



TOWN OF ANTHONY POLICE APPLICATION FOR EMPLOYMENT

Town of Anthony
Post Office Box 1269
Anthony, Texas 79821

Print in Black ink

Date : _____

Position Applying for: _____

Name: _____
(First) (Last) (Middle)

Home Address: _____
(Street) (Apt. #) (City) (State) (Zip)

Mail Address: _____
(Street) (Apt. #) (City) (State) (Zip)

Phone: Home () _____ Work: () _____ Cell: () _____

Social Security No. _____ Driver's License # _____

Date of Birth: ____/____/____ State : _____ Type: _____

Are You a U.S. Citizen? Yes No

Are you a Legal Resident Alien? Yes No

Will you accept employment for: (Please check)

- Permanent Full-Time Permanent Part time Reserve
- Weekend Evening Shift Work

Do Not Write Below This Line

Documents:

Reviewer's Comments:

Received:

Needed By:

- _____ High School Diploma
- _____ G.E.D.
- _____ College Transcript/Diploma
- _____ Resume
- _____ Service Discharge (DD214)
- _____ Letter of Disability (VA)
- _____ Driver's License
- _____ Social Security Card
- _____ Other/ Picture

- Desk Review Phone Interview
- Interview Not Qualified
- Qualified

Reason for Rejection (if applicable)

- Education Experience
- Document Other (explain)

Reviewer's Initial/ Date

READ CAREFULLY AND ANSWER ALL QUESTIONS BY CHECKING YES OR NO	YES	NO
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Have you previously worked for the Town of Anthony? If yes, give dates and reasons for your separation in “REMARKS” below		
Have you ever served on active duty in the armed forces? If yes date of service (from) _____ (To) _____ Branch of Service _____, type of discharge _____. Include a copy (s) of your DD214 showing Character of discharge.		
Have you been dismissed or asked to resign from any job? If yes explain in the “REMARKS” below.		
Do You have relatives employed by the Town of Anthony, or relatives who are currently serving on the Town Council? If yes, list name(s), relationship(s) in “REMARKS” below.		
May we contact your present employer?		
Are you currently under a court order probation (including deferred adjudication)?		
Are you currently awaiting trial or judgment on pending criminal charges?		
Have you ever been convicted of a misdemeanor, felony, or by military court martial (other than routine traffic Offences)? Please include payment(s), of a fine(s) or forfeiture of a bond(s) and please of nolo contendere.		
REMARKS: (use to explain above item(s). Also show any licenses, memberships in organizations or professional groups, ect., related to the position For which applying.)		

EDUCATION:	Circle Highest Grade Completed:	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 +
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Check if Received: High School Diploma <input type="checkbox"/> or GED <input type="checkbox"/>			
Business or Trade School Attended Name and Location	Diplomas or Certificates Awarded	Hours/Months Completed	Course of Study

COLLEGE/UNIVERSITY ATTENDANCE

College or University	No. of Semester or Qrt. Hours Completed	Major/ Minor	Type of Degree Date received



ANTHONY TEXAS POLICE DEPARTMENT

CHIEF OF POLICE CARLOS ENRIQUEZ

P.O. BOX 1269

ANTHONY, TEXAS 79821

Phone (915) 886-3838 Fax (915) 886-5422

AUTHORITY FOR RELEASE OF CONFIDENTIAL INFORMATION AND WAIVER

1. I, _____ hereby authorize the full disclosure and release of all confidential, privileged, public and/or private records contained in my personal file to the

Anthony Police Department, or it's duly authorized agent.

2. The authorization here subscribed and witnesses gives my consent for full and complete disclosure of any or all of said records and/or recollections of educational, financial or credit institutions; including loan records, employment and pre-employment records, background reports, efficiency ratings, commendations, awards, grievances and/or complaints files by, for, or against me. Further, I hereby waive the attorney-client privilege of confidentiality for any attorney with whom I may hold such privilege, and thereby authorize the disclosure of such privileged information relating to any civil or criminal case in which I may have a present or past involvement.

3. I understand that the above authorization for release of records may be requested during the course of a personal history background investigation. I further understand that any such request could result directly, or indirectly, in the release of negative information, any part of which could be included in my personal history profile and forwarded to prospective employers.

4. I further certify that any persons, or institutions, furnishing information concerning me shall be held harmless and I hereby release said persons, or institutions, from any and all liability which may incur as a result of the release of said information.

5. A photocopy, or teletcopy, of this sworn and subscribed release document will be as valid as an original thereof.

Signature of applicant

Date

SUBSCRIBED AND SWORN TO BEFORE ME BY _____

ON THIS THE _____ DAY OF _____ 20 _____

Notary Public in, and for, the State of Texas _____

Printed Name of Notary

My Commission Expires: _____

Notary seal
or stamp:

Signature of Notary

EMPLOYMENT RECORD

List below your current or most recent position and work backward describing each and all positions/jobs you held during the past 10 Years and any other positions/job which relates to the position. List your entire work history including volunteer, part-time, temporary, self – employment. Please explain all periods of unemployment exceeding 90 days. If during the employment by any one employer you were promoted and/ or your job duties were substantially changed, list these as separate positions. Use additional paper if necessary. (A resume may be substituted for the “duties” portion **ONLY**. You **MUST** provide all required information on this form).

Employer: _____ Job title: _____
Address: _____ Phone: _____
Supervisor: _____ Title: _____
Period of Employment: (from) _____ (to) _____ Total Time: _____ years _____ Months Salary _____
Co-Workers Name _____ Phone Number: _____
Reason for leaving: _____
Duties: _____

Hours per Week: _____

Employer: _____ Job title: _____
Address: _____ Phone: _____
Supervisor: _____ Title: _____
Period of Employment: (from) _____ (to) _____ Total Time: _____ years _____ Months Salary _____
Co-Workers Name _____ Phone Number: _____
Reason for leaving: _____
Duties: _____

Hours per Week: _____

Employer: _____ Job title: _____
Address: _____ Phone: _____
Supervisor: _____ Title: _____
Period of Employment: (from) _____ (to) _____ Total Time: _____ years _____ Months Salary _____
Co-Workers Name _____ Phone Number: _____
Reason for leaving: _____
Duties: _____

Hours per Week: _____

Employer: _____ Job title: _____
Address: _____ Phone: _____
Supervisor: _____ Title: _____
Period of Employment: (from) _____ (to) _____ Total Time: _____ years _____ Months Salary _____
Co-Workers Name _____ Phone Number: _____
Reason for leaving: _____
Duties: _____

Hours per Week: _____

REFERENCES: Give Name, address & telephone number of three references who you have known at least 2 years and are not Related to you or are not previous employers

1.

2.

3.

May we contact your present employer? Yes No if no explain _____

Please list any other skills you have which you would like us to consider for this job. (i.e. computer, word processing, equipment operation maintenance, ect.)

IMPORTANT INFORMATION- PLEASE READ CAREFULLY
Certification and Release of Information

I authorize the Town of Anthony, or its duly accredited representative, to obtain any information relating to my activities from individuals, schools, residential management agencies, employers, criminal justice agencies, financial or lending institutions, credit bureaus, consumer reporting agencies or retail business establishments. This information may include, but is not limited to, my academic, residential, achievements, performance, attendance, personal history record, conviction, financial and credit information as each may pertain to the job I have applied for.

I authorize the Town of Anthony to investigate all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I direct you to release such information upon request of the duly accredited representative of the Town of Anthony regardless of any agreement I may have made with you previously to the contrary.

I have been advised that the original of this authorization will be placed on file with the Town Clerk. A copy of this release shall have the same effect as the original.

My signature releases all of the above, including the Town of Anthony, its agents and the former employer, to the fullest extent permitted by law from claims, damages, losses, liabilities and expenses including but not limited to, attorney fees and court costs, arising from the retrieving and the reporting of any such information.

I certify that answers given herein are true and complete to the best of my knowledge. I understand that any false, incomplete or misleading information given in my application or interview(s) may result in disqualification, or termination (if hired). I understand that I am required to abide by all rules, policies and procedures of the Town of Anthony and the Anthony Police Department.

Date

Signature of Applicant

Sworn and subscribed to me this _____
Day of _____ 20____

Notary Public in and for
El Paso County, Texas

**TOWN OF ANTHONY POLICE
SUPPLEMENTARY FORM
For
EMPLOYMENT**

Have you received any traffic citations in the last 5 years? Yes No If yes, complete the following: List every citation that you have received.

CHARGE	CITY/STATE	DATE	FINAL DISPOSITION

Are there any possible citations that you have not listed that you cannot recall at this time? YES NO
 If yes approximately how many? 1-4 ____ 5-10 ____ 11-15 ____ 16 + ____

Have you ever been charged or convicted with driving while intoxicated or driving under the influence of alcohol or drugs?
 Yes NO If yes, give charge, date, location, circumstances and final disposition of the case: _____

Are you under any type of court ordered community supervision or probation for any criminal offence? YES NO

If yes give details: _____

Have you been convicted of a misdemeanor offence above the grade of a Class C misdemeanor within the last 5 Years? YES NO If yes give date(s) and details: _____

Have you ever been convicted of a felony offense? YES NO If yes give date(s) and details: _____

THIS FORM MUST BE RETURNED TO THE TOWN OF ANTHONY WITH THE REGULAR APPLICATION

Please read the statement below and sign it after completing the form.

I certify that my statements in this form are true, complete and correct to the best of my knowledge and belief. I understand that any falsification and/or omission of information may remove my name from the eligibility list or if I have been appointed, cause my dismissal from the position. I also agree that all statements may be investigated.

Date: _____

Signature: _____

Printed Name: _____

Social Security No. _____

Sworn and subscribed to me on this _____ day of _____ 20____

Notary Public in and for
El Paso, Texas

**TOWN OF ANTHONY POLICE
SUPPLEMENTAL FORM
FOR
EMPLOYMENT**

List any criminal arrests you may have on your record, including location of offense, dates and the name of the arresting agency.

1. _____
2. _____
3. _____
4. _____

Have you ever been involved as a party in Civil Litigations? Yes if yes give details, No

Have you ever been a member of the United States Armed Forces? Yes if yes give details NO

1. Date of Service: From: _____ To: _____
2. Branch: _____
3. Highest Rank: _____
4. Type of Discharge: _____
5. Where you ever disciplined while in the military service, including Court Martial, Captain Mast, Company Punishment ect. No Yes if so list charge, Agency, date, age at the time and the disposition.

With what company do you carry Auto Insurance with? _____

Have you ever had your driver's license revoked or suspended? Yes No if so give details:

Describe in brief ant traffic Accidents in which you have been involved in, giving approximate dates, locations and dispositions.

Marital Status: Single Married Divorced Engaged Separated Widowed

If Married give spouse's name (Wife's maiden name) _____

Telephone Number: _____

If Divorced give State/ County and date of divorced:

Have you ever received a Workman's Compensation or any other Disability Insurance payment? Yes No

If yes give details:

Describe in your own words the frequency and extent of use of intoxicating liquors.

Have you ever use marijuana or any other drug not prescribed by a physician? Yes No if yes explain:

Have you ever sold, given, or delivered illegal drugs or narcotics to anyone? Yes No if yes explain:

Have you ever received illegal narcotics from anyone? Yes No if yes explain:

Have you ever made application for employment with this or any other law enforcement agency? Yes

No. if yes explain status of application, if applicable, reason for not being hired.

If it became necessary to take a human life in the course of your duties as a police officer, would your beliefs or any other principals prevent you from doing so? Yes No if yes explain:

If it became necessary to work weekends, holidays, evenings or nights in the course of your duties as a police officer, would your beliefs or any other principles prevent you from doing so? Yes No if yes explain:

List all addresses where you have lived during the past ten years, beginning with your present address. List date by month and year. Attached extra page if necessary.

Have you ever been fired or asked to resign from a job? Yes No if yes explain;

List three additional references that you have known for at least 2 years, that are not related to and are not your previous employers.

Financial Obligations

Include credit card(s) and name of issuing institution(s). Do not include credit card(s) numbers(s).

Name	Location of creditor	Phone Number	Monthly Payment.	Balance

Are you under obligation to pay child support? Yes No if yes are you current? Yes No Give name of individual, agency name, address, and phone number to whom your payments are made.

Professional, Fraternal, or Civic Association Memberships

Organization	Period of time	Office held

Special Accomplishments, Publications, Awards:

In your own words describe why you want to become a member of the Anthony Police Department?

Attach below a current photo:

WAIVER OF LIABILITY
EMPLOYMENT TERMINATION HISTORY RELEASE

NAME (LAST, FIRST, MIDDLE INITIAL) _____

SOCIAL SECURITY NUMBER _____

DEPARTMENT REQUESTING RECORDS _____

Anthony Police Department

I understand that a report is submitted to the Commission each time I resign or am terminated from employment or appointment with a law enforcement agency.

I understand the report must include an explanation of the circumstances of my resignation or termination.

I understand the chief administrator of each law enforcement agency with which I apply for employment may request the contents of each report that pertains to resignation or termination due to substantiated incidents of excessive force or violations of law other than traffic offenses.

I understand the Commission is not liable for civil damages for providing information contained in a report concerning the circumstances cited above, **when a written request, on agency letterhead, from a chief administrator and this release is presented to the Commission; and**

I understand a law enforcement agency, chief administrator of a law enforcement agency or other law enforcement official is not liable for civil damages for a report made by that agency or person if the report is made in good faith.

I expressly waive my right to hold the Commission, law enforcement agency, chief administrator of a law enforcement agency, or other law enforcement official liable for civil damages for the contents of reports concerning my resignation or termination as a peace officer, reserve law enforcement officer, county jailer, or public security officer which are on file with the Commission, if the law enforcement agency, chief administrator of a law enforcement agency, or other law enforcement official made the report in good faith.

I expressly waive my right to hold the Commission, law enforcement agency, chief administrator of a law enforcement agency, or other law enforcement official liable for civil damages for any action based on information contained in my reports concerning the circumstance of my resignation or termination from prior employment or appointment with a law enforcement agency.

I have read and understand the foregoing statements. I hereby authorize the Commission to release all reports concerning my resignation or termination pertaining to circumstances cited above as a peace officer, reserve law enforcement officer, county jailer, or public security officer which are on file with the Commission to the department named above.

Signature of Licensee

Date

Sworn to and subscribed before me on
this the _____

day of _____, 20____

Notary Public in, and for, the State of
Texas

My Commission
expires: _____

Signature of Notary

A COPY OF THE FOLLOWING DOCUMENTS MUST BE SUBMITTED WITH THE APPLICATION:

• **IDENTITY AND WORK ELIGIBILITY**

1. Proof of U.S. Citizenship
2. Birth Certificate
3. State issued driver's license
4. Social Security Card

• **EDUCATION**

1. High School Diploma
2. G.E.D. test results
3. College Transcripts
4. Certificate of Peace Officer license
5. All Police Officer certificates

• **MILITARY STATUS**

1. DD Form 214 Member -4 (Armed Forces Discharge Certificate) for Veterans

• **FINANCIAL**

1. Current Credit Report
2. Bankruptcy Papers (if applicable)
3. Credit Solution Application (if applicable)