



FULSHEAR POLICE DEPARTMENT
29255 FM 1093, Suite 7D
PO Box 279
Fulshear, Texas 77441
281-346-8888

Applicant Personal History Statement

Name _____
Last First Middle

Home Number (_____) _____

Cell Phone Number (_____) _____

Work Number (_____) _____

Email Address _____

I am applying for:

Police Officer

Dispatch

Administrative

We suggest you make a copy of this application for your own records.

Office Use Only
Date & Time Received

Personal History Statement Instructions

Employees are exposed to confidential and law enforcement sensitive information. A thorough background investigation is required to properly evaluate the suitability of applicants for employment with the agency. Although it is an achievement to reach the background phase of the hiring process, this is still a competitive process and does not, in any way, guarantee selection.

These instructions are provided as a guide to assist you in properly completing your Personal History Statement. It is essential that the information is accurate in all respects so please read all instructions carefully before proceeding. The Personal History Statement will be used as a basis for a background investigation that will determine your eligibility for becoming an employee.

1. The application must be completed by the applicant either by printing legibly in black ink or type the text into the downloadable PDF file. Answer all questions truthfully and accurately.
2. If a question is not applicable to you, enter N/A in the space provided.
3. Avoid errors by reading the directions carefully before making any entries on the form. Be sure your information is accurate and in proper sequence before you begin.
4. You are responsible for obtaining correct and full addresses. If you are not sure of an address, personally verify before making that entry on this history statement. Errors will not be viewed favorably. All addresses must be complete with zip codes.
5. If you need additional space for your answers, attach an additional sheet or sheets as needed. Be sure to indicate what question number and page this refers to.
6. An accurate and complete form will help expedite your investigation. Omissions or falsifications will result in disqualification.
7. You are responsible for furnishing any changes and/or updating your application as needed, such as address changes or telephone changes in writing.
8. Any candidate submitting an incomplete application will not be considered for employment. Your application will be evaluated on completeness and neatness.
9. Required Documents

All documents requested must be submitted with the application (photocopies are acceptable in most cases).

- Copy of your Social Security card.
- Original certified copy of your birth certificate. (No photocopy)
- Copy of your valid Texas driver license or a copy of another State's driver license. Applicant must possess a valid Texas driver license prior to being offered employment.
- Copy of your High School diploma or GED certificate.
- Sealed original certified copy of your college transcript. (No photocopy)
- Photocopy of your college diploma.
- Copy of your Basic Police Officer Certificate from your police academy. (Police Officer Applicants Only)
- Copy of your Texas Police Officer License and all training certificates awarded to you. (Police Officer Applicants Only)
- Copies of all training certificates
- Copies of your certification level
- Copy of your DD-214 if applicable. Must possess an honorable discharge.
- Original certified copy of your Naturalization papers, if applicable. (No photocopy)
- Copy of current proof of automobile liability insurance.
- Letter from TCOLE indicating passing test score.
- Credit Report

Credit Reports are obtained at your expense.

You may obtain a free credit report from any one of the three credit bureaus available through:

<https://www.annualcreditreport.com/cra/index.jsp>

You may link to the site through the federal trade commission website to avoid being misdirected to other websites.

10. If you have any questions, please contact your assigned background investigator.
11. When submitting the completed documents, please place them in a sealed envelope marked Personal and Confidential to your assigned background investigator.

Applicant Qualification Section

Before you begin to fill out this personal history statement, please ensure that you meet the following requirements. You must meet all five of these requirements to qualify for licensure as a police officer or jailer in Texas.

Please Initial:

_____ I am a citizen of the United States of America.

_____ I have earned a high school diploma or a GED.

_____ I have never been convicted, plead guilty (nolo contendere), nor have I been on court ordered community service/probation or deferred adjudication for a Class A misdemeanor or a felony.

_____ During the last ten (10) years, I have not been convicted, plead guilty (nolo contendere), been on community service/probation or deferred adjudication for a Class B misdemeanor in this state, other state, or while serving in the military.

_____ I have never had a military court martial that resulted in a dishonorable or bad conduct discharge.

Requirements

Age

Officer Position at least 21 years of age on date of employment

Non-officer Position at least 18 years of age on date of employment

Physical Condition

Applicants must be examined by a licensed physician and be declared physically sound and free from any defects which may adversely affect the performance of his/her duties. A drug test will be conducted and the result must show no trace of dependency on drugs or the usage of any illegal drugs, including marijuana. In addition, eyesight must be correctable to 20/20, and the applicant may have no uncorrectable hearing defects.

Psychological Evaluation (Police Officer Only)

Applicants must be examined by a licensed psychologist (or psychiatrist) and be declared in writing, by that professional, to be of satisfactory psychological and emotional health to be a peace officer.

Polygraph Examination (Police Officer Only)

All applicants are required to take a pre-employment polygraph examination.

Education

Applicant must have a high school diploma or GED.

Certification (Police Officer or Dispatch Only)

Applicants must be certified by TCOLE or be currently enrolled in a TCOLE accredited academy.

Texas Drivers License

Applicants must have a current, valid Texas Driver's License.

Military

Applicants must not have been discharged from any military service under less than honorable conditions including, specifically; under other than honorable conditions, bad conduct, dishonorable or any other characterization of service indicating bad character.

Applicants must not have been convicted in a military court for an offense, for which the elements would have been a Class B misdemeanor (or above).

Credit

Applicants must have a good credit history and must demonstrate a reasonable willingness and ability to meet their financial responsibilities in a timely manner.

Past Employment

Past employment history, number of jobs, reason for leaving, employment references, etc., will be considered. An unfavorable prior employment record may be grounds for rejection.

Background Investigation

A thorough background investigation is conducted on all applicants. Evidence of good moral character and reputation is mandatory. Disclosure of any one or more of the following may be grounds for rejection:

- Convicted of any felony offense
- Convicted of any misdemeanor offense
- Convicted of driving while intoxicated
- Convicted of driving under the influence of drugs
- Currently on probation for any criminal offense
- Currently under indictment, or awaiting trial on any criminal offense/charge
- Current involvement in unsettled litigation may result in rejection or suspension of application
- Excessive traffic or collision history
- An unfavorable drug history
- Revocation of police officers license by TCOLE
- Bad credit history or failure to meet financial obligations
- Military discharge under less than honorable conditions
- Execution, at any time, of a confession to a felony offense, such confession being admissible as evidence against the person in any criminal procedure in any state or federal court
- Membership in any subversive or extremist organization
- Evidence of any mental or emotional instability

Any fraud, deception or any false statement of fact in this application can be grounds for rejection.

DISQUALIFICATION

Deliberate misstatements or omissions will result in your application being rejected, regardless of the nature or reason for the misstatements/omissions. This personal history statement is a governmental document. Be truthful, as there are criminal consequences for lying on a governmental document.

Applicant Hiring Process

There are six (6) steps in the hiring process. No one will be hired until the final step is completed. No one has the authority to circumvent these steps. Never assume or think you have been hired until completion of the final step.

The steps in the hiring process are:

1. Receipt of application and preliminary criminal background check of applicant.
2. Physical Agility Test (Police Officer Only) and Written Exam
3. An oral interview and pre-employment test conducted by the Recruiting Division. Applicant will be notified of time, date and location of interview.
4. A complete background investigation conducted by the Recruiting Division including, but not limited to, the information provided by the applicant in the application.
5. An oral interview conducted by a review board.
6. A drug screening test, polygraph exam (Police Officer Only), psychological exam (Police Officer Only), medical exam and finger printing.

I have read the preceding and understand that I may be rejected at any time in the hiring process. Additionally, I understand that all initial offers of employment are conditional, contingent upon successful completion of all phases of the hiring process required by the Department and/or State Law. I also understand that no one has the authority to extend a final offer of employment except the Chief of Police, and this will only happen after all of the steps listed above are completed.

NOTE: Once hired, you will begin your training phase with an FTO (Police Officer Only). The Training Program must be successfully completed in order for the officer in training to proceed to his/her duty assignment. If the training phase is not successfully completed, the individual will not be allowed to continue their employment with this agency.

Applicant's Printed Name

Applicant's Signature

Date

Applicants – Please Note

As positions become available, the Fulshear Police Department reviews the open applications on hand and hires the most qualified applicants. An application is considered open for one year from the date of receipt, or until the person is hired or the application is rejected. If the application is considered favorably you will be notified when and where to appear for further processing.

Applicant's Printed Name

Applicant's Signature

Date

Confidential Agreement

A thorough and comprehensive investigation will be conducted on all applicants for employment with the Fulshear Police Department. All information is confidential and the department will not reveal the reason for rejection to those applicants who are not accepted. At no time will any part of the investigation be made available to you.

I have read and fully understand the above statement and agree that all information obtained during the application process will remain confidential and will not be made available to me.

Applicant's Printed Name

Applicant's Signature

Date

Release and Indemnity

It has been explained to me, and I fully understand, that in connection with my applying for a position with the Fulshear Police Department, there will be costs incurred by me for:

Any and all:

1. finger printing
2. documents required to be submitted

I also fully understand that I am not guaranteed a position of employment with the Fulshear Police Department and I may be rejected for employment at any time even though I will have expended funds for documents. I have decided to proceed with my application even though I know the costs incurred by me will not be reimbursed and I agree to hold the Fulshear Police Department harmless from any loss incurred by me during and after my application process.

Applicant's Printed Name

Applicant's Signature

Date

Important

You are required to sign this form before a notary public and have your signature duly notarized.

I, _____, hereby swear/affirm that I have personally completed this employment application. I am aware of the contents and the answers to all questions and statements made by me are true and correct.

I am also aware that any willful misrepresentation of fact(s) or falsification of any answer or statement made by me herein will subject me to rejection, dismissal and criminal prosecution under article 37.10 of the Texas penal code.

Signature of Applicant

Date and Time

State Of Texas
County Of _____

Sworn and subscribed before me this _____ day of _____, 20_____.

Notary Public Signature

(seal)

Printed Name

**FULSHEAR POLICE DEPARTMENT
AUTHORITY TO RELEASE INFORMATION**

TO WHOM IT MAY CONCERN:

I hereby authorize the Fulshear Police Department 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, 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.

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 _____.

NOTARY SEAL

Signature of Notary Public: _____
Printed Name of Notary Public: _____
My Commission Expires: _____

APPLICANT IDENTIFICATION

| | | | | |
|--|-----|---------------------|------------------------------|---------------|
| Last Name | | First | Middle | Maiden |
| Home Telephone No. | | Work Telephone No. | Cellular No. | |
| Date of Birth | Age | Social Security No. | Driver's License No. & State | TCOLE PID No. |
| Street Address | | | Apt. No. | |
| City | | | State & Zip Code | |
| Mailing Address (If different from street address) | | | State & Zip Code | |

Have you ever been known or gone by any other name (excluding nick-names)? ____yes ____no

If yes, provide name(s)_____

Place of Birth (City, County, State, Country)_____

Are you a U.S. Citizen by Birth? ____yes ____no

Are you a Naturalized Citizen? ____yes ____no

Height_____ Weight_____ Eye Color_____ Hair Color_____

Scars, Tattoos (description and location) or other distinguishing marks_____

List all people you reside with over the age of 18 (Full Name and DOB):

Do you have a social networking, instant messaging, or other internet-based profile(s)? If yes, provide screen name(s), and service provider(s).

List all e-mail Addresses _____

Do you know any current or previous Fulshear Police or City of Fulshear employees?

_____yes _____no (if "yes", please list names.)

Have you ever worked for the Fulshear Police Department in any capacity?

_____yes _____no (if "yes", provide the dates)

Have you ever submitted an application to this agency?

_____yes _____no (if "yes", provide the date of application)

To provide law enforcement coverage twenty-four hours per day, seven days a week, the Fulshear Police Department employees must have and maintain the ability to work shifts differing in length, time of day or night, day of the week, and rotating shifts. This ability is an essential function of all department positions. Are you willing to work?

Any Shift yes no

Holidays yes no

Weekends yes no

MARITAL & FAMILY HISTORY

Marital Status (Single, Engaged, Married, Divorced, Widowed, Cohabiting, etc.) _____

Person's Name (include maiden name) _____

Date of Birth _____

Date of Marriage _____

Home Telephone No. _____

Work Telephone No. _____

Employer _____

Job Title _____

Employer and Address _____

If you have been separated, divorced, or widowed, provide details below:

Ex-spouse's Name _____

Date of Birth _____

Date of Marriage _____

City & State _____

Separated _____ Date _____

Divorced _____ Date _____

Widowed _____ Date _____

Court or State issued _____

Date issued _____

Telephone No. _____

Identify children related to you or your spouse (Natural, Step-Children, Adopted, or Foster Children)

| Relation | Name | Date of Birth | Address |
|----------|------|---------------|---------|
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Are you required to make child support payments? ____yes ____no

If yes, are you current with all payments? ____yes ____no (if no, provide the number of payments you are behind and fully describe the reason for the delinquency.)

Identify relatives in the following order: Father, Mother (include maiden name), step-parents (if any), brothers and sisters.

| Relationship | Name | Complete Address | Phone Number | DOB |
|--------------|------|------------------|--------------|-----|
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Name _____ Occupation _____

Address _____ Employer Name _____

Telephone No. _____ Alternate Telephone _____

Nature of Relationship _____ Years known _____

Name _____ Occupation _____

Address _____ Employer Name _____

Telephone No. _____ Alternate Telephone _____

Nature of Relationship _____ Years known _____

TRAFFIC RECORD

Identify all vehicles that you or your spouse currently own or operate:

| Year | Make | Model | Color | License Plate No. | Owner |
|------|------|-------|-------|-------------------|-------|
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Current automobile insurance carrier: _____ Expiration Date: _____

Have you ever possessed a driver's license issued by any state other than Texas? ____yes ____no

Driver's License No. _____ State _____ Date issued _____

Driver's License No. _____ State _____ Date issued _____

Have you ever had your driver's license suspended or revoked? ____yes ____no

If yes, give reason, date, and length of suspension:

Identify all motor vehicle accidents you have been involved in during the last 10 years.

| | | |
|--|----------|------------------------|
| Date | Location | Police Report: Yes/No |
| Cause of Accident (e.g., ran red light, failed to control speed) and disposition | | At Fault: Yes/No |
| Date | Location | Police Report: Yes /No |
| Cause of Accident (e.g., ran red light, failed to control speed) and disposition | | At Fault: Yes/No |
| Date | Location | Police Report: Yes/No |
| Cause of Accident (e.g., ran red light, failed to control speed) and disposition | | At Fault: Yes/No |
| Date | Location | Police Report: Yes /No |
| Cause of Accident (e.g., ran red light, failed to control speed) and disposition | | At Fault: Yes/No |

Identify all traffic citations you have received within the last 10 years, excluding parking tickets:

| Month/Year | Violation | Issuing Agency | Disposition (e.g., defensive driving, dismissed) |
|------------|-----------|----------------|--|
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ARRESTS, DETENTIONS, AND LITIGATION

Have you ever been arrested, detained or issued a criminal citation (other than traffic citations) by law enforcement?
 ____yes ____no If yes, complete the following table:

| Agency | Offense | Date | Location | Arrested, detained, or criminal citation | Outcome |
|--------|---------|------|----------|--|---------|
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Are you now or were you ever a party to a civil litigation (including evictions, repossessions and divorces).

____yes ____no

| Type of Litigation | City/State | Date | Disposition |
|--------------------|------------|------|-------------|
|--------------------|------------|------|-------------|

Have you ever been sued or named in any type of lawsuit or proceeding?

____yes ____no If yes, explain:_____

Have you ever been summoned to appear in court?

____yes ____no If yes, explain:_____

PERSONAL DECLARATIONS

Have you ever committed an act of family violence? ("Family violence" means an act by a member of a family or household against another member of the family or household that is intended to result in physical harm, bodily injury, assault, or sexual assault or that is a threat that reasonably places the member in fear of imminent physical harm, bodily injury, assault, or sexual assault, but does not include defensive measures to protect oneself.) (Texas Family Code Section 71.004)

____yes ____no If yes, explain:_____

Have you ever assaulted another person since the age of seventeen (17)? ("Assault" means to cause bodily injury to another, threaten another with imminent bodily injury, or to cause physical contact with another when the person knows or should reasonably believe that the other will regard the contact as offensive or provocative.) (Texas Penal Code Section 22.01)

____yes ____no If yes, explain:_____

Have you ever been considered or named a suspect in a criminal investigation or criminal offense?

____yes ____no If yes, explain:_____

Have you ever been involved in any incident (do not include vehicular accidents) in which a police report was made or law enforcement was called?

____yes ____no If yes, explain:_____

Other than crimes that would have been sealed by juvenile records, have you ever committed – or assisted another person in the commission of – a felony crime, serious misdemeanor (Class B or above), or a crime involving moral turpitude that went undetected or unreported to law enforcement?

____yes ____no If yes, explain:_____

Do you associate with anyone who has committed a Felony offense?

____yes ____no If yes, explain:_____

Do you associate with anyone who has committed multiple criminal offenses (Class B or above)?

____yes ____no If yes, explain:_____

Do you associate with any gang members?

____yes ____no If yes, explain:_____

Have you ever stolen or taken items or money, from an individual, employer, business or entity without permission?

____yes ____no If yes, explain in detail providing dates, description of the item, value, and circumstances.

Have you ever purchased or received items that you knew or suspected were stolen?

____yes ____no If yes, explain in detail providing dates, description of the item, value, and circumstances.

In the past 12 months have you operated a motor vehicle after consuming enough alcohol to be considered intoxicated?

____yes ____no If yes, explain:_____

Do you consume alcoholic beverages? ____yes ____no If yes, describe frequency:_____

Have you ever used marijuana or hashish? ____yes ____no

| drug name | # of times used | first time used (mm/yy) | last time used (mm/yy) |
|-----------|-----------------|-------------------------|------------------------|
|-----------|-----------------|-------------------------|------------------------|

Have you ever tried, used, or experimented with any other illegal drug or narcotic, including performance-enhancing steroids or prescription drugs not prescribed to you by your doctor?

____yes ____no

| | | | |
|-----------|-----------------|-------------------------|------------------------|
| drug name | # of times used | first time used (mm/yy) | last time used (mm/yy) |
|-----------|-----------------|-------------------------|------------------------|

Have you ever purchased, sold, furnished or transferred any illegal drugs or narcotics including prescription drugs?

____yes ____no (if "yes", explain each instance.)

| | | |
|-----------|--------------|---------------------------|
| drug name | date (mm/yy) | Explain (provide details) |
|-----------|--------------|---------------------------|

FAMILY AND RELATIVES' ARRESTS

Have members of your immediate family or close relatives ever been arrested for any offense Class B or above?

____yes ____no If yes, complete the following table:

| Name/Relationship | Charge/Offense | Outcome | Year | Agency |
|-------------------|----------------|---------|------|--------|
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FINANCIAL STATUS

Your current net annual income _____

Spouse's current net annual income _____

Source of income (employer's name, rent, etc.)

Source of income (employer's name, rent, etc.)

Do you have any accounts with a financial institution? Yes___ No___

| Name of financial institution | Type of account |
|-------------------------------|-----------------|
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Identify any person or entity to whom you are indebted, and the extent of your indebtedness. Include mortgages, vehicle payments, charge accounts, credit cards, loans, child support payments, and any other debts or payments.

| Name of Creditor (e.g., Sears, Citi financial) | Type of Debt (e.g., student loan, automobile) | Monthly Payment | Approx Balance |
|--|---|-----------------|----------------|
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Identify any person or entity to which you are **more than 30 days late** in paying. Include mortgages, vehicle payments, charge accounts, credit cards, loans, child support payments, and any other debts or payments.

| Creditor Name | Type of Debt (e.g., auto loan) | Days Late | Amount | Reason |
|---------------|--------------------------------|-----------|--------|--------|
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CREDIT INFORMATION (please provide an explanation for any question answered "yes")

1. Have you ever filed bankruptcy personally or on behalf of a business? Yes_____ No_____
- If "Yes" to above, indicate type _____
2. Have you ever had any personal or real property repossessed or foreclosed? Yes_____ No_____
3. Have you ever failed to pay Federal, state, or other taxes? Yes_____ No_____
4. Have you ever failed to file a tax return, when required by law? Yes_____ No_____
5. Have you ever had a lien placed against your property for failing to pay taxes or debts? Yes_____ No_____
6. Have you ever had a judgment entered against you? Yes_____ No_____
7. Have you ever defaulted on any type of loan? Yes_____ No_____
8. Have you ever had bills or debts turned over to a collection agency? Yes_____ No_____
9. Have you ever had any credit account suspended, charged off, or cancelled? Yes_____ No_____
10. Have you ever written a check that was later returned for Non-Sufficient Funds (NSF)? Yes_____ No_____
11. Have you ever been delinquent on court-imposed alimony or child support payments? Yes_____ No_____
12. Have you ever been disciplined regarding the use of an employer credit card? Yes_____ No_____
13. Are you currently more than thirty **(30)** days delinquent on any debts? Yes_____ No_____

If you answered yes to any of the above questions, please provide a detailed explanation.

EDUCATIONAL HISTORY

| High School(s) attended | Address | Dates attended From-To | Graduated Yes/No |
|-------------------------|---------|---------------------------|---------------------|
| | | | |
| | | | |

Do you have a G.E.D. Certificate? _____

Were you ever expelled from school? If yes, give details: _____

Identify all colleges, universities, or technical schools you have attended:

| Name | City & State | Dates attended | Hours completed | Major | Degree & Date |
|------|--------------|----------------|-----------------|-------|---------------|
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Identify the Police Academies you have attended: TCOLE PID Number: _____

| Name | City & State | Dates attended | Hours completed | Anticipated Graduation Date |
|------|--------------|----------------|-----------------|--------------------------------|
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MILITARY EXPERIENCE

Have you ever served in the U.S. Armed Forces or State Military Forces? Yes _____ No _____

Served from _____ to _____ Highest Rank held _____

Branch of Service _____ Date _____ Date _____ Unit _____

Job Title(s) (e.g., Rifleman, Security) _____

Type of discharge _____ Last Duty Station: _____

Are you actively serving in a Reserve Unit (including State Military Forces)? Yes _____ No _____

Serving from _____ to _____ Current Rank held _____

Branch of Service _____ Date _____ Date _____ Unit _____

Job Title(s) (e.g., Rifleman, Security) _____

Have you ever been subject to court martial or any other disciplinary proceeding under the Uniform Code of Military Justice? (Include non-judicial, Captain's mast, etc.) If "Yes," provide date(s), charge(s), military court(s) or authority(ies), and outcome(s).

SPECIAL QUALIFICATIONS & SKILLS

Identify any special licenses or certifications you hold (e.g., EMT, firefighter, pilot, radio operator, etc):

If you know a foreign language, indicate your fluency in each block below (excellent, good, fair)

| Language | Understanding | Speaking | Reading | Writing |
|----------|---------------|----------|---------|---------|
| | | | | |
| | | | | |

List your hobbies and recreational activities:

MEMBERSHIP IN ORGANIZATIONS (PAST AND PRESENT)

| Name & Address | Type (e.g., social, fraternal, professional) | From | To |
|----------------|--|------|----|
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Have you ever been an officer or a member of, or made a contribution to, an organization that advocates or practices the commission of acts of force or violence to discourage others from exercising their rights under the U.S. Constitution or right granted by law.

Yes_____ No_____

LAW ENFORCEMENT HISTORY

Have you ever been employed by or applied with any other law enforcement agency? Yes _____ No _____

If yes, please provide the following information:

| Agency Name & Address | Date Applied or Hired | Result / Status |
|-----------------------|-----------------------|-----------------|
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Have you ever taken a polygraph examination?

____yes ____no (if "yes", provide the following.)

| Agency/Company | Date | Reason | Outcome (pass/fail) |
|----------------|------|--------|---------------------|
|----------------|------|--------|---------------------|

Have you ever been named in an Internal Affairs Investigation OR an investigation conducted by an employer alleging wrongdoing?

____yes ____no (if "yes", explain in detail. Use a separate sheet of paper if necessary.)

Are there any incidents in your life, or details not mentioned herein, which may influence this department's evaluation of your suitability for employment as a police officer?

____yes ____no (if "yes", explain in detail. Use a separate sheet of paper if necessary.)

PERSONAL STATEMENT

State in your own words why you are seeking employment with Fulshear Police Department.

EMPLOYMENT HISTORY

Beginning with your present or most recent job, list all employment since the age of seventeen (17). Include full-time, part-time, temporary, seasonal, military assignments, and unpaid internships, plus all periods of unemployment.

1. Employer _____ From _____ To _____

Address _____

Telephone No. _____ Hours worked per week _____

Job Title _____ Beginning and Ending Salary _____ / _____

Name of supervisor _____ Supervisor Telephone Number _____

Name of a co-worker _____ Co-worker Telephone Number _____

Duties: _____

Identify any disciplinary actions or documented performance problems you received: _____

Were you terminated, asked to resign, or resigned pending disciplinary action or in lieu of termination?

_____ Yes (Explain fully) _____ No (If no, why did you leave this job?)

2. Employer _____ From _____ To _____

Address _____

Telephone No. _____ Hours worked per week _____

Job Title _____ Beginning and Ending Salary _____ / _____

Name of supervisor _____ Supervisor Telephone Number _____

Name of a co-worker _____ Co-worker Telephone Number _____

Duties: _____

Identify any disciplinary actions or documented performance problems you received: _____

Were you terminated, asked to resign, or resigned pending disciplinary action or in lieu of termination?

_____ Yes (Explain fully) _____ No (If no, why did you leave this job?)

3. Employer _____ From _____ To _____

Address _____

Telephone No. _____ Hours worked per week _____

Job Title _____ Beginning and Ending Salary _____ / _____

Name of supervisor _____ Supervisor Telephone Number _____

Name of a co-worker _____ Co-worker Telephone Number _____

Duties: _____

Identify any disciplinary actions or documented performance problems you received: _____

Were you terminated, asked to resign, or resigned pending disciplinary action or in lieu of termination?

_____ Yes (Explain fully) _____ No (If no, why did you leave this job?)

4. Employer _____ From _____ To _____

Address _____

Telephone No. _____ Hours worked per week _____

Job Title _____ Beginning and Ending Salary _____ / _____

Name of supervisor _____ Supervisor Telephone Number _____

Name of a co-worker _____ Co-worker Telephone Number _____

Duties: _____

Identify any disciplinary actions or documented performance problems you received: _____

Were you terminated, asked to resign, or resigned pending disciplinary action or in lieu of termination?

_____ Yes (Explain fully) _____ No (If no, why did you leave this job?)

5. Employer _____ From _____ To _____

Address _____

Telephone No. _____ Hours worked per week _____

Job Title _____ Beginning and Ending Salary _____ / _____

Name of supervisor _____ Supervisor Telephone Number _____

Name of a co-worker _____ Co-worker Telephone Number _____

Duties: _____

Identify any disciplinary actions or documented performance problems you received: _____

Were you terminated, asked to resign, or resigned pending disciplinary action or in lieu of termination?

_____ Yes (Explain fully) _____ No (If no, why did you leave this job?)

6. Employer _____ From _____ To _____

Address _____

Telephone No. _____ Hours worked per week _____

Job Title _____ Beginning and Ending Salary _____ / _____

Name of supervisor _____ Supervisor Telephone Number _____

Name of a co-worker _____ Co-worker Telephone Number _____

Duties: _____

Identify any disciplinary actions or documented performance problems you received: _____

Were you terminated, asked to resign, or resigned pending disciplinary action or in lieu of termination?

_____ Yes (Explain fully) _____ No (If no, why did you leave this job?)

7. Employer _____ From _____ To _____

Address _____

Telephone No. _____ Hours worked per week _____

Job Title _____ Beginning and Ending Salary _____ / _____

Name of supervisor _____ Supervisor Telephone Number _____

Name of a co-worker _____ Co-worker Telephone Number _____

Duties: _____

Identify any disciplinary actions or documented performance problems you received: _____

Were you terminated, asked to resign, or resigned pending disciplinary action or in lieu of termination?

_____ Yes (Explain fully) _____ No (If no, why did you leave this job?)

8. Employer _____ From _____ To _____

Address _____

Telephone No. _____ Hours worked per week _____

Job Title _____ Beginning and Ending Salary _____ / _____

Name of supervisor _____ Supervisor Telephone Number _____

Name of a co-worker _____ Co-worker Telephone Number _____

Duties: _____

Identify any disciplinary actions or documented performance problems you received: _____

Were you terminated, asked to resign, or resigned pending disciplinary action or in lieu of termination?

_____ Yes (Explain fully) _____ No (If no, why did you leave this job?)

I hereby certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers to the above questions. I fully understand that any misrepresentation, omission, or falsification may deem me permanently unsuitable, or if hired, may lead to the termination my employment.

Signature of Applicant

Date

Before me personally appeared _____ who stated this document and its intent was explained to him/her that he/she has full knowledge of its purpose and that he/she executed this instrument of his/her free will and accord.

Sworn to and subscribed before me on this _____ day of _____, _____.

Signature of Notary

My Commission Expires: _____

SEAL