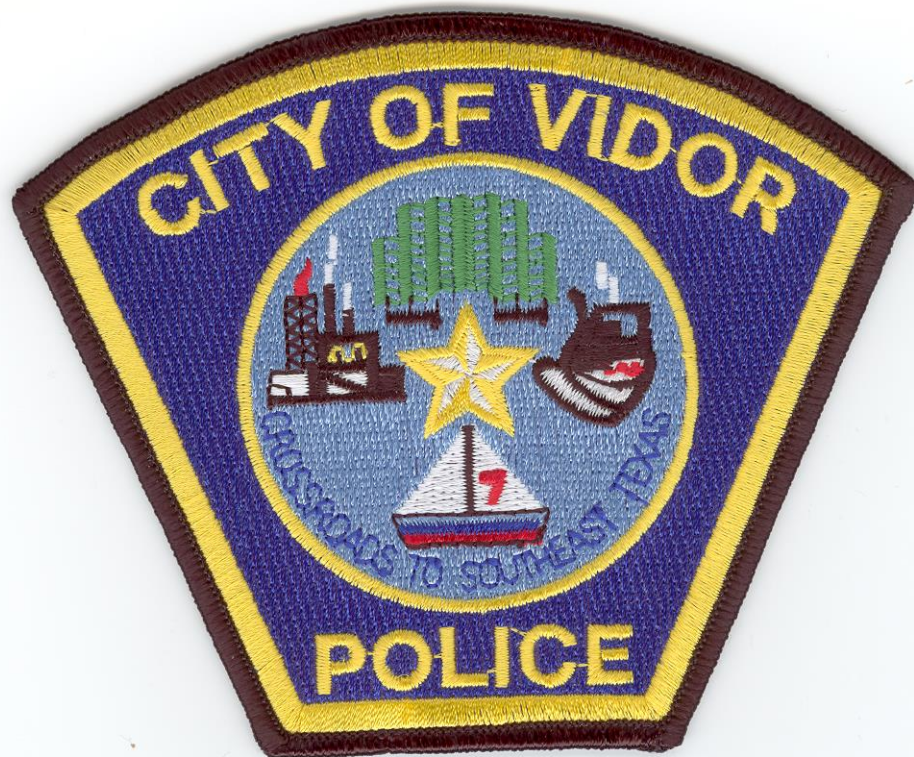


PERSONAL HISTORY STATEMENT OF

Printed Name of Applicant



CITY OF VIDOR
POLICE DEPARTMENT
695 EAST RAILROAD
VIDOR, TEXAS 77662

AUTHORITY TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

I hereby authorize the Vidor Police Department and/or The City of Vidor, Texas 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: _____

Vidor Police Department

APPLICANT'S PERSONAL HISTORY STATEMENT

NAME _____

DATE ISSUED _____

COMPLETE AND RETURN BY _____

I am applying for:

-] Peace Officer PID# _____
-] County Jailer PID# _____
-] Telecommunicator PID# _____
-] Civilian Employment

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, guaranty 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. Your application must be printed legibly in **BLACK INK** by the applicant or typed. 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. All documents requested must be submitted with the application (photocopies are acceptable in most cases).

1. **Completed Personal History Statement**
2. Copy of your Social Security card.
3. Original certified copy of your birth certificate. (No photo copy)
4. 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.
5. Copy of your High School diploma or GED certificate.
6. Sealed original certified copy of your college transcript. (No photo copy)
7. Photocopy of your college diploma.
8. Copy of your Peace Officer Certificate from your police academy. (Peace Officer Applicants Only)
9. Copy of your Texas peace officer license and all training certificates awarded to you. (Peace Officer Applicants Only)
10. Copy of your DD-214 if applicable. Must possess an Honorable Discharge.
11. Original certified copy of your Naturalization papers, if applicable. (No photo copy)
12. Copy of current proof of automobile liability insurance.
13. Copy of a TCOLE approved Firearms Qualifications within the last 12 months.

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 peace officer or jailer 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.

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 personal history statement is a governmental document. Be truthful, as there are criminal consequences for lying on a governmental document.

-
- B. **RESIDENCES** – List all addresses where you have lived during the past 10 years, beginning with present address. List date by month and year. Attach extra page if necessary.

FROM	TO	ADDRESS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- C. **WORK HISTORY** – Beginning with your present or most recent job, list all employment since the age of 17, including part-time, temporary, or seasonal employment. Include all periods of unemployment. Attach extra pages if necessary.

1. FROM _____ TO _____

EMPLOYER _____ SUPERVISOR _____

ADDRESS _____

PHONE NUMBER _____ JOB TITLE _____

DUTIES _____

NAME OF CO-WORKER _____

REASON FOR LEAVING _____

2. FROM _____ TO _____
EMPLOYER _____ SUPERVISOR _____

ADDRESS _____

PHONE NUMBER _____ JOB TITLE _____

DUTIES _____

NAME OF CO-WORKER _____

REASON FOR LEAVING _____

3. FROM _____ TO _____

EMPLOYER _____ SUPERVISOR _____

ADDRESS _____

PHONE NUMBER _____ JOB TITLE _____

DUTIES _____

NAME OF CO-WORKER _____

REASON FOR LEAVING _____

4. FROM _____ TO _____

EMPLOYER _____ SUPERVISOR _____

ADDRESS _____

PHONE NUMBER _____ JOB TITLE _____

DUTIES _____

NAME OF CO-WORKER _____

REASON FOR LEAVING _____

5. FROM _____ TO _____

EMPLOYER _____ SUPERVISOR _____

ADDRESS _____

PHONE NUMBER _____ JOB TITLE _____

DUTIES _____

NAME OF CO-WORKER _____

REASON FOR LEAVING _____

6. FROM _____ TO _____

EMPLOYER _____ SUPERVISOR _____

ADDRESS _____

PHONE NUMBER _____ JOB TITLE _____

DUTIES _____

NAME OF CO-WORKER _____

REASON FOR LEAVING _____

7. FROM _____ TO _____

EMPLOYER _____ SUPERVISOR _____

ADDRESS _____

PHONE NUMBER _____ JOB TITLE _____

DUTIES _____

NAME OF CO-WORKER _____

REASON FOR LEAVING _____

D. MILITARY RECORD

1. HAVE YOU SERVED IN THE U.S ARMED FORCES? YES NO

2. DATE OF SERVICE: FROM _____ TO _____

3. BRANCH OF SERVICE _____
4. UNIT DESIGNATION _____
5. MILITARY SERVICE NUMBER _____
6. HIGHEST RANK HELD _____
7. TYPE OF DISCHARGE _____
8. WERE YOU EVER DISCIPLINED WHILE IN THE MILITARY SERVICE
(INCLUDE COURT-MARTIAL, CAPTAIN'S MASTS, COMPANY
PUNISHMENT, ETC.)?

YES NO

CHARGE	AGENCY	DATE	AGE	DISPOSITION

IF YOU RECEIVED A DISCHARGE OTHER THAN HONORABLE, GIVE
COMPLETE DETAILS.

E. EDUCATIONAL HISTORY

HIGH SCHOOL ATTENDED	CITY & STATE	DATES ATTENDED FROM TO	GRADUATED YES NO

COLLEGE OR UNIVERSITY ATTENDED: _____

CITY & STATE _____ DATES ATTENDED _____

UNITS COMPLETED _____

MINOR/MAJOR _____

DEGREE RECEIVED, IF ANY, & DATE _____

COLLEGE OR UNIVERSITY ATTENDED: _____

CITY & STATE _____ DATES ATTENDED _____

UNITS COMPLETED _____

MINOR/MAJOR _____

DEGREE RECEIVED, IF ANY, & DATE _____

3. List other schools attended (trade, vocational, business, etc.). Give name and address of school, dates attended, course of study, certificate, and any other pertinent information.

F. SPECIAL QUALIFICATIONS & SKILLS

1. LIST ANY SPECIAL LICENSES YOU HOLD (SUCH AS PILOT, RADIO OPERATOR, SCUBA, ETC.), SHOWING LICENSING AUTHORITY, ORIGINAL DATE OF ISSUE, AND DATE OF EXPIRATION.

2. LIST ANY SPECIALIZED MACHINERY OR EQUIPMENT WHICH YOU CAN OPERATE.

3. IF YOU ARE FLUENT IN A FOREIGN LANGUAGE, INDICATE IN EACH AREA YOUR DEGREE OF FLUENCY (EXCELLENT, GOOD, FAIR).

LANGUAGE	READING	SPEAKING	UNDERSTANDING	WRITING
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

4. LIST ANY OTHER SKILLS OR QUALIFICATIONS YOU MAY POSSESS

G. ARRESTS, DETENTIONS, AND LITIGATIONS

1. HAVE YOU EVER BEEN ARRESTED, DETAINED BY POLICE, OR SUMMONED INTO COURT? YES NO

IF YES, COMPLETE THE FOLLOWING:

<u>OFFENSE</u> <u>CHARGED</u>	<u>POLICE AGENCY</u> <u>CITY & STATE</u>	<u>DATE</u>	<u>DISPOSITION</u> <u>OF CASE</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. HAVE YOU EVER BEEN INVOLVED AS A PARTY IN CIVIL LITIGATION?

YES NO

IF YES, GIVE DETAILS _____

H. TRAFFIC RECORD

1. HAS YOUR DRIVER'S LICENSE EVER BEEN SUSPENDED OR REVOKED?

YES NO

IF YES, GIVE DATE, LOCATION, AND REASONS _____

2. WITH WHAT COMPANY DO YOU CARRY YOUR AUTO INSURANCE?

3. LIST TO THE BEST OF YOUR MEMORY ALL TRAFFIC CITATIONS YOU HAVE RECEIVED, INCLUDING PARKING TICKETS.

<u>MONTH & YEAR</u>	<u>CHARGE</u>	<u>CITY & STATE</u>	<u>DISPOSITION</u>
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_____	_____	_____	_____
-------	-------	-------	-------

_____	_____	_____	_____
-------	-------	-------	-------

_____	_____	_____	_____
-------	-------	-------	-------

_____	_____	_____	_____
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4. DESCRIBE IN A BRIEF NARRATIVE ANY TRAFFIC ACCIDENTS IN WHICH YOU HAVE BEEN INVOLVED, GIVING APPROXIMATE DATES AND LOCATIONS.

I. **MARITAL & FAMILY HISTORY**

1. ARE YOU? SINGLE
 ENGAGED
 MARRIED
 SEPARATED
 DIVORCED
 WIDOWED

2. **IF ENGAGED:**

NAME OF FIANCE: _____

ADDRESS: _____

PHONE: _____

3. **IF MARRIED:**

DATE: _____

CITY & STATE _____

SPOUSE'S NAME (WIFE'S MAIDEN) _____

4. **IF EVER SEPARATED, DIVORCED, OR WIDOWED:**

DATE OF MARRIAGE _____

CITY & STATE _____

SPOUSE'S NAME
(WIFE'S MAIDEN) _____

PRESENT ADDRESS
& PHONE _____

SEPARATED, DIVORCED,
OR ANNULLED (STATE WHICH) _____

DATE OF ORDER OF DECREE _____

COURT & STATE WHERE ISSUED _____

J. **FINANCIAL HISTORY**

SOURCES OF INCOME

1. WHAT IS YOUR PRESENT SALARY OR WAGES? _____

2. DO YOU HAVE INCOME FROM ANY OTHER SOURCE OTHER THAN
YOUR PRINCIPAL OCCUPATION? YES NO

IF YES, HOW MUCH? _____

HOW OFTEN? _____

THE SOURCE? _____

3. DO YOU OWN ANY REAL ESTATE? YES NO VALUE: \$ _____

LOCATION: _____

4. DO YOU OWN ANY BONDS, GOVERNMENT OR OTHER?

YES NO VALUE: \$ _____

5. DO YOU OWN ANY CORPORATE STOCK?

YES NO VALUE: \$ _____

6. DO YOU HAVE A BANK ACCOUNT?

YES NO

SAVINGS

AVERAGE BALANCE: \$ _____

NAME & ADDRESS OF BANK: _____

CHECKING

AVERAGE BALANCE: \$ _____

NAME & ADDRESS OF BANK: _____

OTHER

L. **REFERENCES** – LIST FIVE PERSONS WHO KNOW YOU WELL ENOUGH TO PROVIDE CURRENT INFORMATION ABOUT YOU. DO NOT LIST RELATIVES OR FORMER EMPLOYERS.

NAME: _____ ADDRESS _____

RESIDENCE PHONE: _____

BUSINESS PHONE: _____

BUSINESS ADDRESS: _____

YEARS KNOWN: _____

NAME: _____ ADDRESS _____

RESIDENCE PHONE: _____

BUSINESS PHONE: _____

BUSINESS ADDRESS: _____

YEARS KNOWN: _____

NAME: _____ ADDRESS _____

RESIDENCE PHONE: _____

BUSINESS PHONE: _____

BUSINESS ADDRESS: _____

YEARS KNOWN: _____

NAME: _____ ADDRESS _____

RESIDENCE PHONE: _____

BUSINESS PHONE: _____

BUSINESS ADDRESS: _____

YEARS KNOWN: _____

NAME: _____ ADDRESS _____

RESIDENCE PHONE: _____

BUSINESS PHONE: _____

BUSINESS ADDRESS: _____

YEARS KNOWN: _____

M. **MEMBERSHIP IN ORGANIZATIONS (PAST AND/OR PRESENT)**

<u>NAME & ADDRESS</u>	<u>TYPE (SOCIAL, FRATERNAL, PROFESSIONAL, ETC.)</u>	<u>FROM</u>	<u>TO</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

N. **PERSONAL DECLARATION**

1. DESCRIBE IN YOUR OWN WORDS THE FREQUENCY AND EXTENT OF YOUR USE OF ALCOHOLIC BEVERAGES _____

2. DESCRIBE THE LEVEL, FREQUENCY, AND CIRCUMSTANCES SURROUNDING ANY USE OF MARIJUANA OR ILLEGAL USE OF DRUGS NOT PRESCRIBED BY A PHYSICIAN. _____

3. DESCRIBE, IN DETAIL, ANY INCIDENT IN WHICH YOU SOLD OR FURNISHED ANY MARIJUANA, ILLEGAL DRUGS, OR NARCOTICS TO ANYONE. _____

4. DESCRIBE ANY BELIEFS OR PRECEPTS YOU MAY HAVE WHICH WOULD PREVENT YOU FROM TAKING A HUMAN LIFE INT THE COURSE OF YOU LAW ENFORCEMENT DUTIES IF REQUIRED TO DO SO. _____

5. DO YOU HAVE ANY RELIGIOUS OR OTHER BELIEFS WHICH WOULD PREVENT YOU FROM FULLY PERFORMING THE DUTIES OF A POLICE OFFICER, INCLUDING WORKING ON WEEKENDS, EVENING, OR NIGHT SHIFTS? YES NO

IF YES, EXPLAIN. _____

6. HAVE YOU EVER APPLIED FOR EMPLOYMENT WITH THIS OR ANY OTHER LAW ENFORCEMENT OR RELATED AGENCY? YES NO

IF SO, GIVE AGENCY, DATE (S), AND STATUS OF APPLICATION.

7. 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 SO, EXPLAIN _____

8. A POLYGRAPH EXAMINATION MAY BE ADMINISTERED AS PART OF THIS RECRUITMENT PROCESS. ALTHOUGH THIS EXAM ITSELF WILL NOT DISQUALIFY YOU FROM EMPLOYMENT, THE RESULTS MAY CAUSE FURTHER BACKGROUND INVESTIGATION WHICH COULD REVEAL INFORMATION THAT COULD DISQUALIFY YOU FROM EMPLOYMENT.

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:

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 or STAMP

Signature of Notary

My Commission Expires: _____