

APPENDIX D – CERTIFICATE OF QUALIFICATION FOR EMPLOYMENT FORMS

1. PETITION FOR CERTIFICATE OF QUALIFICATION FOR EMPLOYMENT
2. AFFIDAVIT OF INDIGENCY
3. FINANCIAL DISCLOSURE/AFFIDAVIT OF INDIGENCY
4. NOTICE TO COURT OF PETITION FOR CERTIFICATE OF QUALIFICATION FOR
EMPLOYMENT
5. NOTICE TO PROSECUTOR OF PETITION FOR CERTIFICATE OF
QUALIFICATION FOR EMPLOYMENT
6. RESPONSE TO REQUEST FOR INFORMATION REGARDING PETITION FOR
CERTIFICATE OF QUALIFICATION FOR EMPLOYMENT
7. ORDER FOR INVESTIGATION REGARDING PETITION FOR CERTIFICATE OF
QUALIFICATION FOR EMPLOYMENT
8. ORDER FOR ADDITIONAL INFORMATION PETITION FOR CERTIFICATE OF
QUALIFICATION FOR EMPLOYMENT
9. JUDGMENT ENTRY GRANTING PETITION FOR CERTIFICATE OF
QUALIFICATION FOR EMPLOYMENT
10. JUDGMENT ENTRY DENYING PETITION FOR CERTIFICATE OF
QUALIFICATION FOR EMPLOYMENT

IN THE COURT OF COMMON PLEAS
WASHINGTON COUNTY, OHIO

IN RE: _____

CASE NO:

DRC ELECTRONIC PETITION NO:

**PETITION FOR
CERTIFICATE OF QUALIFICATION FOR EMPLOYMENT (RC 2953.25)**

I, _____ hereby petition this Court for a Certificate of Qualification for Employment. I am a resident of Washington County, Ohio. I have suffered a collateral sanction that is related to employment or occupational licensing as a result of one or more convictions or pleas of guilty to a criminal offense. I am applying directly with this Court, and assert that no time has been served by me on a term in a state correctional institution or in a department-funded program.

Respectfully Submitted,

Signature

Name

Street

City, State Zip

Phone Number

Fax Number (if any)

Email

IN THE COURT OF COMMON PLEAS
WASHINGTON COUNTY, OHIO

IN RE: _____

CASE NO:

DRC ELECTRONIC PETITION NO:

JUDGE:

AFFIDAVIT OF INDIGENCY

I, _____, do hereby state that I am without the necessary funds to pay the costs of this action for the following reason(s):

I am requesting that the filing fee and security deposit, if applicable, be waived.

Affiant

Sworn to, or affirmed, and subscribed in my presence this _____ day of _____,
20__.

Notary Public

My Commission Expires: _____

NOTE: This affidavit must be executed not more than six months prior to being filed in the court. Affidavits not in compliance will be rejected for filing by the Clerk.

FINANCIAL DISCLOSURE / AFFIDAVIT OF INDIGENCY
 (\$25.00 application fee may be assessed—see notice on reverse side)

I. PERSONAL INFORMATION

| | | | | | |
|------------------|--|--------|---|-------------------|----------|
| Applicant's Name | | D.O.B. | Person Represented's Name (if juvenile) | | D.O.B. |
| Mailing Address | | | City | State | Zip Code |
| Case No. | | | Phone () | Cell Phone () | |

II. OTHER PERSONS LIVING IN HOUSEHOLD

| | | | | | |
|------------|--------|--------------|------------|--------|--------------|
| Name 1) | D.O.B. | Relationship | Name 3) | D.O.B. | Relationship |
| 2) | | | 4) | | |

III. PRESUMPTIVE ELIGIBILITY

Please place an 'X'

Ohio Works First / TANF: ___ SSI: ___ SSD: ___ Medicaid: ___ Poverty Related Veterans' Benefits: ___ Food Stamps: ___

Refugee Settlement Benefits: ___ Incarcerated: ___ Committed to a Public Mental Health Facility: ___

Other (please describe): _____ Juvenile: ___ (if juvenile, please continue at section VIII)

IV. INCOME AND EMPLOYER

| | Applicant | Spouse | Total Income |
|---|-----------|--------|--------------|
| Gross Monthly Employment Income | | | |
| Unemployment, Worker's Compensation, Child Support, Other Types of Income | | | |
| TOTAL INCOME | | | \$ |

Employer's Name: _____ Phone Number: _____

Employer's Address: _____

V. LIQUID ASSETS

| Type of Asset | Estimated Value |
|--|-----------------|
| Checking, Savings, Money Market Accounts | \$ |
| Stocks, Bonds, CDs | \$ |
| Other Liquid Assets or Cash on Hand | \$ |
| Total Liquid Assets | \$ |

VI. MONTHLY EXPENSES

| Type of Expense | Amount | Type of Expense | Amount |
|--|-----------|---|-----------|
| Child Support Paid Out | | Telephone | |
| Child Care (if working only) | | Transportation for Work / Fuel | |
| Insurance | | Taxes Withheld or Owed | |
| Medical / Dental Expenses or Associated Costs of Caring for Infirm Family Member | | Credit Card, Other Loans | |
| Rent / Mortgage | | Utilities (Gas, Electric, Water / Sewer, Trash) | |
| Food | | Other (Specify) | |
| EXPENSES | \$ | EXPENSES | \$ |

VII. INITIAL DETERMINATION OF INDIGENCY

TOTAL INCOME: _____

TOTAL LIQUID ASSETS: + _____

EXPENSES: - _____

TOTAL ADJUSTED INCOME: = _____

_____ The total adjusted income is at or below 187.5% of the Federal Poverty Guidelines

_____ The applicant is unable to pay filing fees/deposit

_____ The total adjusted income is between 187.5% - 125% of the Federal Poverty Guidelines.

VIII. \$25.00 APPLICATION FEE NOTICE

By submitting this Financial Disclosure / Affidavit of Indigency Form, you will be assessed a non-refundable \$25.00 application fee unless waived or reduced by the court. If assessed, the fee is to be paid to the clerk of courts within seven (7) days of submitting this form to the entity that will make a determination regarding your indigency.

IX. AFFIDAVIT OF INDIGENCY

I, _____ (applicant) being duly sworn, state:

1. I am financially unable to pay the required filing fees/deposit without substantial hardship to me or my family.
2. I understand that I must inform the court if my financial situation should change before the disposition of the case(s) for which assistance is being provided.
3. I understand that I may be subject to criminal charges for providing false financial information in connection with this application.
4. I hereby certify that the information I have provided on this financial disclosure form is true to the best of my knowledge.

Affiant's signature

Date

Notary Public / Individual duly authorized to administer oath:

Subscribed and duly sworn before me according to law, by the above named applicant this _____ day of _____, _____, at _____, County of _____, State of Ohio.

Signature of person administering oath

Title (example: Notary, Deputy Clerk of Courts, etc.)

X. JUDGE CERTIFICATION

I hereby certify that above-noted applicant is unable to fill out and / or sign this financial disclosure / affidavit for the following reason: _____ . I have determined that the applicant meets the criteria for receiving relief from payment of the filing fee/court deposit.

Judge's signature

Date

IN THE COURT OF COMMON PLEAS
WASHINGTON COUNTY, OHIO

IN RE: _____

CASE NO:

DRC ELECTRONIC PETITION NO:

JUDGE:

**NOTICE TO COURT OF PETITION FOR
CERTIFICATE OF QUALIFICATION FOR EMPLOYMENT (RC 2953.25)**

You are hereby notified that a Petition for Certificate of Qualification for Employment was filed by the above captioned Petitioner in this Court (see Attached Exhibit A). If you are interested in providing any information regarding this petition, please complete the attached form and file with the undersigned clerk of courts within twenty one days.

CLERK OF COURTS,

Signature
Street
City, State Zip
Phone Number
Fax Number
Email

IN THE COURT OF COMMON PLEAS
WASHINGTON COUNTY, OHIO

IN RE: _____

CASE NO:

DRC ELECTRONIC PETITION NO:

JUDGE:

**NOTICE TO PROSECUTOR OF
PETITION FOR CERTIFICATE OF QUALIFICATION FOR EMPLOYMENT (RC
2953.25)**

You are hereby notified that a Petition for Certificate of Qualification for Employment was filed by the above captioned Petitioner in this Court (see Attached Exhibit A). If you are interested in providing any information regarding this petition, please complete the attached form and file with the undersigned clerk of courts within twenty one days.

CLERK OF COURTS,

Signature
Street
City, State Zip
Phone Number
Fax Number
Email

IN THE COURT OF COMMON PLEAS
WASHINGTON COUNTY, OHIO

IN RE: _____

CASE NO:

DRC ELECTRONIC PETITION NO:

JUDGE:

**RESPONSE TO REQUEST FOR INFORMATION REGARDING
PETITION FOR CERTIFICATE OF QUALIFICATION FOR EMPLOYMENT (RC
2953.25)**

The undersigned voluntarily submits the following information regarding the above captioned Petition.
NOTE: It is not necessary to submit any or all of the information listed below.

1. Please check one of the following:
 - I recommend the Petitioner receive a CQE.
 - I do not recommend the Petitioner receive a CQE.
 - I have no opinion.

If you marked "recommend" or "do not recommend," please comment below:

2. The Petitioner did/did not (circle one) successfully completed community control sanctions.

Comments:

3. The Petitioner does/does not (circle one) owe any outstanding monies.

Comments:

4. Additional Comments:

Respectfully Submitted,

Signature

Name of Person Submitting Information

Position (if victim, indicate here _____)

Name of Organization: Court, Prosecutor's
Office, Other

Street

City, State Zip

Phone Number

Fax Number

Email

IN THE COURT OF COMMON PLEAS
WASHINGTON COUNTY, OHIO

IN RE: _____

CASE NO:

DRC ELECTRONIC PETITION NO:

JUDGE:

**ORDER FOR INVESTIGATION REGARDING
PETITION FOR CERTIFICATE OF QUALIFICATION FOR EMPLOYMENT (RC
2953.25)**

Upon consideration of the above captioned Petition for Certificate of Qualification for Employment, the Court hereby Orders the criminal background investigator to do the following and report back its findings within _____ days of this Order:

- _____ 1. Attempt to determine all other courts in the state in which the Petitioner has been convicted of or plead guilty to an offense.
- _____ 2. Obtain a current LEADS report on Petitioner.
- _____ 3. Verify the accuracy of information submitted in the Petition.
- _____ 4. Other: (specify)

IT IS SO ORDERED.

JUDGE/MAGISTRATE

DATE

IN THE COURT OF COMMON PLEAS
WASHINGTON COUNTY, OHIO

IN RE: _____

CASE NO:

DRC ELECTRONIC PETITION NO:

JUDGE:

ORDER FOR ADDITIONAL INFORMATION

**PETITION FOR CERTIFICATE OF QUALIFICATION FOR EMPLOYMENT (RC
2953.25)**

Upon consideration of the above captioned Petition for Certificate of Qualification for
Employment, the Court hereby Orders the Petitioner to provide the following information within
_____ days of this Order:

IT IS SO ORDERED.

JUDGE/MAGISTRATE

DATE

IN THE COURT OF COMMON PLEAS
WASHINGTON COUNTY, OHIO

IN RE: _____

CASE NO:

DRC ELECTRONIC PETITION NO:

JUDGE:

**JUDGMENT ENTRY GRANTING
PETITION FOR CERTIFICATE OF QUALIFICATION
FOR EMPLOYMENT (RC 2953.25)**

Upon consideration of the above captioned Petition for Certificate of Qualification for Employment, the Court hereby finds:

The Petitioner has suffered a COLLATERAL SANCTION that is related to employment or occupational licensing as a result of individual's conviction of or plea of guilty to an offense (felony or misdemeanor) and that applies by operation of law in this state; AND

The Petitioner has established by a preponderance of the evidence that granting the petition will materially assist the individual in obtaining employment/occupational license; AND

The Petitioner has established by a preponderance of the evidence the Petitioner has a substantial need for the relief requested in order to live a law-abiding life; AND

The Petitioner has established by a preponderance of the evidence that granting the petition would not pose an unreasonable risk to the safety of the public or any individual.

THEREFORE, it is HEREBY ORDERED, ADJUDGED AND DECREED that the above captioned Petition for Certificate of Qualification for Employment is hereby GRANTED. The

purpose for this certificate is to assist the petitioner in obtaining employment and to obtain a _____ (insert none if not applicable) license from the Ohio _____ licensing board.

IT IS FURTHER ORDERED that the Clerk Notify the Department of Rehabilitation and Corrections that a Certificate of Qualification for Employment shall be issued to Petitioner.

The Clerk is HEREBY ORDERED to provide written notice to Petitioner.

IT IS SO ORDERED,

JUDGE

IN THE COURT OF COMMON PLEAS
WASHINGTON COUNTY, OHIO

IN RE: _____

CASE NO:

DRC ELECTRONIC PETITION NO:

JUDGE:

**JUDGMENT ENTRY DENYING
PETITION FOR CERTIFICATE OF QUALIFICATION
FOR EMPLOYMENT (RC 2953.25)**

Upon consideration of the above captioned Petition for Certificate of Qualification for Employment, the Court hereby finds:

The Petitioner has/has not (circle one) suffered a COLLATERAL SANCTION that is related to employment or occupational licensing as a result of individual's conviction of or plea of guilty to an offense (felony or misdemeanor) and that applies by operation of law in this state;

The Petitioner has/has not (circle one) established by a preponderance of the evidence that granting the petition will materially assist the individual in obtaining employment/occupational license;

The Petitioner has/has not (circle one) established by a preponderance of the evidence the Petitioner has a substantial need for the relief requested in order to live a law-abiding life;

The Petitioner has/has not (circle one) established by a preponderance of the evidence that granting the petition would not pose an unreasonable risk to the safety of the public or any individual.

THEREFORE, it is HEREBY ORDERED, ADJUDGED AND DECREED that the above captioned Petition for Certificate of Qualification for Employment is hereby DENIED.

IT IS FURTHER ORDERED that the following conditions (if any) are placed on Petitioner's subsequent filings:

The Clerk is HEREBY ORDERED to provide written notice to Petitioner and the Department of Rehabilitation and Corrections.

THIS IS A FINAL, APPEALABLE ORDER. THERE IS NO JUST CAUSE FOR DELAY.

IT IS SO ORDERED,

JUDGE