in nature and cannot be compounded based on multiple degrees of any type. A candidate is only entitled to a single credit for highest degree recognized and submitted to the Commission prior to the application window date and must, at that time, be accompanied by proof as described above.

**Educational Background:**

High School: \_\_\_\_\_

Address: \_\_\_\_\_

(GED) \_\_\_\_\_

College/Trade School: \_\_\_\_\_

Degree Earned: \_\_\_\_\_

Credit Hours Earned: \_\_\_\_\_ Semester Hours Earned \_\_\_\_\_

**Licensure Credit (Ohio Peace Officer Certification)**

Any applicant for original appointment as a police officer, who at the time of certification of the list from the examination possesses a valid certificate from the Ohio Police Officer Training Commission (OPOTC), may file with the Commission such certificate.

Completed an Ohio Police Officer Training Commission:Academy?

YES \_\_\_\_\_ NO \_\_\_\_\_

If yes which academy \_\_\_\_\_ Completion Date \_\_\_\_\_

Ohio Peace Officer Certification Current YES \_\_\_\_\_ NO \_\_\_\_\_

List any additional Law Enforcement Training (i.e. CIT, OPOTA, etc.) – Provide copies of certificates with application:

Currently enrolled in OPOT-C Police Academy? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, which Academy \_\_\_\_\_

Tentative Completion or Expected Start Date at Academy: \_\_\_\_\_

Have you passed the final OPOTC physical fitness standards in any administered test

Yes \_\_\_\_\_ No \_\_\_\_\_ (if yes submit letter from Academy)

Comments: \_\_\_\_\_

**Employment History**

No contact will be made with your current or previous employer until later in the background investigation process and with your consent.

For any police positions held indicate if it is full time or part time and total number of months in that

position. This will be used for ranking purposes and verified during the pre-employment back ground investigation.

List last position first and account for all periods of unemployment, (i.e. LE, Military Service, etc.)

Name of Company \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Dates Employed – From: \_\_\_\_\_ to \_\_\_\_\_ Total Months if Police: \_\_\_\_\_

Position \_\_\_\_\_ Salary \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_

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

Name of Company \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Dates Employed - From: \_\_\_\_\_ to \_\_\_\_\_ Total Months if Police: \_\_\_\_\_

Position \_\_\_\_\_ Salary \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_

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

Name of Company \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Dates Employed - From: \_\_\_\_\_ to \_\_\_\_\_ Total Months if Police: \_\_\_\_\_

Position \_\_\_\_\_

Salary \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_

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

Name of Company \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Dates Employed - From: \_\_\_\_\_ to \_\_\_\_\_ Total Months if Police: \_\_\_\_\_

Position \_\_\_\_\_

Salary \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_

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

Name of Company \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Dates Employed - From: \_\_\_\_\_ to \_\_\_\_\_ Total Months if Police: \_\_\_\_\_

Position \_\_\_\_\_ Salary \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_

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

**References:**

List three (3) persons or business references, not related to you.

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Occupation \_\_\_\_\_

Years Known \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Occupation \_\_\_\_\_

Years Known \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Occupation \_\_\_\_\_

Years Known \_\_\_\_\_

Other information you would like the Civil Service Commission to consider:

It shall be the responsibility of all applicants to promptly notify the Commission of any change in the applicant's information, to include name, address or other contact information. Failure to do so may result in an improper certification and subsequent removal from the eligibility list. Boardman Township Civil Service Rules and Regulations Article VI, Section 4.

CERTIFICATE OF APPLICATION: Hereby certify that all information given in this application is true and agree and understand any misstatement of material facts contained in this application may cause forfeiture of all my rights to employment with Boardman Township, Ohio.

SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_