

LORAIN COUNTY SHERIFF'S OFFICE

9896 Murray Ridge Road
Elyria, Ohio 44035
Lorain 440-244-0373 Elyria 440-329-3710

APPLICATION FOR AUXILIARY DEPUTY SHERIFF

Last Name: _____ First: _____ MI: _____
Address: _____ City: _____ Zip: _____
Home Phone: _____ Work: _____
Dob: _____ Social Security Number: _____
Hgt: _____ Wgt: _____ Hair: _____ Eyes: _____
Married ___ Single ___ Divorced___ Separated ___
American Citizen: yes ___ No ___ Legal Alien: yes ___ No ___
How did you learn of our organization? _____

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EDUCATION

School name & location	yrs completed	graduate?
College: _____	_____	_____
High School: _____	_____	_____
Elementary: _____	_____	_____
Other: _____	_____	_____

Membership in any Professional or Civic Organizations? _____

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MILITARY

Branch: _____ Date of service: _____
Describe duties and any special training:

Rank at discharge: _____ Date of discharge: _____ Type of discharge: _____

HISTORY

What was your previous address: _____ City: _____
How long were you there? _____ Have you ever been bonded? _____ if yes, by whom _____
Have you ever been convicted of a criminal act other than traffic offenses that has not been annulled, expunged or sealed by a court? _____ if yes explain below:
