APPLICATION FOR EMPLOYMENT

Wayne County Board of Developmental Disabilities
266 Oldman Road
Wooster, Ohio 44691

Last Name, First Name

Mission Statement

The mission of the Wayne County Board of Developmental Disabilities, in partnership with enrollees, families, staff, and the community, is to provide choices and options based on individual and family preferences enabling a quality of life satisfying to the individual in learning, living, working, and participation in the community.

Thank you for your interest in employment with the Wayne County Board of Developmental Disabilities. The Board provides education, vocational training, residential services, support services, and transportation services for children and adults who are developmentally disabled and live in Wayne County.

The Wayne County Board of Developmental Disabilities recruits, selects, trains, and retains people who share our commitment to providing quality services to individuals with developmental disabilities. People who are hired should demonstrate skills and abilities such as: respect for others, ability to resolve problems in a positive and productive way, interest in service, and commitment to excellence. If you have these values, please continue to complete this application.

In completing your application, please be sure to provide as much detail as possible. Answer all questions thoroughly. Type or print in black ink clearly. Be sure your signature and the date appear on the last page of the application.

HIRING PROCESS

It is the policy of the Wayne County Board of Developmental Disabilities to only accept applications for advertised positions.

When completed applications are received by the Superintendent's office, they are reviewed and made available to the program area where the appropriate opening exists.

Because there are generally more applicants than open positions, we cannot promise an interview for each applicant. Interviews will be scheduled based upon the applicant's qualifications (e.g. education, related experience, etc.), date of application, position openings at that time, etc.

Following the initial interview with the administrator of the program, applicants may be recommended for an additional interview with the Superintendent. Though such interviews are scheduled promptly, the total process may take several weeks.

All applications will be kept on file for one year. If you are not hired, yet continue to have an interest in employment after a year, you should submit another application.

An Equal Opportunity Employer and Service Provider

Position applying for: _____

PERSONAL INFORMATION

Please type or print clearly Date _____

Name _____

Last First MI

Address _____

No. Street City State Zip Code

Home Phone # (_____)_____ Cell Phone # (_____)_____

E-mail address _____ Best method to contact: _____

Position(s) applied for (please be specific): _____

_____

Are you interested in: ☐ Full-Time ☐ Substitute Date available to start work?_____

Do you currently work for any other Wayne County agency? ☐ Yes ☐ No

Have you worked for this agency before? ☐ Yes ☐ No

Have you been a continuous Ohio resident for the past five years? ☐ Yes ☐ No

Do you have a relative that works for the Wayne County Board of DD? ☐ Yes ☐ No

If so, what is their relation to you? _____

Preferred Salary:_____

EDUCATION

Check years completed Diploma or Degree

Name and Location
Of High School _____ ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ Yes ☐ No*

*If no, did you obtain a GED? ☐ Yes ☐ No Date obtained _____
**Please provide a copy

College _____ ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ Associate ☐ BS ☐ BA ☐ B.Ed

Major - _____

Minor - _____

College _____ ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ MA ☐ M.Ed ☐ Ph.D. ☐ Other

Major - _____

Minor - _____

Other special qualifications or skills: _____

_____

Describe any mechanical experience or interests _____

_____

List personal computer experience (hardware and software) _____

_____

CREDENTIALS

For many positions, state certification, licensure or registration requirements MUST be met. If you have current credentials, be sure to enclose copies of the applicable document(s) and complete the information below as it relates to the position(s) for which you have applied.

Have you ever held a Department of Education certification? ☐ Yes ☐ No

Type________________________ Grade ______________ Exp Date __________

Have you ever held a Department of Developmental Disabilities certificate or registration? ☐ Yes ☐ No

Type____________________ Validation ____________ Grade ____________ Exp Date __________

Have you ever had a certificate, license or registration revoked or suspended? ☐ Yes ☐ No If yes, please explain: ____

EMPLOYMENT HISTORY

(List most recent first) Use additional sheet if necessary

Employer ________________________________ Phone (_____)____________

Address ______________________ City, State, Zip ____________________

Job Title ______________________ Duties ____________________

____

Name and Title of Supervisor ______________________ May we contact? ☐ Yes ☐ No

From __________ To ____________ ☐ Full-Time ☐ Part Time Salary/Wages $ __________

Reason for leaving ____

____

Employer ________________________________ Phone (_____)____________

Address ______________________ City, State, Zip ____________________

Job Title ______________________ Duties ____________________

____

Name and Title of Supervisor ______________________ May we contact? ☐ Yes ☐ No

From __________ To ____________ ☐ Full-Time ☐ Part Time Salary/Wages $ __________

Reason for leaving ____

____

Employer ________________________________ Phone (_____)____________

Address ______________________ City, State, Zip ____________________

Job Title ______________________ Duties ____________________

____

Name and Title of Supervisor ______________________ May we contact? ☐ Yes ☐ No

From __________ To ____________ ☐ Full-Time ☐ Part Time Salary/Wages $ __________

Reason for leaving ____

____

REFERENCES

List three references, excluding former employers or relatives, who this agency has permission to contact.

Name	Address	Years Known	Occupation	Phone Number

ADDITIONAL INFORMATION

Please summarize other experiences, skills or qualifications, which you feel would qualify you for the position(s) for which you have applied.

_____

_____

_____

_____

APPLICANT'S AGREEMENT

I certify that I have read and understand the information on this application and that the answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief. I also grant permission to have this application and enclosures duplicated and distributed.

I understand that any false information, omissions or misrepresentations of fact called for in this application may result in rejection of my application or immediate discharge at any time during my employment. I understand that, as a condition of initial or continued employment, I agree to submit to such lawful examinations, medical or substance abuse or others as may be required by the Board.

I authorize the Wayne County Board of Developmental Disabilities and/or its agents, including consumer reporting bureaus to verify any of this information by searching appropriate information and record sources. I authorize all employers, persons, schools, companies, law enforcement authorities and state agencies to release any information concerning my background and hereby release those parties from any liability for any damage whatsoever for issuing this information.

I confirm that I meet all the requirements as stated on the job posting(s) for the position(s) for which I am applying. I am able to perform all duties as described.

I understand and agree that as a condition of employment, I shall meet and maintain all required standards of my position which involves certification, registration, licensure and training, I further understand that I may be required to enroll in college courses and training to comply with employment and certification requirements.

ANY PERSON WHO KNOWLINGLY MAKES A FALSE STATEMENT IS GUILTY OF FALSIFICATION UNDER SECTION 2921.13 OF THE REVISED CODE, WHICH IS A MISDEMEANOR OF THE FIRST DEGREE.

_____ _____

Signature of applicant Date

ONLY APPLICATIONS THAT ARE COMPLETED IN FULL AND ARE LEGIBLE WILL BE CONSIDERED

AN EQUAL OPPORTUNITY EMPLOYER AND SERVICE PROVIDER

Revised April 2022

Attestation and Agreement to Notify Employer

I hereby attest that I have not: 1) been convicted of, 2) pleaded guilty to, or 3) been found eligible for intervention in lieu of conviction, for any of the disqualifying offenses listed below and agree that I will notify my employer, WAYNE COUNTY BOARD OF DD (Employer's Name), within 14 calendar days, if while employed, I am formally charged with, am convicted of, plead guilty to, or am found eligible for intervention in lieu of conviction for any of the disqualifying offenses. I understand that failure to make this notification may result in termination of employment.

_____ (Applicant's Signature)

_____ (Date Signed)

_____ (Applicant's Name Printed)

Tier 1 Disqualifying Offenses (Permanent Exclusion):

2903.01 (aggravated murder)
2903.02 (murder)
2903.03 (voluntary manslaughter)
2903.11 (felonious assault)
2903.15 (permitting child abuse)
2903.16 (failing to provide for a functionally impaired person)
2903.34 (patient abuse or neglect)
2903.341 (patient endangerment)
2905.01 (kidnapping)
2905.02 (abduction)
2905.32 (trafficking in persons)
2905.33 (unlawful conduct with respect to documents)
2907.02 (rape)
2907.03 (sexual battery)
2907.04 (unlawful sexual conduct with minor)
2907.05 (gross sexual imposition)
2907.06 (sexual imposition)
2907.07 (importuning)
2907.08 (voyeurism)
2907.12 (felonious sexual penetration)
2907.31 (disseminating matter harmful to juveniles)
2907.32 (pandering obscenity)
2907.321 (pandering obscenity involving a minor or impaired person)

2907.322 (pandering sexually oriented matter involving a minor or impaired person)
2907.323 (illegal use of minor or impaired person in nudity-oriented material or performance)
2909.22 (soliciting or providing support for act of terrorism)
2909.23 (making terroristic threat)
2909.24 (terrorism)
2913.40 (Medicaid fraud)
2923.01 (conspiracy) when the underlying offense is any of the offenses or violations on this list
2923.02 (attempt to commit an offense) when the underlying offense is any of the offenses or violations on this list
2923.03 (complicity) when the underlying offense is any of the offenses or violations on this list
A conviction related to fraud, theft, embezzlement, breach of fiduciary responsibility, or other financial misconduct involving a federal or state-funded program, excluding the disqualifying offenses set forth in section 2913.46 of the Revised Code (illegal use of supplemental nutrition assistance or WIC program benefits).
A violation of an existing or former municipal ordinance or law of this state, any other state, or the United States that is substantially equivalent to any of the offenses or violations on this list.

Tier 2 Disqualifying Offenses (Ten-Year Exclusion):

2903.04 (involuntary manslaughter)
2903.041 (reckless homicide)
2905.04 (child stealing) as it existed prior to July 1, 1996
2905.05 (criminal child enticement)
2905.11 (extortion)
2907.21 (compelling prostitution)
2907.22 (promoting prostitution)
2907.23 (enticement or solicitation to patronize a prostitute; procurement of a prostitute for another)
2909.02 (aggravated arson)
2909.03 (arson)
2911.01 (aggravated robbery)
2911.11 (aggravated burglary)
2913.46 (illegal use of supplemental nutrition assistance or WIC program benefits)
2913.48 (workers' compensation fraud)
2913.49 (identity fraud)
2917.02 (aggravated riot)
2923.01 (conspiracy) when the underlying offense is any of the offenses or violations on this list
2923.02 (attempt to commit an offense) when the underlying offense is any of the offenses or violations on this list
2923.03 (complicity) when the underlying offense is any of the offenses or violations on this list
2923.12 (carrying concealed weapons)
2923.122 (illegal conveyance or possession of deadly weapon or dangerous ordnance or of object indistinguishable from firearm in school safety zone)
2923.123 (illegal conveyance of deadly weapon or dangerous ordnance into courthouse - illegal possession or control in courthouse)
2923.13 (having weapons while under disability)
2923.161 (improperly discharging firearm at or into a habitation, in a school safety zone or with intent to cause harm or panic to persons in a school building or at a school function)
2923.162 (discharge of firearm on or near prohibited premises)
2923.21 (improperly furnishing firearms to minor)
2923.32 (engaging in pattern of corrupt activity)
2923.42 (participating in criminal gang)
2925.02 (corrupting another with drugs)
2925.03 (trafficking, aggravated trafficking in drugs)
2925.04 (illegal manufacture of drugs - illegal cultivation of marihuana - methamphetamine offenses)
2925.041 (illegal assembly or possession of chemicals for manufacture of drugs)
3716.11 (placing harmful or hazardous objects in food or confection)
A violation of an existing or former municipal ordinance or law of this state, any other state, or the United States that is substantially equivalent to any of the offenses or violations on this list.

Tier 3 Disqualifying Offenses (Seven-Year Exclusion):

959.13 (cruelty to animals)
959.131 (prohibitions concerning companion animals)
2903.12 (aggravated assault)
2903.21 (aggravated menacing)
2903.211 (menacing by stalking)
2905.12 (coercion)
2909.04 (disrupting public services)
2911.02 (robbery)
2911.12 (burglary)
2913.47 (insurance fraud)
2917.01 (inciting to violence)
2917.03 (riot)
2917.31 (inducing panic)
2919.22 (endangering children)
2919.25 (domestic violence)
2921.03 (intimidation)
2921.11 (perjury)
2921.13 (falsification - in theft offense - to purchase firearm)
2921.34 (escape)
2921.35 (aiding escape or resistance to lawful authority)
2921.36 (illegal conveyance of weapons, drugs or other prohibited items onto grounds of detention facility or institution)
2923.01 (conspiracy) when the underlying offense is any of the offenses or violations on this list
2923.02 (attempt to commit an offense) when the underlying offense is any of the offenses or violations on this list
2923.03 (complicity) when the underlying offense is any of the offenses or violations on this list
2925.05 (funding, aggravated funding of drug or marihuana trafficking)
2925.06 (illegal administration or distribution of anabolic steroids)
2925.24 (tampering with drugs)
2927.12 (ethnic intimidation)
A violation of an existing or former municipal ordinance or law of this state, any other state, or the United States that is substantially equivalent to any of the offenses or violations on this list.

Tier 4 Disqualifying Offenses (Five-Year Exclusion):

2903.13 (assault)
2903.22 (menacing)
2907.09 (public indecency)
2907.24 (soliciting; solicitation after a positive HIV test)
2907.25 (prostitution - after a positive HIV test)
2907.33 (deception to obtain matter harmful to juveniles)
2911.13 (breaking and entering)
2913.02 (theft)
2913.03 (unauthorized use of a vehicle)
2913.04 (unauthorized use of property - computer, cable, or telecommunication property)
2913.05 (telecommunications fraud)
2913.11 (passing bad checks)
2913.21 (misuse of credit cards)

2913.31 (forgery - forging identification cards or selling or distributing forged identification cards)
2913.32 (criminal simulation)
2913.41 (defrauding a rental agency or hostelry)
2913.42 (tampering with records)
2913.43 (securing writings by deception)
2913.44 (personating an officer)
2913.441 (unlawful display of law enforcement emblem)
2913.45 (defrauding creditors)
2913.51 (receiving stolen property)
2919.12 (unlawful abortion)
2919.121 (unlawful abortion upon minor)
2919.123 (unlawful distribution of an abortion-inducing drug)
2919.124 (unlawful performance of a drug-induced abortion)
2919.23 (interference with custody)
2919.24 (contributing to unruliness or delinquency of a child)
2921.12 (tampering with evidence)
2921.21 (compounding a crime)
2921.24 (disclosure of confidential information)
2921.32 (obstructing justice)
2921.321 (assaulting or harassing police dog or horse or service dog)
2921.51 (impersonation of peace officer or private police officer)
2923.01 (conspiracy) when the underlying offense is any of the offenses or violations on this list
2923.02 (attempt to commit an offense) when the underlying offense is any of the offenses or violations on this list
2923.03 (complicity) when the underlying offense is any of the offenses or violations on this list
2925.09 (unapproved drugs - dangerous drug offenses involving livestock)
2925.11 (possession of controlled substances other than a minor drug possession offense)
2925.13 (permitting drug abuse)
2925.22 (deception to obtain a dangerous drug)
2925.23 (illegal processing of drug documents)
2925.36 (illegal dispensing of drug samples)
2925.55 (unlawful purchase of pseudoephedrine or ephedrine product)
2925.56 (unlawful sale of pseudoephedrine or ephedrine product)
A violation of an existing or former municipal ordinance or law of this state, any other state, or the United States that is substantially equivalent to any of the offenses or violations on this list.