



NORTH ROYALTON POLICE DEPARTMENT

Lateral Transfer Application

Applicant Information

Name: _____

Last

First

Middle

Address: _____

City: _____

State: _____ Zip: _____

Telephone: _____

Cell: _____

Email

Address: _____

Driver's License Number: _____ Social Security

Number: _____

If you have ever been charged with, or convicted of, any violation of the law in either Ohio or any other state, provide the date and location, the charges, and the disposition of the charges.

Any felony conviction is a disqualifier.

Applicant's Signature: _____

Personal References – Please list 3 non-relative professional references

Name: _____ Phone: _____

How Known: _____

Address: _____

Name: _____ Phone: _____

How Known: _____

Address: _____

Name: _____ Phone: _____

How Known: _____

Address: _____

NORTH ROYALTON POLICE DEPARTMENT

Lateral Transfer Application

Educational Background

High School: _____

From: _____ To: _____

Address: _____

Graduate (Circle One) YES NO

College: _____

From: _____ To: _____

Address: _____

Graduate (Circle One) YES NO

Other: _____

From: _____ To: _____

Address: _____

Graduate (Circle One) YES NO

Military Experience

Branch: _____ From: _____ To: _____ Discharge Date: _____

Attach copy of DD214

Rank at Discharge: _____ Discharge

Classification: _____

Employment History

Name: _____

_____ Phone: _____

Address: _____

Job

Title: _____ From: _____

_____ To: _____

Supervisor: _____ May we contact as a reference YES NO

Name: _____

_____ Phone: _____

Address: _____

Job

Title: _____ From: _____

_____ To: _____

Supervisor: _____ May we contact as a reference YES NO

Name: _____

_____ Phone: _____

Address: _____

Job Title: _____ From: _____

_____ To: _____

Supervisor: _____ May we contact as a reference YES NO



NORTH ROYALTON POLICE DEPARTMENT

Authorization for Release of Personal Information

I, _____, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the North Royalton Police Department, whether the said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions; financial or credit institutions; including records of loans; the records of commercial or retail credit agencies (including credit reports and/or ratings); and other financial statements and records wherever filed; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the U.S. Veterans' Administration; employment and pre-employment records, including background reports, polygraph and/or Computerized Voice Stress Analyzer reports, charts and tapes; efficiency ratings, complaints or grievances filed by or against me; and the records and recollections of attorneys at law, or other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have or have had an interest.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or part, upon this release authorization will be considered in determining my suitability for employment by the North Royalton Police Department. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

Full Name: _____
_____/_____/_____/_____/_____
Please Print Social Security Number Date of Birth

Address: _____
_____/_____/_____/_____/_____
Number Street Name City State Zip Code

Signature: _____ Phone: _____

Sworn to and subscribed before me this _____ day of _____, 2023

In the county of Cuyahoga and the state of Ohio Affix seal here

_____ My Commission

Expires: _____
Signature of Notary



NORTH ROYALTON POLICE DEPARTMENT

Waiver / Authority to Release Information

To Whom It May Concern:

I hereby certify that I have given the North Royalton Police Department permission to obtain a copy of any arrest or conviction record pertaining to me now in the files of the Ohio Bureau of Criminal Identification, London, Ohio.

I hereby release the Ohio Bureau of Identification and Investigation and all individuals connected therewith from all liability in connection with the dissemination of such arrest and conviction data.

Signature: _____ Date: _____

Full Name (Typed or printed) _____

STATE OF OHIO
COUNTY OF CUYAHOGA

Being first duly sworn on his/her oath say that the statements made and subscribed by him/her in the foregoing application are true.

Signature of Applicant _____

Subscribed in my presence by the said affiant and by him/her sworn to before me this

_____ day of _____, 2023.

Seal

In the county of Cuyahoga and the state of Ohio

_____ My Commission
Expires: _____
Signature of Notary



NORTH ROYALTON POLICE DEPARTMENT

Lateral Transfer Instructions
PLEASE READ CAREFULLY

Lateral Transfer candidates for North Royalton Police Department shall meet the following prerequisites:

- Currently employed or previously employed within the last twelve (12) months, as a full-time peace officer working a minimum of thirty (30) hours per week in a jurisdiction in the State of Ohio. A peace officer is defined in O. R. C. 109.71.
- Candidate must be Ohio Peace Officer Training Academy (OPOTA) certified or present an OPOTA letter of training equivalency. A valid (passing) certificate from the Cuyahoga County Community College police agility exam must be presented.
- Candidate must have a minimum of one (1) year of full-time experience with an Ohio State Certified Law Enforcement Agency including having completed the probationary period.
- Candidate shall not be eligible to receive an appointment as a lateral transfer if the Candidate is thirty-five (35) years of age or older. Candidate disqualifiers include any felony level conviction or currently being charged or under indictment for any felony level offense. Expunged and sealed criminal records are subject to review by the Police Division for disqualifying criminal history.
- Those interested in being considered for lateral transfers to the North Royalton Police Department shall print, complete, and return:
 - Application
 - Checklist (this page)
 - Authorization for Release of Personal Information
 - Waiver / Authority to Release Information
 - Copy of valid driver's license
 - Copy of OPOTA Certificate
 - Original, current head and shoulders photograph (at least 2 x 2 passport type)

- If you have a military background, a copy of your DD214 is required.

1. Please mail the application (and paperwork) in a full size 10 x 13 envelope to:

North Royalton City Hall
14600 State Road
North Royalton, Ohio 44133
ATTN: Karen Pokrandt-Lateral Transfer

~OR~

By dropping off the completed paperwork listed above in a full size 10 x 13 envelope with applicant's name, Lateral Transfer, Attn: Karen Pokrandt written on it. Applications can be dropped off **Monday through Friday, 8 a.m. til 4:30 p.m.**