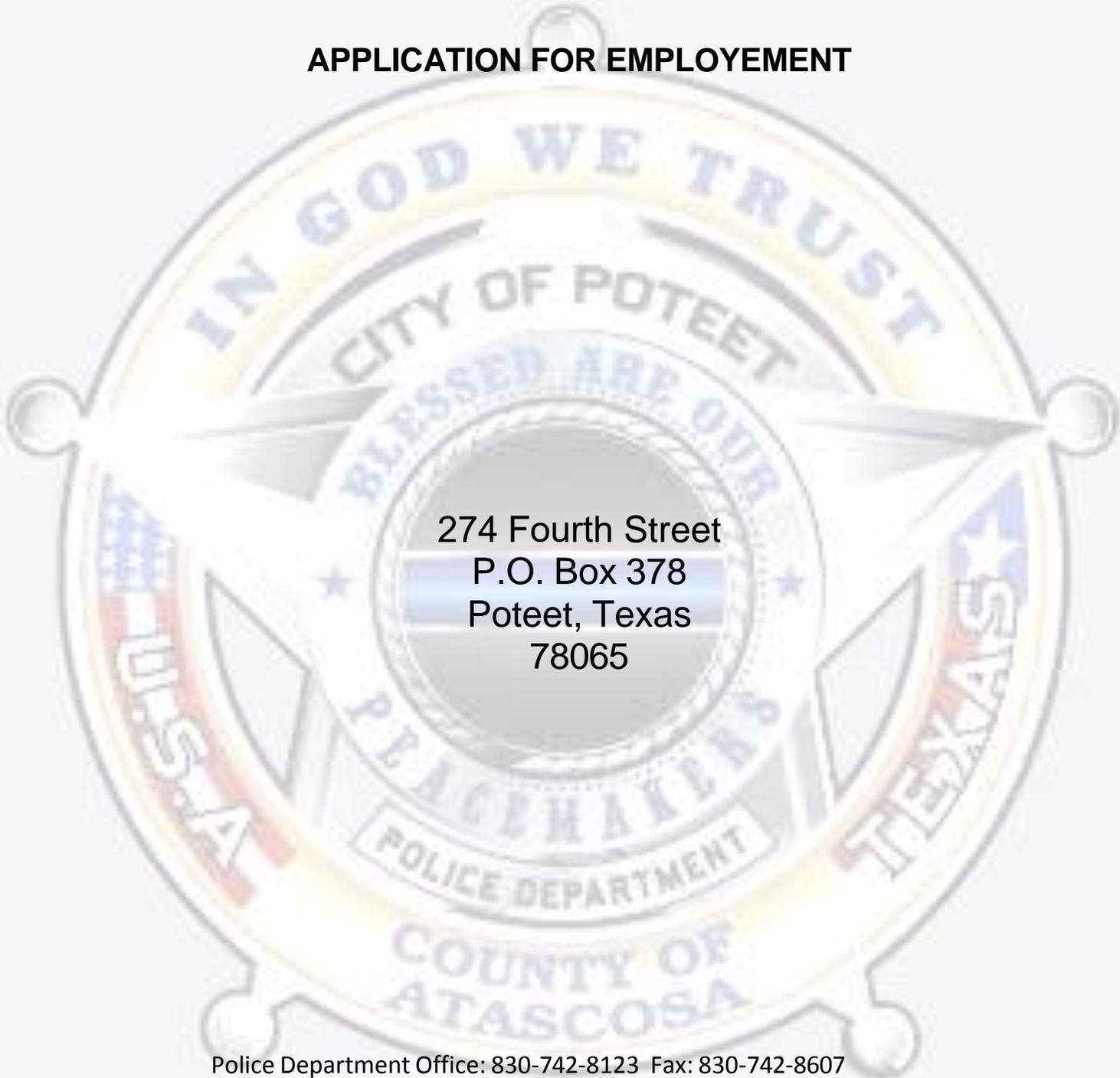


City of Poteet Police Department

Chief Bruce Hickman

APPLICATION FOR EMPLOYMENT



274 Fourth Street
P.O. Box 378
Poteet, Texas
78065

Police Department Office: 830-742-8123 Fax: 830-742-8607
City Hall Office: 830-742-3575 Fax: 830-742-874

THE CITY OF POTEET IS AN EQUAL OPPORTUNITY EMPLOYER

INSTRUCTIONS

READ THESE INSTRUCTIONS CAREFULLY BEFORE PROCEEDING

These instructions are provided as a guide to assist you in properly completing your Police application. It is essential that the information be accurate in all respects. It will be used as the basis for a background investigation that will determine your eligibility for employment.

1. Your application should be printed legibly in ink or typed. Answer all questions to the best of your ability.
2. If a question is not applicable to you enter "N/A" in the space provided. An application that is not fully completed properly will not be accepted.
3. Avoid errors by reading the directions carefully before making any entries on the form. Be sure your information is correct and in proper sequence before you begin.
4. You are responsible for obtaining correct address. If you are not sure of an address, check it by personal verification. Your local library may have a directory service or copies of local phone directories.
5. If there is sufficient space on the form for you to include all information required, attach extra sheets to the application. Be sure to reference the relevant section and question number before continuing your answer.
6. An accurate and complete form will help expedite your investigation. On the other hand, deliberate omissions or falsifications may result on disqualification.
7. Documents needed:
 - a. Birth Certificate or proof of birth
 - b. Copy of Driver's License
 - c. High School Diploma or G.E.D. Certificate
 - d. Discharge papers or DD-214



City of Poteet

"Strawberry Capital of Teas"

491 Ave H • PO Box 378

Poteet, Texas • 78065

t. 830.742.3574 • f. 830.742.8747



APPLICATION FOR EMPLOYMENT

The City of Poteet, Texas does not discriminate on the basis of race, color, religion, national origin, sex, age, disability, veteran status, or any other legally protected status in accordance with federal, state and local laws.

This application for employment was designed for use by person applying various types of positions. Some questions may not be completely applicable to the position. Please complete all job-related questions to the best of your ability. Applicants may request any accommodation needed to participate in the application and/or interview process.

Position applied for	Date of Application

Last Name	First Name	Middle Name
Address (Street/Route/Post Office Box)		
Contact Phone Number(s)	Email Address	Social Security Number
Cell () -		
Home () -		
Other () -		

<p>If you are over 18 years of age, can you show proof of eligibility to work? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you filed an application with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Are you related by kinship or marriage to any City of Poteet employee currently employed by the City or any city Council Member currently serving in Office? If yes, please give name & relationship: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you ever been employed under any other name? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Do you have a current / valid driver's license? State: _____ Number: _____ Type: _____</p> <p>Date available for employment with the City of Poteet _____</p> <p>What is your desired hourly / salary range? _____</p> <p>Can you travel if the job requires it? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Available for: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary <input type="checkbox"/> Shift work</p>
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EDUCATION AND TRAINING

Indicate the highest grade completed: _____ Other: _____

Did you graduate / achieve GED? Yes No

	Name of School City & State	Number of Years Completed	Degree / Certification Earned	Major
High School				
College				
Graduate School				
Trade/Business/Other Training				

* Please include undergraduate colleges or universities, graduate schools, technical, vocational, or business schools

SPECIAL SKILLS / QUALIFICATIONS

Add any additional special job-related skills or qualifications you may have received from your experiences (e.g. foreign language proficiency, office or special equipment you can operate and types of computer software / hardware you are familiar with using.

Special Job-related skills/qualification	Office or Special Equipment	Computer Software / Hardware

If a license, certificate or other authorization is required or related to the position for which you are applying, please complete the following:

License / Certificate	Date Issued	Issued by: State or Issuing Authority	License Number	Location of issuing authority (City / State)

EMPLOYMENT RECORD

* Instructions: Give information related to the most recent job(s) you held and described duties performed. Include any job related military service assignments or volunteer work.

**You may attach a resume, so full employment experience may be reviewed,
BUT this section still must be completed.**

Employer:		Address:	
City, State	Zip Code:	Phone No. ()	
Supervisor's Name:		Full Time <input type="radio"/>	Part Time <input checked="" type="radio"/>
		Temporary <input checked="" type="radio"/>	
Employed From:	To:	Starting Salary:	Ending Salary:
Job Title:		Would there be a problem if we contact your current Employer? Yes _____ No _____	
If yes, explain:			
Job Description:			
Reason For Leaving:			

Employer:		Address:	
City, State	Zip Code:	Phone No. ()	
Supervisor's Name:		Full Time <input type="radio"/>	Part Time <input checked="" type="radio"/>
		Temporary <input checked="" type="radio"/>	
Employed From:	To:	Starting Salary:	Ending Salary:
Job Title:		Would there be a problem if we contact your current Employer? Yes _____ No _____	
If yes, explain:			
Job Description:			
Reason For Leaving:			

Employer:		Address:	
City, State	Zip Code:	Phone No. ()	
Supervisor's Name:		Full Time <input checked="" type="radio"/>	Part Time <input checked="" type="radio"/>
Employed From:	To:	Starting Salary:	Ending Salary:
Job Title:		Would there be a problem if we contact your current Employer? Yes _____ No _____	
If yes, explain:			
Job Description:			
Reason For Leaving:			

Employer:		Address:	
City, State	Zip Code:	Phone No. ()	
Supervisor's Name:		Full Time <input checked="" type="radio"/>	Part Time <input checked="" type="radio"/>
Employed From:	To:	Starting Salary:	Ending Salary:
Job Title:		Would there be a problem if we contact your current Employer? Yes _____ No _____	
If yes, explain:			
Job Description:			
Reason For Leaving:			

REFERENCES

Title / Name	Address	Phone

TRAFFIC ACCIDENT'S

Describe briefly any traffic accidents in which you have been involved, giving approximate dates and locations.

Brief Description	City / State	Dates and Disposition

MILITARY SERVICE

Have you ever served in the Armed Forces of the United States? Yes No

If YES, Dates of Service: From _____ To _____

Branch of Service: _____ Highest Rank Held: _____

Type of Discharge: _____

If you received a discharge other than Honorable, please give complete details.

Details: _____

Are you in the Guard or Reserves? Yes No

Are you currently under indictment, awaiting trial, on probation, or serving a period of deferred adjudication for any criminal offense? Yes No If YES, please explain:

Explanation: _____

SPECIAL TRAINING / SKILLS / QUALIFICATIONS

List all job-related training or skills you possess and machines or office equipment you can use, such as calculators, printing or graphics equipment, computer equipment, types of software and hardware. (Attach additional page, if necessary.)

MEMBERSHIP IN ORGANIZATIONS (PAST AND/OR PRESENT) – Social / Fraternal / Professional

APPLICANT'S STATEMENT (Please read and sign below)

1. I certify that all the information provided by me in connection with my application, whether on this document or not, is true and complete, and I understand that any misstatement, falsification, or omission of information may be grounds for refusal to hire or, if hired, termination.
2. I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the U.S.
3. I authorize investigation of all statements, contained in this application for employment, as may be necessary in arriving at an employment decision and do not hold the City or any other individual involved in this investigation liable for information obtained in this process.
4. I also understand that false or misleading information given in my interview, or this application, may result in my elimination from consideration for employment and/or discharge at any time.
5. I further understand that, if employed, I will abide by all policies, rules and procedures of the City of Poteet.
6. I understand the City of Poteet follows an "employment at will" policy which means the City of Poteet may terminate my employment at any time and/or for any reason consistent with applicable state or federal laws.

Print Name: _____

Signature: _____

Date: _____

FOR HUMAN RESOURCES DEPARTMENT USE ONLY

Arrange an Interview: Yes No

Hired: Yes No

Remarks:

Employed: Yes No

Start Date: _____

Job Title: _____

Hourly / Salary rate: _____

Department: _____

Approved by: _____

(Print Name)

Signature: _____

Date: _____

Authorization for Release of Information

I hereby authorize any investigator or duly accredited representative of the City of Poteet bearing this signed release to obtain any information from schools, residential managements agents, employers, criminal justice agencies, individuals, or credit agencies relating to my activities.

This information may include, but is not limited to, academic, residential, achievement performance, attendance, personal history, personal finances, disciplinary, and conviction records. I hereby authorize the release of said information upon the request of the City of Poteet. I understand that the information released is for official use of the City of Poteet and may be disclosed to any necessary third parties for the fulfillment of the official responsibilities.

Written inquiries about criminal conviction will not automatically disqualify an applicant for a particular position.

The type and seriousness of the crime, the frequency of violations, the applicant's age at the time of the conviction, the date of conviction, and the applicant's entire work and educational history will be considered.

I hereby release any individual, including record custodians, from any and all liability for damages of any nature that may at any time result to me on account of compliance, or any attempts to comply, with this authorization.

Applicant's Name (Print)

Date

Applicant's Signature

Social Security Number

Address

Phone

Date of Birth

Subscribed and Sworn to before me, by the said _____
this _____ day of _____, 20____, to certify wick witness my hand
and seal of office.

Notary Public, _____ County, Texas

My Commission Expires: _____

I hereby certify that there are no willful misrepresentation, omissions, of falsifications in the foregoing statements and answers to questions. I am fully aware that any such misrepresentations, omissions, or falsification will be grounds for immediate rejection or termination from employment.

Signature of Applicant

Date

I, _____, agree to cooperate fully with any background investigation and to submit to polygraph testing if requested to do so by the Poteet Police Department. I also understand that any refusal to submit to the polygraph testing will be grounds for rejection of my employment application.

I have read the above statements and understand their importance. I certify that all information provided by me is true and accurate to the best of my knowledge.

Print Name

Signature

Date