



# RECRUITMENT PACKET

## FULL-TIME FIREFIGHTER POSITIONS

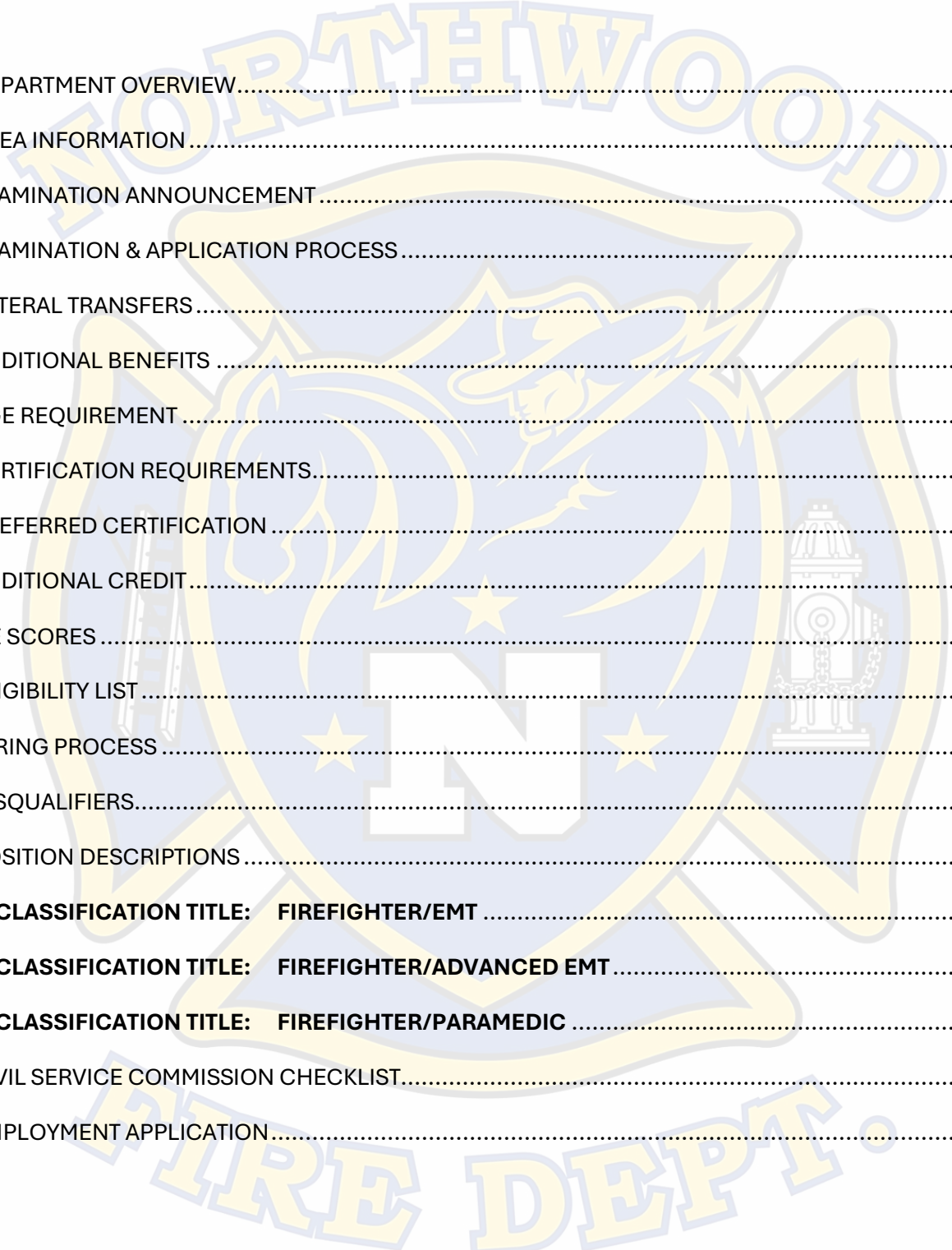


### - MISSION STATEMENT -

THE NORTHWOOD FIRE DEPARTMENT SHALL WORK IN COOPERATION WITH THE COMMUNITY TO PROMOTE A SAFER, HEALTHIER CITY THROUGH FIRE PREVENTION, FIRE SUPPRESSION, AND EMS SERVICE.



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## **DEPARTMENT OVERVIEW**

The Northwood Fire Department recently made history by hiring its first full-time fire and EMS personnel, bringing the total staffing to three career firefighters and forty part-time/part-paid employees. This combination of full-time and part-time staff enables the department to maintain three firefighters on duty around the clock, operating from two fire stations.

The leadership team consists of a Fire Chief, a Deputy Fire Chief, a District Fire Chief, a Captain, and six Lieutenants. Additionally, the department has been awarded a \$939,000 SAFER grant, which will be used to hire three more fire and EMS personnel, further enhancing service delivery and community safety.

### **Core Services Provided:**

1. **Fire Suppression:**
  - Responding quickly to extinguish fires and minimize damage.
2. **Fire Prevention:**
  - Conducting inspections and enforcing fire safety codes to prevent incidents.
3. **Public Education:**
  - Offering community programs to promote fire safety awareness.
4. **Advanced Life Support (ALS) with Transport:**
  - Delivering emergency medical services and transporting critically ill patients.

**Community Impact:** The Northwood Fire Department is committed to improving community safety and well-being through its comprehensive fire and emergency services. With a mix of career and part-time personnel, the department is well-prepared to handle various emergencies and offer valuable educational resources to residents

## **AREA INFORMATION**

The City of Northwood is located in the middle of Wood County's rapid economic growth near downtown Toledo. Northwood has a relatively large commercial and industrial base, with more people working than living in the city. Northwood is currently facilitating a sizeable mixed-use community development and infrastructure project on city-owned property that was the site of a former 125-acre shopping mall. This mixed-use community, known as the "Enclave," includes residential and commercial uses and a community recreation center.

## **EXAMINATION ANNOUNCEMENT**

This recruitment packet announces the online examination for firefighter positions in Northwood, Ohio. **The examination packet must be completed by Friday, December 13, 2024, at 4:00 p.m.**

## **EXAMINATION & APPLICATION PROCESS**

The Northwood Civil Service Commission, in partnership with the National Testing Network, Inc. (NTN), provides full testing services for the positions of Firefighter/EMT, Firefighter/Advanced EMT, and Firefighter/Paramedic for the Northwood Fire Department (NFD). The online examination will **open on Friday, November 1, 2024, and must be completed by Friday, December 13, 2024, at 4:00 p.m.** We encourage early registration to ensure you can finish the examination before the deadline. The test is available at multiple times and locations throughout the United States via NTN.

To schedule your test, please visit [nationaltestingnetwork.com](https://nationaltestingnetwork.com), select “firefighter,” and sign up for the Northwood Fire Department (NFD). Before taking the test, you will be required to complete and submit an application to the NTN. You can find the application and testing details at [nationaltestingnetwork.com](https://nationaltestingnetwork.com).

Applicants must have completed a Firefighter Mile or CPAT test within the past year, with a completion date after December 13, 2023. For more information on the Firefighter Mile and CPAT testing, please follow these links:

- <https://bit.ly/Firefightermile>
- <https://bit.ly/CPATtest>

Additionally, a City of Northwood application and other required documents must be submitted along with your NTN application. You can access the **City Application Packet** at [northwoodoh.gov/employment](https://northwoodoh.gov/employment). Completed application packets can be emailed to the Civil Service Commission at [civilservice@northwoodOH.gov](mailto:civilservice@northwoodOH.gov) or delivered in person to the City Clerk's office at 6000 Wales Road. You will receive an email confirmation from the Civil Service acknowledging receipt of your application. If you do not receive this confirmation, your application was not received.

For any questions regarding this process, please contact [civilservice@northwoodoh.gov](mailto:civilservice@northwoodoh.gov).

All candidate scores will be automatically sent to the Northwood Civil Service Commission upon exam completion. Candidates who achieve a passing score of 70% and meet all application requirements will be placed on the department's Eligibility List. It's important to note that the National Testing Network **does not** replace the Northwood Civil Service Commission's responsibilities and decision-making regarding testing. All results are provided to the Commission, which has the final authority on decisions.

### **SALARY** - (Effective – 1/1/2025)

#### **Starting Base Salary – Based on a 50-hour workweek**

- Firefighter/EMT - \$56,056.00
- Firefighter/Advanced EMT - \$63,622.00
- Firefighter/Paramedic - \$67,496.00

### **Sign-On Bonus**

To be paid annually for three years upon completion of their anniversary date



- Firefighter/Basic EMT - \$1,000/\$3,000 for the three years
- Firefighter/Advanced EMT - \$1,500/\$4,500 for the three years
- Firefighter/Paramedic - \$2,500/\$7,500 for the three years

### **LATERAL TRANSFERS**

The City of Northwood will accept lateral transfers for positions in the fire department for qualified personnel who meet the requirements for the job posting. Lateral transfer applicants for the fire department positions must complete the same testing requirements as all other applicants, **except the Firefighter Mile/CPAT requirement**. To be eligible, lateral transfer applicants must have at least two years of continuous service as a full-time firefighter.

Salary/Experience	Basic EMT	Advanced EMT	Paramedic
Starting Base	\$ 56,056.00	\$ 63,622.00	\$ 67,496.00
2 Years	\$ 59,419.36	\$ 67,439.32	\$ 71,545.76
3 Years	\$ 61,201.94	\$ 69,462.50	\$ 73,692.13
4 Years	\$ 63,038.00	\$ 71,546.37	\$ 75,902.90
5 Years Plus	\$ 64,929.14	\$ 73,692.77	\$ 78,179.98

### **ADDITIONAL BENEFITS**

Ohio Police and Fire Pension	Vacation Time Accrual
Ohio Deferred Compensation	Health Insurance
Personal Days	Health Savings Account
13 Kelly Days	Life Insurance
Sick Time Accrual	Educational Reimbursement

### **AGE REQUIREMENT**

No person shall be eligible to receive an original appointment to the fire department unless the person has reached the age of eighteen.

### **CERTIFICATION REQUIREMENTS**

- Firefighter/EMT – A valid State of Ohio Basic EMT certification
- Firefighter/Advanced EMT – A valid State of Ohio Advanced EMT certification
- Firefighter/Paramedic—A valid State of Ohio Paramedic Certification

### **PREFERRED CERTIFICATION**

- State of Ohio Firefighter II certification – Required within one year of appointment for continued employment.

- Training will be provided to anyone hired without their Firefighter II certification.

### **ADDITIONAL CREDIT**

Additional points will be awarded if the applicant achieves a passing score of 70% on the NTN written exam.

- Veterans of military service, as described in R.C. 124.23, will receive an additional credit of five (5) points for their total grade in the regular examination
- Current part-time members of the Northwood Fire Department shall receive an additional credit of five (5) points for their total grade given in the regular examination
- Applicants with a valid State of Ohio Firefighter II certification shall receive an additional credit of five (5) points for their total grade in the regular examination
- Applicants with a valid State of Ohio Paramedic certification shall receive an additional credit of ten (10) points for their total grade given in the regular examination

### **TIE SCORES**

If applicants receive the same score in the examination, priority at the time of applying with the Commission shall determine the order in which their names shall be placed on the eligible list; Applicants eligible for veteran's preference under O.R.C. 124.23 shall receive priority in rank on the eligible list over non-veterans with a rating equal to that of the veterans. The priority of applying shall decide ties among veterans.

### **ELIGIBILITY LIST**

The eligibility list will be created from applicants who successfully passed the examination and have met all the application process requirements. The List can be found on the City of Northwood's website under the employment tab

The Commission shall fix the eligibility list term to at least one year but not more than two years. A new list may be prepared when the eligible list is reduced to ten names or less. Any list that has been in effect for more than one year may, at the discretion of the Commission, be terminated at any time in the public interest.

### **HIRING PROCESS**

Applicants will need to complete each phase of the sequences listed below before the close date of Monday, December 9, 2024, to continue in the hiring process:

#### ***STEP ONE***

- Complete a City of Northwood application
- Complete the required NTN documentation
  - Application
  - PHQ
- Submit applicable fire and EMS certifications

- Submit DD-214, if applicable
- Submit Resume
- Provide documentation for Firefighter Mile or CPAT completion
  - Completion date cannot be before December 13, 2023

*STEP TWO*

- Obtain a passing score of 70% or higher on the NTN written test
  - Request the results be sent to the City of Northwood

*STEP THREE*

- Background Investigation

*STEP FOUR*

- Peer Interview Panel
- Assessment Center

*STEP FIVE*

- Final Interview

*STEP SIX*

- Conditional Job Offer

*STEP SEVEN*

- Medical Physical

## **DISQUALIFIERS**

The Commission may refuse to examine or, after an examination, refuse to certify as eligible, or after certification, revoke that certification of any person:

- who is found to lack any of the established preliminary requirements for the examination;
- who is physically so disabled as to be rendered unfit for the performance of the duties of the position which he or she seeks;
- who is addicted to the habitual use of intoxicating liquors or drugs to excess;
- who has been convicted of a felony, theft offense, and domestic violence including lesser included offenses, job-related non-traffic non-juvenile misdemeanors, less than seven years old, repeated O.V.I.'s (formally known as D.U.I.'s), O.V.I. within the last three years;
- who has been issued a permanent civil protection order;
- who is uninsurable;
- who has been guilty of infamous or notoriously disgraceful conduct;
- who has been dismissed from either branch of the civil service for delinquency or misconduct;
- or who has made false statements of any material fact,
- or practiced, or attempted to practice, any deception or fraud in his or her application or examination, in establishing his or her eligibility, or securing his or her appointment.

With such inquiries, the Civil Service Commission may require such certificates of persons knowing the applicant as the good of the civil service may require, subject to the Fair Credit Reporting Act requirements, if and to the extent those provisions are applicable. The Commission may also consider that convictions (e.g., for misdemeanors) are over seven (7) years old.



## POSITION DESCRIPTIONS

**CLASSIFICATION TITLE:   FIREFIGHTER/EMT**

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<b>REPORTS TO:</b>	Lieutenant	<b>FLSA STATUS:</b>	Non-Exempt
<b>DEPARTMENT:</b>	Fire	<b>CIVIL SERVICE STATUS:</b>	Classified
<b>PAY STATUS/REF:</b>	Full-Time	<b>EMPLOYMENT STATUS:</b>	FT/Regular

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### **JOB RESPONSIBILITIES**

General purpose:

Respond to emergencies and perform pre-hospital care, fire suppression activities, rescue, damage control, and property preservation. Performs with limited supervision through Department Standard Operating Guidelines and established protocols and directives. Maintains a state of readiness of facilities and equipment by completing scheduled checks, replacing equipment used, and cleanup of both station and apparatus. Promotes the health and safety of the department and community through education. Perform other related work as required or assigned.

### **PRINCIPLE DUTIES AND RESPONSIBILITIES OF THE CLASSIFICATION**

1. Respond to emergency medical calls and provide direct patient care in compliance with the department's SOGs, protocols, and directives as authorized by the department Medical Director up to the individual level of certification/training.
2. Respond to fire and rescue calls and perform suppression, rescue, ventilation, and rehabilitation in compliance with the department's SOGs and directives.
3. Attends minimum requirement of 2 drill days per month to enhance and maintain minimum competencies as required by state and local authority.
4. Assesses and coordinates the resources and personnel to facilitate patient safety and quality care.
5. Promotes departmental policies, procedures, objectives, safety, infection control and quality assurance programs.
6. Initiates and assists in developing and implementing improvements identified by the quality assurance program.
7. Participates in quality assurance program through critiques and debriefings.
8. Performs scheduled inspections and minor maintenance of equipment and facilities.
9. Interacts effectively, professionally, tactfully, and confidentially with patients, the general public, and all participating agencies: dispatch, law enforcement, medical, and hospital personnel.
10. Conducts educational and public relations activities in health and fire safety.
11. Shall complete or assure completion and properly file required department forms.
12. Cleans and/or decontaminates apparatus and equipment as outlined in the department exposure control plan and applicable guidelines.
13. Achieves continuous quality improvement benchmarks established by the Department and the Medical Director.



**CLASSIFICATION TITLE: FIREFIGHTER/ADVANCED EMT**

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**REPORTS TO:** Lieutenant

**FLSA STATUS:** Non-Exempt

**DEPARTMENT:** Fire

**CIVIL SERVICE STATUS:** Classified

**PAY STATUS/REF:** Full-Time

**EMPLOYMENT STATUS:** FT/Regular

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**JOB RESPONSIBILITIES**

General purpose:

Respond to emergencies and perform pre-hospital care, fire suppression activities, rescue, damage control, and property preservation. Performs with limited supervision through Department Standard Operating Guidelines and established protocols and directives. Maintains a state of readiness of facilities and equipment by completing scheduled checks, replacing equipment used, and cleanup of both station and apparatus. Promotes the health and safety of the department and community through education. Perform other related work as required or assigned.

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9. Interacts effectively, professionally, tactfully, and confidentially with patients, the general public, and all participating agencies: dispatch, law enforcement, medical, and hospital personnel.
10. Conducts educational and public relations activities in health and fire safety.
11. Shall complete or assure completion and properly file required department forms.
12. Cleans and/or decontaminates apparatus and equipment as outlined in the department exposure control plan and applicable guidelines.
13. Achieves continuous quality improvement benchmarks established by the Department and the Medical Director.



14. Safely operates fire department apparatus within the guidelines set forth by the department.

**EQUIPMENT OPERATED**

- Emergency response vehicles, medical equipment as authorized, fire suppression and rescue equipment and tools as authorized, photographic equipment, computers, office equipment, and communication equipment.

**KNOWLEDGE, SKILLS, AND ABILITIES - (\* indicates developed after employment)**

**Knowledge of:** City government structure; City and department policies and procedures\*; management techniques and equipment; emergency medical treatment techniques and equipment; fire suppression and fire prevention techniques and equipment; fire safety and enforcement laws, safety practices and procedures, employee training and development, geographic layout of municipality, incident command system, NIMS.

**Ability to** communicate effectively, orally and in writing; establish effective working relationships with peers and supervisors; and solve problems using logical and scientific thinking.

**QUALIFICATIONS:** Any combination of training and work experience that indicates possessing the above knowledge, skills, and abilities.

**LICENSURE OF CERTIFICATION REQUIREMENTS UPON APPOINTMENT**

- Possess a valid State of Ohio vehicle operator’s license, High School Diploma, or GED.
- State of Ohio Firefighter II
- State of Ohio EMT (minimum)

\*All personnel shall maintain a State of Ohio Advanced EMT certification (minimum) and a State of Ohio Firefighter II certification.

This position description in no manner states or implies that these are the only duties and responsibilities which may be performed by the position incumbent. The incumbent will be required to follow the instructions and perform duties required by the position’s supervisor, appointing authority, or designee.

\_\_\_\_\_  
Approved by Appointing Authority

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

I understand, and will perform to the best of my ability, the job duties and requirements specified in this position description.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

**CLASSIFICATION TITLE: FIREFIGHTER/PARAMEDIC**

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<b>REPORTS TO:</b>	Lieutenant	<b>FLSA STATUS:</b>	Non-Exempt
<b>DEPARTMENT:</b>	Fire	<b>CIVIL SERVICE STATUS:</b>	Unclassified
<b>PAY STATUS/REF:</b>	Full-Time	<b>EMPLOYMENT STATUS:</b>	FT/Regular

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**JOB RESPONSIBILITIES**

General purpose:

Respond to emergencies and perform pre-hospital care, fire suppression activities, rescue, damage control, and property preservation. Performs with limited supervision through Department Standard Operating Guidelines and established protocols and directives. Maintains a state of readiness of facilities and equipment by completing scheduled checks, replacing equipment used, and cleanup of both station and apparatus. Promotes health and safety of the department and community through education. Perform other related work as required or assigned.

**PRINCIPAL DUTIES AND RESPONSIBILITIES OF THE CLASSIFICATION**

1. Responds to emergency medical calls and provides direct patient care in compliance with the department's SOGs, protocols, and directives, as authorized by the department Medical Director up to the individual level of certification/training.
2. Respond to fire and rescue calls and perform suppression, rescue, ventilation, and rehabilitation in compliance with the department's SOGs and directives.
3. Attends minimum requirement of 2 drill days per month to enhance and maintain minimum competencies as state and local authority require.
4. Assesses and coordinates the resources and personnel to facilitate patient safety and quality care.
5. Promotes departmental policies, procedures, objectives, safety, infection control, and quality assurance programs.
6. Initiates and assists in developing and implementing improvements identified by the quality assurance program.
7. Participates in quality assurance program through critiques and debriefings.
8. Performs scheduled inspections and minor maintenance of equipment and facilities.
9. Interacts effectively, professionally, tactfully, and confidentially with patients, the general public, and all participating agencies: dispatch, law enforcement, medical, and hospital personnel.
10. Conducts educational and public relations activities in health and fire safety.
11. Shall complete or assure completion and properly file the required forms from the department.
12. Cleans and decontaminates apparatus and equipment as outlined in the department exposure control plan and applicable guidelines.
13. Achieves continuous quality improvement benchmarks established by the Department and the Medical Director.







**CIVIL SERVICE COMMISSION CHECKLIST**

**NATIONAL TESTING NETWORK**

**FULL-TIME: Firefighter/EMT – Firefighter/Advanced EMT - Firefighter/Paramedic**

**NTN TESTING OPEN:** Friday, November 1, 2024 to Friday, December 13, 2024 @ 1600

**DOCUMENTS THAT MUST BE SUBMITTED WITH APPLICATION**

*Please initial next to each item on the checklist indicating a copy is included with your application:*

- \_\_\_\_\_ APPLICANT DATA RECORD
- \_\_\_\_\_ AUTHORIZATION TO RELEASE INFORMATION
- \_\_\_\_\_ COPY OF DRIVER’S LICENSE
- \_\_\_\_\_ RECORD DOCUMENTING COMPLETION OF FIREFIGHTER MILE OR CPAT
- \_\_\_\_\_ COPY OF APPLICABLE STATE OF OHIO CERTIFICATIONS (Basic EMT, Advanced EMT or Paramedic and Firefighter II
- \_\_\_\_\_ COPY OF DD214 (If veteran)

\_\_\_\_\_ Date: \_\_\_\_\_  
Applicant Signature

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PLEASE REVIEW THE SECTION *DISQUALIFICATION OF APPLICANTS*. IF ANY PART OF THIS SECTION APPLIES TO YOU, YOU WILL BE DISQUALIFIED FROM THE ELIGIBILITY LIST. REQUEST FOR ADDITIONAL TIME OR ACCOMMODATION FOR A HANDICAPPED OR DISABLED APPLICANT (must be submitted in writing with supporting documentation)

ALL E-MAIL APPLICATIONS WILL BE CONFIRMED BY AN E-MAIL FROM CIVIL SERVICE OF ITS RECEIPT. IF YOU DO NOT RECEIVE THIS CONFIRMATION E-MAIL, THEN CIVIL SERVICE HAS NOT RECEIVED YOUR APPLICATION PACKET.

**Contact:** [civilservice@northwoodoh.gov](mailto:civilservice@northwoodoh.gov)



CITY OF NORTHWOOD  
APPLICATION FOR EMPLOYMENT

PLEASE PRINT CLEARLY

Position Applied For: \_\_\_\_\_ Date of Application: \_\_\_\_\_

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

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Telephone # \_\_\_\_\_ Cell # \_\_\_\_\_ Other Telephone # \_\_\_\_\_ Social Security Number \_\_\_\_\_

- Best time to contact you is: \_\_\_\_\_

- Are you capable of performing the essential functions of the job, with or without reasonable accommodations for which you have applied?  Yes  No If accommodations are needed, please list: \_\_\_\_\_

- Have you ever been employed here before?  Yes  No If yes, give date(s): \_\_\_\_\_

- Are you employed now?  Yes  No If yes, may we contact your current employer(s)?  Yes  No

- On what date would you be available to start work? \_\_\_\_\_

- Can you travel if a job requires it?  Yes  No

- Do any of your friends or relatives, other than your spouse, work here?  Yes  No

If yes, state their name(s), relationship and department that they work in: \_\_\_\_\_

**NOTE:** Your driving record may be requested from the Bureau of Motor Vehicles.

- Do you have a valid State of Ohio Driver's License?  Yes  No License #: \_\_\_\_\_

- How many points do you have on your driving record at the time you submitted this application? \_\_\_\_\_

- Do you have a valid State of Ohio Commercial Driver's License?  Yes  No License #: \_\_\_\_\_  
Class \_\_\_\_\_

- Is your CDL restricted to vehicles without air brakes (#L)?  Yes  No

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of non-job related medical condition or disability. You may exclude from this application any responses that indicate race, color, religion, sex, national origin, disability, age or ancestry.

## EDUCATION

TYPE OF SCHOOL	NAME	CITY/STATE	DATES ATTENDED	DEGREE	MAJOR/MINOR
High School		City: State:	To: From:		
Vocational/ Trade		City: State:	To: From:		
College		City: State:	To: From:		
College		City: State:	To: From:		
Other Training		City: State:	To: From:		

## MILITARY SERVICE

- Describe any job-related training received in the United States Military: \_\_\_\_\_  
\_\_\_\_\_
- Are you a Veteran?  Yes  No , if yes, were you honorably discharged?  Yes  No (if yes, you must provide a copy of DD-214 to show proof of service. If you successfully pass the exam, and have shown proof of service prior to taking the exam, you will be given 5 additional points.)
- Do you need any special accommodations for taking the exam?  Yes  No
- If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## PERSONAL/PROFESSIONAL REFERENCES

- Give name, address and telephone numbers of three (3) references. Do not use the name of past employers or relatives. These references may be called upon to furnish detailed information concerning your habits, character, job reference and ability.

	<u>Name</u>	<u>Address/Phone Numbers</u>	<u>Occupation</u>
1.	_____		
2.	_____		
3.	_____		

## EMPLOYMENT EXPERIENCE

- Start with your present job or last job (if unemployed). Include military service agreements and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, age or other protected status.

Dates Employed _____ to _____ mo./yr.                      mo./yr.	_____ (Employer Name)                      (Phone #)	Your Title and Duties: _____ _____ _____	May we contact <input type="checkbox"/> Yes <input type="checkbox"/> No
Hourly Rate / Salary \$ _____ to \$ _____ Starting                      Final	_____ (Address)	Reason for Leaving: _____ _____ _____	Initials _____
_____ to _____ mo./yr.                      mo./yr.	_____ (Employer Name)                      (Phone #)	Your Title and Duties: _____ _____ _____	May we contact <input type="checkbox"/> Yes <input type="checkbox"/> No
Hourly Rate / Salary \$ _____ to \$ _____ Starting                      Final	_____ (Address)	Reason for Leaving: _____ _____ _____	Initials _____
_____ to _____ mo./yr.                      mo./yr.	_____ (Employer Name)                      (Phone #)	Your Title and Duties: _____ _____ _____	May we contact <input type="checkbox"/> Yes <input type="checkbox"/> No
Hourly Rate / Salary \$ _____ to \$ _____ Starting                      Final	_____ (Address)	Reason for Leaving: _____ _____ _____	Initials _____
_____ to _____ mo./yr.                      mo./yr.	_____ (Employer Name)                      (Phone #)	Your Title and Duties: _____ _____ _____	May we contact <input type="checkbox"/> Yes <input type="checkbox"/> No
Hourly Rate / Salary \$ _____ to \$ _____ Starting                      Final	_____ (Address)	Reason for Leaving: _____ _____ _____	Initials _____

- Comments (Include explanations of any gaps in employment): \_\_\_\_\_
- List professional, trade, business or civic activities and offices held: \_\_\_\_\_
- List specialized skills (skills/equipment operated): \_\_\_\_\_
- Office machines operated \_\_\_\_\_
- Factory, construction or street equipment operated: \_\_\_\_\_
- Typing Speed: \_\_\_\_\_ w.p.m.
- Describe any other Special Training or Skills which are related to the kind of work you are applying for:  
 \_\_\_\_\_
- Resume attached:  Yes  No

**STATEMENT OF UNDERSTANDING AND SIGNATURE**

I understand a physical examination may be required.

I understand a credit check may be required, the results of which may have an impact on my eligibility to be employed by the City of Northwood.

I understand a positive drug screen will discharge me from further consideration for employment with the City of Northwood or cause me to be terminated as a city employee.

The City of Northwood established a drug-free workplace policy in accordance with the Drug-Free Workplace Act of 1988. I understand that all employees of the City of Northwood are required to sign the Employer's Drug Free Workplace Policy as a condition of employment.

The City of Northwood has residency requirements. Other than Employees holding positions created by the City Charter or those positions that fall under the fire department residency policy, employees must reside in the State of Ohio within the County of Wood or an adjacent county by the end of their probationary period. I understand that I must adhere by this residency policy.

I understand that I must sign a full release of information statement has a condition of my employment with the city for the purpose of verifying the information I have provided on this application.

I hereby certify that the answers given and statements made on this application are true are correct. I am aware that a representative of the City of Northwood may conduct an investigation of my background to assist in determining my suitability for this employment. I further understand that any applicant who intentionally makes a false statement or who practices fraud in filling out this application will be refused employment. If already appointed, subsequent evidence of misrepresentation will be considered adequate cause for termination of employment.

I hereby authorize all my previous employers and references to furnish any information concerning my personal character, health, reputation, habits and work records. I hereby release all such persons and the City of Northwood from liability or damages incurred as a result of furnishing or obtaining this information.

\_\_\_\_\_  
(Applicant's Signature)

\_\_\_\_\_  
(Date)

---

THIS SECTION IS FOR OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

Position / Test Applying For \_\_\_\_\_

Date Filed \_\_\_\_\_

Time Filed \_\_\_\_\_

Grade : _____	Passed <input type="checkbox"/>	Failed <input type="checkbox"/>	Placement: _____
---------------	---------------------------------	---------------------------------	------------------



## Applicant Data Record

Applicants are considered for all positions and employees are treated during employment without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition, or handicap.

As employers/government contractors, we comply with government regulations and affirmative action responsibilities.

Solely to help us comply with government record keeping, reporting and other legal requirements, please fill out the Applicant Data Record. 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 of Birth \_\_\_\_\_

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

Referral Source:  Advertisement  Friend  Relative  Walk-In  
 Employment Agency  Other \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_  
LAST FIRST MIDDLE Area Code

Address \_\_\_\_\_  
NUMBER STREET CITY STATE ZIP CODE

### 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.

Check one:  Male  Female

Check one of the following:

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

Check if any of the following are applicable:

Vietnam Era Veteran  Disabled Veteran  Handicapped Individual



**AUTHORIZATION TO RELEASE INFORMATION**

TO: Any Doctor, Physician, Psychiatrist, Dentist, Hospital, Nursing Home, Medical Association or other Health Care Provider; the U.S. Armed Forces, Maritime Services, Veterans Association; any Academic Dean, Registrar, Principal, Guidance Counselor, or person authorized to release information at any: School, College, University, Business School, Trade School, High School, or Elementary School; any Local, State or Federal Law Enforcement Agency; any past or present Employer, Credit Bureau, Retail Merchant Association, U.S. Selective Services, or any Government Agency; any renter of Realty Property.

I, \_\_\_\_\_, have applied for employment with the City of Northwood. I am aware that my entire background is to be investigated thoroughly. I hereby authorize and request release of any and all information you have concerning me, including, but not limited to my employment, military, credit, psychological, criminal (including expunged records pursuant to Ohio Revised Code 2953.33), medical, educational (including transcripts of any academic record) and any other records relating to achievement, attendance, personal history, discipline, and credit records. I hereby authorize you to release this information upon request to the bearer of this document. This release is executed with full knowledge and understanding that the information is for the official use of the City of Northwood. Consent is hereby granted for the City of Northwood to furnish this information as described above to third parties in the course of fulfilling its official responsibilities relative to my employment with the City of Northwood. I hereby release the City of Northwood, its officers, agents, employees and independent contractors as the custodian of such records, and employer, educational institution, physician, psychologist, psychiatrist, hospital, or other repository of medical records, credit bureau, consumer reporting agency, or military or governmental entity, including its officers, employees, or related personnel, both individually and collectively, from any and all responsibility or liability for damages of whatever kind, which may at any time result to me, my heirs, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it.

\_\_\_\_\_  
(printed full name) (signature) (date)

\_\_\_\_\_  
(street address) (city) (state) (zip code)

\_\_\_\_\_  
(telephone number) (date of birth)

\_\_\_\_\_  
(witness's signature) (date)