

City of Electra Police Dept. 111 E Cleveland Electra, Texas 76360
TEL: (940)495-2131 FAX: (940)495-2342
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PLEASE READ FIRST: Thank you for your interest in employment with the City of Electra. The application you submit will be reviewed and evaluated based upon the information you have supplied. Failure to answer all questions completely and accurately may mean loss of an employment opportunity. Applications will be held for six months.

ELIGIBILITY REQUIREMENTS:

- 1. Be at least 21 years of age at the time of hiring for officer, 18 for dispatcher.**
- 2. Be a United States citizen.**
- 3. Have a High School diploma or GED.**
- 4. Be able to perform the essential duties of a Police Officer (or dispatcher)**
- 5. Meet all legal requirements necessary for future licensing and certification as required by the Texas Commission on Law Enforcement Officer Standards and Education (TCLEOSE).**
- 6. Be mentally alert, have the ability to get along well with others, willing to perform assigned duties and responsibilities be conscientious and dependable and in excellent physical condition.**
- 7. Be able to pass qualifying medical examinations, including drug testing. Pass a background check and other job relevant investigations deemed necessary. Applicants must show proof of identity by providing a valid driver's license.**

CAUSES FOR REJECTION:

- 1. Failure to meet the minimum requirements for the position applied.**
- 2. Inability to pass required examinations.**
- 3. Has failed to demonstrate the ability to read, write, and fluently speak the English language.**
- 4. Has demonstrated a failure to pay just debts. (will be considered on a case by case basis due to the number of variables involved. Factors which will be considered include type and number of debts, reasons for the bad credit, extenuating circumstances, and the potential for the credit-related problems impacting the applicant's judgment and integrity.)**
- 5. Inability or unwillingness to work the required work schedule (days, evenings, nights, weekends, and holidays).**
- 6. Any illegal use of a controlled substance.**
- 7. Criminal history-conviction, deferred adjudication, or placement on probation for a felony offense, Driving While Intoxicated offense, or any other crime other than traffic violations which such history represents a risk to the City of Electra or where such history is in conflict with the responsibilities and duties of the job.**
- 8. Has been convicted of or admitted to conduct that constitutes a Class**

A or Class B misdemeanor and some Class C under the Penal Code or equivalent under federal law, to include the Uniform Code of Military Justice (UCMJ), within ten years. Crimes involving moral turpitude may result in disqualification and will be considered on a case-by-case basis with appropriate consideration of circumstances.

- 9. Prior public activities which could offend community standards, or cause the public to question the motives or lose confidence in the Electra Police Department.**
- 10. Falsification, deception, or fraud in the employment process.**
- 11. Incomplete application, process, or documentation, or failure to appear for a scheduled appointment.**
- 12. Exercised poor judgment skills within the preceding five years. The applicant has demonstrated either immaturity or poor judgment in the applicant's decision making process. Examples of such conduct would include, but is not limited to: attendance at parties or social functions at which controlled substances or dangerous drugs are consumed, and such activity is known or should have been known by the applicant; silent acceptance of known illegal conduct by others in his presence; workplace behavior/decisions that adversely affect the business or associates, with little or not objectively justifiable need for such behavior: rejection for this cause will be temporary until he applicant can demonstrate that the applicant's judgment skill have developed.**
- 13. Disciplinary action at previous jobs, dismissed or resigned in lieu of dismissal from any employment for inefficiency, delinquency, or misconduct, unstable work history, unsatisfactory character. Will be considered on a case by case basis.**
- 14. Prior illegal activity, whether detected or undetected, whether prosecuted or not prosecuted, whether convicted, whether completed, attempted, a conspiracy, or any other illegal activity that might reasonable cause the public to lose confidence in the department or affect the credibility of a witness in a criminal case.**
- 15. prior civil action, whether litigated or settled, or pending or anticipated civil action against the applicant for an intentional tort relating to duties as a law enforcement officer or security officer which could reasonable be expected to influence a jury in any future tort action for a similar duty-related incident.**

Upon appointment to the position the employee will be required to read and observe the policies, procedures, guidelines, and General Orders as provide by the Electra Police Department and the City of Electra.

**ELECTRA POLICE DEPARTMENT
APPLICANT'S HISTORY QUESTIONNAIRE**

READ THESE INSTRUCTIONS CAREFULLY BEFORE PROCEEDING

An intensive background investigation will be conducted into your personal, employment, and educational history. It is very important that this form is completed fully and accurately; any misstatement or omission of material information could result in the rejection of your employment applications. Any failure to follow instructions could reflect unfavorably on your suitability for employment.

- Your answers should be printed legibly in black or blue ink by you, and no other person.
- All questions should be answered to the best of your ability.
- If there is insufficient space on the form for you to include all information required attach extra sheets to the questionnaire. Be sure to reference the relevant section and question number on the extra sheet. Do not write on the back of any page.
- If any question does not apply to you, write "N/A", "NOT APPLICABLE", or "DOES NOT APPLY".
- Avoid errors by reading the directions carefully before making any entries on the questionnaire. Be sure your information is correct and in proper sequence before you begin.
- You are responsible for obtaining correct names, addresses, and telephone numbers. If you are not sure of an address or telephone number, check it by personal verification.

WARNING: THIS DOCUMENT IS A GOVERNMENTAL RECORD. KNOWINGLY MAKING A FALSE ENTRY IN A GOVERNMENTAL RECORD IS A CLASS A MISDEMEANOR.

Position applied for _____ Date _____

14. Have you ever been arrested or charged with a felony or misdemeanor? Yes _____ No _____ If yes, list the most recent arrest/conviction first.

| Charge | City & State | Date | Disposition & Penalty |
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15. Have you ever been fingerprinted by a police agency for any reason. Yes ____ No ____ If yes, complete the following:

| Agency | Date | Purpose |
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16. Have any member of your immediate family or your spouse’s immediate family been convicted of a felony? Yes _____ No _____

Immediate family is defined as spouse, children, brothers, sisters, or parents.

If yes, give details. _____

17. List all addresses where you have lived in your lifetime. Include apartment complex names as well as address and apartment number.

| From | To | Complete Street Address | City & State | Apartment Complex | Person(s) With Whom You Resided |
|------|----|-------------------------|--------------|-------------------|---------------------------------|
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Did you graduate? Yes _____ No _____ Did you receive a GED? Yes _____ No _____

Universities or Colleges

| Name of School | Address City, State, Zip | Number of Credit Hours | Type of Degree (if applicable) | Dates Attended |
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Business, Service, or Trade Schools

| Name of School | Address City, State, Zip | Number of Years Completed | Dates Attended |
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Extension or Correspondence Courses

| Name of School | Address City, State, Zip | Number of Years Completed | Dates Attended |
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Other Courses of Study

| Name of School | Address City, State, Zip | Number of Years Completed | Dates Attended |
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19. List the total number of semester credit hours you have accumulated from accredited college and/or universities. _____

20. List your major and minor in college.
Major _____ Minor _____

21. List the names and addresses of the colleges or universities where you are currently enrolled. _____

22. Have you ever been denied admission to or been expelled from any high school, college, or university? Yes _____ No _____ If yes, give details. _____

23. Have you ever been discharged from any employment or asked to resign for misconduct or unsatisfactory service? Yes _____ No _____ If yes, give details including name and address of employer. _____

24. List all jobs you have had in your lifetime. Include full-time, part-time, temporary, and seasonal jobs.

| Employer/ Occupation | Address, City, State, Zip | Telephone Number | Supervisor | Dates Employed | Reason for Leaving |
|-------------------------|------------------------------------|---------------------|------------|-------------------|--------------------|
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25. List all other competitive or Civil Service examinations you have taken. Also, include all police and fire agencies with which you have made any application for employment.

| Agency | City/State | Date | Score | Status | Reason for Rejection, If applicable |
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26. Have you served an internship with law enforcement agency? Yes _____
 No _____ If yes, list below:

| Agency | Dates | Phone Number | Supervisor |
|--------|-------|--------------|------------|
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27. List names of employers where your have an active application for employment.

28. List special skills _____

29. List supervisory positions held _____

30. Have you ever served in any branch of the United States Armed Forces?
Yes _____ No _____ Branch _____ Dates of Service _____

31. List any disciplinary action received in the United States Armed Forces.

| Date | Charge | Disposition |
|------|--------|-------------|
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32. Are you a member of the active or inactive reserves or the National Guard of the United States? Yes _____ No _____ Scheduled date of release _____

| Name of Organization | Address | Rank Held |
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33. State reason for military separation _____

34. Are you eligible for re-enlistment? Yes _____ No _____
If no, state why _____

35. List all associations, clubs, unions, or fraternities you have been associated with or are currently associated with as a member or volunteer.

| Club, Association, or Fraternity | Dates | Current or Former Member |
|----------------------------------|-------|--------------------------|
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41. List all other legal or maiden names you have used and other names you have used or been known by. _____

42. Were you married before your present marriage? Yes _____ No _____
How many times? _____

43. If divorced or currently separated, what is the present address of your spouse/ex spouse?

| Name | Address | Work # | Home # | Dates of Separation or Divorce |
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44. List all of your dependents. Also, list other persons currently residing in your home.

| Name of Dependent | Relationship | Date of Birth | Complete Address | Living |
|-------------------|--------------|---------------|------------------|--------|
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45. List below the full names of all immediate relatives-include their date of birth. Immediate relatives include father, mother, sisters, brothers, father-in-law, stepmother, stepfather, stepsisters and stepbrothers, half-brothers and half-sisters. Also include the names of any relatives or other persons you are currently residing with or have previously resided. If deceased, give date of death in address column.

| Name | Date of Birth | Relationship | Complete Address | Home # | Work # |
|------|---------------|--------------|------------------|--------|--------|
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46. List the names of five (5) persons other than relatives and former employers who have known you for a period in excess of five (5) years. *References should not be from the same household.*

| Name | Complete Address | Zip Code | Home # | Work # |
|------|------------------|----------|--------|--------|
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INCLUDE AREA CODE WITH ALL PHONE NUMBERS

47. Does the sight of blood bother you? Yes _____ No _____

48. Can you swim? Yes _____ No _____

49. Indicate below your knowledge and use of foreign languages:

| Language | Understand | Speak, Read, or Write | Degree of proficiency |
|----------|------------|-----------------------|-----------------------|
| | | | |
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50. Are you proficient in sign language? Yes _____ No _____
51. Can you type? Yes _____ No _____ Touch or Sight? _____
Words per minute _____
Can you shorthand? Yes _____ No _____ Words per minute _____

QUESTIONS CONCERNING EMPLOYMENT

52. Do you object to wearing a uniform? Yes _____ No _____
53. Do you object to working nights, weekends, and holidays? Yes _____ No _____
54. Do you know of any fact, circumstance, or situation that would disqualify you for appointment?

55. If appointed, do you know of any fact, circumstance, or situation that would prevent you from fully discharging official duties of the position for which you have applied?

56. Do you understand the hours of duty and general working conditions? Yes__ No__
Do you object to them? Yes _____ No _____
57. List any special training, experience, or ability which you think would be of value to your employment?

58. Are you now or have ever been a member of any party or group that advocates the violent overthrow of the United States Government? Yes _____ No _____
59. If appointed to a position in this department, do you agree to take a polygraph test during your employment if requested to do so? Yes _____ No _____

60. If you live outside the Electra area, list a local address and telephone where you may be reached while processing, if available.

| Street | City | Phone |
|--------|------|-------|
|--------|------|-------|

61. I, _____ do hereby authorize all federal, state, county, and local governmental agencies, former employers, physicians, military branches, personal references, present and former family members and school personnel to furnish the City of Electra, Texas with any and all information regarding me in consideration of my suitability for employment. I hereby release from liability any person or company furnishing same. I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements and answers to questions. I further understand that all foregoing statements will be verified through a background investigation and polygraph examination. I am fully aware that any such misrepresentations, omissions, or falsifications will be grounds for immediate rejection or termination of my application or my employment. I have read all of the above information including the printed, typewritten, and handwritten portions thereof, and the statements therein are true and complete. By signing this questionnaire, I certify that all my answers in this form are true and correct.

Signature _____ Date _____

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY, THEN SIGN AND DATE BELOW.

FALSIFICATION OF INFORMATION: I understand that my eligibility will be based on the information contained on this application. I certify that all statements made on this application are true and correct. I understand that any false statement made by me on this application could cause me to be ineligible for employment or terminated from employment. Further, I understand that I am required to abide by all rules and regulations of the employer.

VERIFICATION OF INFORMATION: I authorize the City of Electra to investigate and verify the facts claimed by me on this application. I authorize my former employers to provide any information requested by the City of Electra, I further authorize the individuals listed as personal references to release any personal information that may pertain to my work habits or work performance.

EMPLOYEE HANDBOOK: I understand that nothing in this Application, or in any prior or subsequent written or oral statement, creates a contract of employment or any rights in the nature of a contract. I agree and understand that if I am hire by the City, my employment will be at will, for an indefinite period of time and may be terminated at any time, with or without cause or notice, at the option of the City or myself. I understand that I have the right to end my employment at any time and that the City retains the same right.

DRUG – FREE WORK ENVIRONMENT: The City of Electra is committed to providing a safe, efficient, drug-free work environment for all employees. IN keeping with this commitment, finalists for all job openings may be required to provide body fluids (blood or urine) to determine the use of alcohol, illegal or controlled substances in the work place, I understand that if I am employed with the City of Electra the City may require that I submit to a drug or alcohol screen if I apply for promotion, if I am involved in an on-the-job accident, or if the City has a reasonable suspicion that I am under the influence of drugs or alcohol, and I hereby authorize the release of the results of any physical examinations or drug tests required herein to the City of Electra. I further understand that the City may inspect all lockers and any bags (including purses or briefcases) or parcels brought into or taken out of City buildings, and that refusal to submit to a urinalysis, blood test or search, when requested to do so, may result in the termination of my employment.

AN EQUAL OPPORTUNITY EMPLOYER: The City of Electra considers all applicants for employment without regard to race, color, religion, ethnic affiliation, gender, national origin, age, disability, or veteran status, or any other protected status or classification in accordance with state and federal laws. The City of Electra also provides reasonable accommodations to qualified individuals with known disabilities, in accordance with the Americans with Disabilities Act.

Applicant Signature

Date

Texas Commission on Law Enforcement – Best Practices

Authority to Release Information Waiver

(Name of Law Enforcement Agency)

AUTHORITY TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

I hereby authorize the _____ and its authorized representatives bearing this release, or a copy thereof, within one year of its date, to obtain any information in your files pertaining to my employment, military, credit,

education, or medical records, including not limited to academic, achievement, attendance, athletic, personal history, and disciplinary records, medical records, and credit records.

I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for official use. Consent is granted to all parties to furnish such information, as described above, to third parties in the course of fulfilling its official responsibilities. I hereby release you, as custodian of such records, and any school, college, university, or other educational institution, hospital, or other repository of medical records, credit bureau, lending institution, consumer reporting agency, or retail business establishment including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or attempt to comply with it.

I am furnishing my Social Security Account Number on a voluntary basis with the understanding such is not required by any law or regulation. I have been advised that all parties will utilize this number only to facilitate the location of employment, military, credit, and educational records concerning me in connection with this application. Should there be any question as to the validity of this release, you may contact me as indicated below:

Applicant's Printed Full Name: _____

Address: _____

Telephone Number: _____

Applicant's Notarized Signature: _____

Sworn to and signed before me on this the _____ day of _____

in and for _____ county, in the state of _____

Signature of Notary Public: _____

NOTARY SEAL

Printed Name of Notary Public: _____

My Commission Expires: _____