

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 you are referring to on additional sheets.
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. **All documents requested must be submitted with the application** (photocopies are acceptable in most cases).
 - Copy of your Social Security card.
 - Copy of your birth certificate.
 - 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 employed.
 - Copy of your High School diploma, High School transcript or GED certificate.
 - Copy of your college transcript if applicable.
 - Copy of your Telecommunications Operator certificates (if you are certified) issued by TCOLE and all related training certificates awarded to you.
 - Copy of your DD-214 if applicable. Must possess an honorable discharge.
 - Original certified copy of your Naturalization papers, if applicable. (Present to H.R. for verification)
10. Check before submitting:
 - Notarized on page 14.
 - Signed and dated on page 14 and 15.
 - Complete and sign DPS form, page 18.
 - All 18 pages are included.
11. If you have any questions, please contact Human Resources Department, Phone: 325-646-5775.
12. **Mail completed form to:**

City of Brownwood
Human Resources Dept.
P.O. Box 1389
Brownwood, TX 76804

Or deliver to Human Resources Dept. in City Hall, 501 Center Ave, Brownwood, TX.

DISQUALIFICATION

There are very few automatic basis for rejection. Even issues of prior misconduct, employee terminations, and arrests are usually not, in and of themselves, automatically disqualifying. However, deliberate misstatements or omissions can and often will result in your application being rejected, regardless of the nature or reason for the misstatements/omissions. In fact, the number one reason individuals "fail" background investigations is because they deliberately withhold or misrepresent job-relevant information from their prospective employer.

This application form is a governmental document. Be truthful, as there are criminal consequences for lying on a governmental document.

Applicant Qualification Section

Before you begin to fill out this application, please ensure that you meet the following requirements. You must meet all five of these requirements to qualify for licensure as a Communications Officer in Texas.

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.

APPLICANT IDENTIFICATION

INFORMATION PROVIDED IN THIS SECTION IS USED FOR IDENTIFICATION PURPOSES ONLY.

Last Name	First	Middle	Maiden
Street Address		Apt. No.	
City		State & Zip Code	
Mailing Address (if different from residence)		State & Zip Code	
Home Telephone No.	Work Telephone No.	Cell No.	
Date of Birth	Social Security No.	Driver's License No. & State	

Have you ever been known or gone by any other name (excluding nick-names)? If yes, give details.

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

Are you a U.S. Citizen by Birth? _____ Are you a Naturalized Citizen? _____

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

List ALL E-Mail Addresses (S) _____

MARITAL & FAMILY HISTORY

Single _____ Married _____ Engaged _____ Co-habiting _____

Spouse's/Co-habitant's name (include maiden name) _____

Address _____

Date of Birth _____ Date of Marriage _____

Employer(s) _____

Employer & Address _____

Home Telephone No. _____ Work Telephone No. _____

Roommate(s)(do not include parents or cohabitants) _____

Date(s) of birth _____

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

Relation	Name	Date of Birth	Address

Do you have relatives employed with the City of Brownwood? _____ Yes _____ No

If yes; Employee's Name: _____ Relationship to you _____.

Employee's Name: _____ Relationship to you _____.

PERSONAL REFERENCES

List five (5) persons who know you well enough to provide current information about you. Do not list relatives, former or present employers, or supervisors.

Name _____ Years known _____

Address _____

Home Telephone _____ Alternate Telephone _____

Nature of Relationship _____

Name _____ Years known _____

Address _____

Home Telephone _____ Alternate Telephone _____

Nature of Relationship _____

Name _____ Years known _____

Address _____

Home Telephone _____ Alternate Telephone _____

Nature of Relationship _____

Name _____ Years known _____

Address _____

Home Telephone _____ Alternate Telephone _____

Nature of Relationship _____

Name _____ Years known _____

Address _____

Home Telephone _____ Alternate Telephone _____

Nature of Relationship _____

Identify below any employees of the City of Brownwood with whom you are acquainted:

_____	_____
_____	_____
_____	_____
_____	_____

DRIVER LICENSES

Current Driver Licenses No. _____ State _____ Expires _____

Have you ever possessed a driver license issued by any state other than Texas? Yes _____ No _____

If yes, give details: _____

Driver License No. _____ State _____ Date issued _____

Driver License No. _____ State _____ Date issued _____

Have you **ever** had your driver license suspended or revoked? Yes _____ No _____ If yes, give reason, date, and length of suspension: _____

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

Month/Year	Violation	City & State	Disposition (e.g., defensive driving, dismissed)

ARRESTS, DETENTIONS, AND LITIGATION

Have you **ever** been arrested or detained by law enforcement?

Yes _____ No _____ If yes, complete the following table:

Agency	Offense	Date	Location	Outcome

ARRESTS, DETENTIONS, AND LITIGATION CONTINUED

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) 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) If yes, explain: _____

Have you **ever** been considered or named a suspect in a criminal investigation or criminal offense? If yes, explain: _____

Have you **ever** been a party to a civil suit or action? 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? 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, or a crime involving moral turpitude that went undetected or unreported to law enforcement? If yes, explain: _____

Do you anticipate being sued or named in any type of lawsuit or proceeding? Yes _____ No _____

If yes, please explain: _____

FAMILY AND RELATIVES’ ARRESTS

Have members of your immediate family or close relatives have ever been arrested?
Yes _____ No ___ If yes, complete the following table:

Name/Relationship	Charge/Offense	Outcome	Year	Agency

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, or unpaid internships, plus all periods of unemployment.

If you are currently employed, may we contact your present employer? Yes _____ No _____

1. Employer _____ From _____ To _____
Address _____
Telephone No. _____ Job Title _____
Beginning and Ending Salary \$ _____ / \$ _____ Work Schedule _____
Name of Supervisor _____ Supervisor Contact Information _____
Name of Co-Worker _____ Co-Worker Contact Information _____
Duties: _____

Identify any disciplinary actions you received and explain: _____

Reason for Leaving: _____

2. Employer _____ From _____ To _____
Address _____
Telephone No. _____ Job Title _____
Beginning and Ending Salary \$ _____ / \$ _____ Work Schedule _____
Name of Supervisor _____ Supervisor Contact Information _____
Name of Co-Worker _____ Co-Worker Contact Information _____
Duties: _____

Identify any disciplinary actions you received and explain: _____

Reason for Leaving: _____

Was there an unemployment period between previous employment and the one listed above? __Yes__No
If yes, provide dates and explain: _____

EMPLOYMENT HISTORY CONTINUED

3. Employer _____ From _____ To _____
Address _____
Telephone No. _____ Job Title _____
Beginning and Ending Salary \$ _____ / \$ _____ Work Schedule _____
Name of Supervisor _____ Supervisor Contact Information _____
Name of Co-Worker _____ Co-Worker Contact Information _____
Duties: _____

Identify any disciplinary actions you received and explain: _____

Reason for Leaving: _____

4. Employer _____ From _____ To _____
Address _____
Telephone No. _____ Job Title _____
Beginning and Ending Salary \$ _____ / \$ _____ Work Schedule _____
Name of Supervisor _____ Supervisor Contact Information _____
Name of Co-Worker _____ Co-Worker Contact Information _____
Duties: _____

Identify any disciplinary actions you received and explain: _____

Reason for Leaving: _____

Was there an unemployment period between previous employment and the one listed above? __Yes__ No

If yes, provide dates and explain: _____

EMPLOYMENT HISTORY CONTINUED

5. Employer _____ From _____ To _____
Address _____
Telephone No. _____ Job Title _____
Beginning and Ending Salary \$ _____ / \$ _____ Work Schedule _____
Name of Supervisor _____ Supervisor Contact Information _____
Name of Co-Worker _____ Co-Worker Contact Information _____
Duties: _____

Identify any disciplinary actions you received and explain: _____

Reason for Leaving: _____

6. Employer _____ From _____ To _____
Address _____
Telephone No. _____ Job Title _____
Beginning and Ending Salary \$ _____ / \$ _____ Work Schedule _____
Name of Supervisor _____ Supervisor Contact Information _____
Name of Co-Worker _____ Co-Worker Contact Information _____
Duties: _____

Identify any disciplinary actions you received and explain: _____

Reason for Leaving: _____

Was there an unemployment period between previous employment and the one listed above? __Yes__ No

If yes, provide dates and explain: _____

(This page may be copied if you need to list additional employers. Correct the sequence number of employers on copied pages.)

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

MILITARY OBLIGATION

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

Served from _____ to _____ Highest Rank held _____
Date Date

Branch of Service _____ 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 _____
Date Date

Branch of Service _____ 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 you hold (e.g., pilot, radio operator): _____

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

Language	Understanding	Speaking	Reading	Writing

Do you have any experience with firearms? Yes _____ No _____

If yes, please explain: _____

MEMBERSHIP IN ORGANIZATIONS (PAST AND PRESENT)

Name & Address	Type (e.g., social, fraternal, professional)	From	To

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 _____

PERSONAL DECLARATIONS

Do you consume alcoholic beverages? Yes _____ No _____ If "Yes", how often? _____

Have you **ever** used marijuana or hashish? Yes _____ No _____ If yes, when last used? _____

Have you **ever** used any illegal drug (including a performance-enhancing steroid) not prescribed by a physician?

Yes _____ No _____ If yes how often _____ When last used _____

Provide explanation: _____

Have you **ever** sold or furnished controlled substances or prescription drugs to anyone? Yes _____ No _____

If yes, give details: _____

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?

If yes, explain:

Have you **ever** been employed by or applied with or served as a Reserve or Volunteer with any other law enforcement agency?
 (Do not include those listed in "Employment History" section.) Yes _____ No _____

If yes, please identify to the best of your knowledge:

Agency Name & Address	Date Applied or Hired	Result

Identify any additional information you think should be considered in your application for the position you are seeking, and/or any further explanation of answers to previous questions:

THE FOLLOWING MUST BE SIGNED IN THE PRESENCE OF A NOTARY. 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 _____, _____

SEAL

 Signature of Notary
 My Commission Expires: _____

AUTHORIZATION TO RELEASE INFORMATION

TO: _____

I, hereby request and authorize you to furnish the City of Brownwood with any and all information they may request concerning my work record, educational history, military record, financial status, criminal record, general reputation, and past or present medical conditions.

This authorization is specifically intended to include any and all information of a confidential or privileged nature as well as photocopies of such documents, if requested. The information will be used for the purpose of determining my eligibility for employment with the City of Brownwood.

I hereby release from all liability and/or damages the City of Brownwood and those individuals, corporations, or organizations, who provide such information. I understand any such information provided shall become the exclusive property of the City of Brownwood.

Applicant's Printed Name: _____

Applicant's Signature _____

Date _____

NOTE: THIS FORM WILL BE RETAINED IN YOUR FILE.

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EEO Voluntary Self-Identification Form

Name _____ Date of Application _____
Last First Middle
Other Names Used-(including maiden names and all marriage names) _____
Date of Birth _____ Male _____ Female _____
Social Security Number _____ - _____ - _____

Notice - Completion of this form is voluntary.

We are an Equal Opportunity Employer. Our employment decisions are made without regard to race, color, religion, gender, national origin, age, disability, marital status, veteran or military status, or any other legally protected status. The purpose of this *EEO Self-Identification Form* is to comply with federal government record-keeping and reporting requirements. Periodic reports are made to the government on the following information. The data you provide on this form will be kept confidential and used solely for analytical and reporting requirement purposes. This form is processed and maintained separately from your personnel file and is not used to make decisions about the terms and conditions of employment. Completion of this form is optional and voluntary. We appreciate your assistance.

HIGHEST LEVEL OF EDUCATION COMPLETED:

- | | |
|---|--|
| 1. 0-8 years | 6. Some college, less than B.A. |
| 2. 9-12 years, but not a high school graduate | 7. B.A., B.S., or similar degree |
| 3. High School Graduate | 8. M.A., M.S., or similar degree |
| 4. GED Certificate | 9. Ph.D., or similar degree |
| 5. Post high school, vocation or business | 10. M.D., or similar professional degree |

ETHNIC CATEGORY (Check one)

- _____ **White:** a person having origins in any of the people of Europe, the Middle East, or North Africa.
- _____ **Black or African American:** a person having origins in any of the black racial groups of Africa.
- _____ **Hispanic or Latino:** a person of Cuban, Mexican, Chicano, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- _____ **Asian:** a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- _____ **Native Hawaiian or Other Pacific Islander:** a person having origins of any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- _____ **American Indian or Alaska Native:** a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- _____ **Two or More Races:** a person who primarily identifies with two or more of the above race/ethnicity categories.
- _____ I do not wish to voluntarily supply this information.

(continued on back)

EEO Voluntary Self-Identification Form (continued)

Notice - Completion of this form is voluntary.

VETERAN STATUS (Check all that apply)

Disabled Veteran: A veteran who served on Active Duty in the U.S. military and is entitled to disability compensation (or who but for the receipt of military retired pay would be entitled to disability compensation) under laws administered by the Secretary of Veteran's Affairs, or was discharged or released from active duty because of a service-connected disability.

Active duty wartime or campaign badge Veteran: a veteran who served on active duty in the U.S. military during a war or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.

Armed Forces Service Medal Veteran: a veteran who served on active duty in the U.S. military and participated in a United States military operation for which an Armed Forces Service Medal was awarded.

Recently Separated Veteran: a veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military.

I am a Veteran, but I chose not to self-identify the classifications to which I belong.

I am NOT a Veteran.

I do not wish to voluntarily supply this information.

VOLUNTARY SELF IDENTIFICATION

Are you able to perform the essential function of the job(s) you are seeking, with or without accommodations?

Yes

No

I do not wish to voluntarily supply this information.

DPS Computerized Criminal History (CCH) Verification

(AGENCY COPY)

I, _____ acknowledge that a Computerized Criminal

APPLICANT or EMPLOYEE NAME (Please print)

History (CCH) check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on name and DOB identifiers I supply. (This is not a consent form.) Authority for this agency to access an individual's criminal history data may be found in Texas Government Code 411; Subchapter F.

Name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history, therefore the organization conducting the criminal history check is not allowed to discuss with me any criminal history record information obtained using this method. The agency may request that I have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search. Once this process is completed the information on my fingerprint criminal history record may be discussed with me.

In order to complete the process I must make an appointment with the Fingerprint Applicant Services of Texas (FAST) as instructed online at [www.txdps.state.tx.us/ Crime Records / Review of Personal Criminal History](http://www.txdps.state.tx.us/CrimeRecords/ReviewofPersonalCriminalHistory) or by calling the DPS Program Vendor at 1-888-467-2080, submit a full and complete set of fingerprints, request a copy be sent to the agency listed below, and pay a fee of \$24.95 to the fingerprinting services company.

(This copy must remain on file by your agency. Required for future DPS Audits)

Signature of Applicant or Employee

Date

City of Brownwood

Agency Name (Please print)

Agency Representative Name (Please print)

Signature of Agency Representative

Date

Please: Check and Initial each Applicable Space			
CCH Report Printed:			
YES ___	NO ___	_____	initial
Purpose of CCH:			
Emp. ___	Vol/Contractor ___	_____	initial
Date Printed:	_____	_____	initial
Destroyed Date:	_____	_____	initial

Retain in your files

