

For Staff Use Only: _____

PHS Received Date: _____

Received by: _____

GARLAND POLICE DEPARTMENT



POLICE RECRUIT APPLICANT PERSONAL HISTORY STATEMENT

Applicant's Full Name: _____

Telephone No. (Home) _____ (Cell) _____

Alternate Phone No.: _____ (Specify) _____

E-mail Address(es): _____

Driver License No.: _____ State: _____

Are you currently working as a police officer? Yes No

READ THESE INSTRUCTIONS CAREFULLY
BEFORE PROCEEDING

These instructions are provided as a guide to assist you in properly completing your Personal History Statement. It is essential that the information be accurate and complete in all respects. You are responsible for accurate and thorough completion of this document. Submission of an incomplete Personal History Statement will result in an applicant being discontinued from the application process. This information will be used as the basis for a background investigation that will determine your eligibility for employment.

1. Avoid any errors by reading the directions carefully before making any entries on the form.
2. Be sure your information is correct and in proper sequence before you begin.
3. Your Personal History Statement should be printed legibly in ink - NOT TYPED - by you and no other person. Do not write on the back of any page in this booklet.
4. Answer all questions completely and accurately. If a question is not applicable to you, enter N/A in the space provided. Do not leave any blanks. Deliberately omitting or misrepresenting facts will result in the termination of your application process.
5. If there is insufficient space on the form for you to include all information required, attach extra sheets to the Personal History Statement. Be sure to reference the relevant section and question number before continuing your answer on attached pages.
6. You are responsible for obtaining correct names, complete addresses, and telephone numbers. If you are not sure of an address, check it by personal verification.
7. Regarding employments, if an employer is no longer in business indicate that fact and provide all requested information including address where that employer was located when you worked there.
8. This form must be notarized. (Page-43) Forms that have not been notarized will not be processed.
9. Do not use military date format when completing this document. This is a civilian document.

WARNING:

THIS DOCUMENT IS A GOVERNMENTAL RECORD AND WHEN NOTARIZED IS YOUR SWORN STATEMENT. KNOWINGLY MAKING A FALSE STATEMENT IN A GOVERNMENTAL RECORD IS A CRIMINAL OFFENSE.

I, the undersigned, have read and understand all of the above instructions and the warning. I understand that any falsifications in this Personal History Statement will result in my application being terminated, as any such act would constitute a criminal act.

Applicant's Signature

Date

FOR THE BACKGROUND INVESTIGATION, YOU MUST PROVIDE THE BELOW LISTED SUPPORTING DOCUMENTS. ALL REQUESTED DOCUMENTS APPLICABLE TO YOU ARE REQUIRED. IT MAY TAKE YOU LONGER TO OBTAIN SOME DOCUMENTS, BUT IF POSSIBLE, PLEASE BRING OFFICIAL HIGH SCHOOL AND COLLEGE TRANSCRIPTS ALONG WITH THIS COMPLETED AND NOTARIZED PACKET TO THE TEST SITE. SUPPORTING DOCUMENTS THAT YOU ARE UNABLE TO OBTAIN PRIOR TO TESTING MAY BE SUBMITTED AT A LATER DATE, HOWEVER, LATE SUBMISSIONS WILL SLOW DOWN YOUR BACKGROUND PROCESS.

Failure to comply with all instructions may result in your discontinuance from our hiring process.

Required Documents (Transcripts are not returned.)

1. Official High School Transcript(s). (**Original document required**)
2. Official College Transcript(s). Provide transcript from all college institution(s) you attended. (Transcripts are required from all colleges you have been enrolled or attended regardless of if any courses were completed or passed.) (**Original document required**)

Check here if any school has advised you they are mailing certified copy directly to this agency. List that institution(s) here: _____.

Only **COPIES** needed for items 3-16 below to complete this packet. Original documents will be inspected at a later time.

3. G.E.D. Certificate. (Provide transcripts from any High Schools attended prior to completing your G.E.D.)
4. Birth Certificate.
5. Naturalization Papers.
6. Marriage License(s).
7. Divorce Decree(s).
8. Military DD214 discharge papers (DD-214 **MEMBER-4** copy required).
9. EXPERIAN' credit report dated within 30-days of the Personal History Statement signature date. For Internet acquisition, go to www.annualcreditreport.com - follow the instructions and select Experian'. An Experian' report can also be obtained by contacting: **Experian**' NCAC, PO Box 9595, Allen, TX 75013 (1-888-397-3742)}. **Credit reports from other institutions are not accepted by this agency.**
10. Driver's License
11. Social Security Card
12. Military ID Card
13. Liability Insurance card or copy of policy that documents you as a covered driver.
14. ANY OTHER DOCUMENT relating to significant incidents in your life including but not limited to- bankruptcies, lawsuits, military discipline, commendation letters, employer letters of reprimand, arrests reports, etc.
15. Passport
16. Any licenses or certifications you claim, and any additional documents requested by the Background Investigator.

PLEASE PLACE THE NOTARIZED PHS AND SUPPORTING DOCUMENTS IN A LETTER SIZED MANILA CLASPED ENVELOPE. WRITE YOUR LAST NAME, FIRST NAME ON THE UPPER RIGHT HAND CORNER AND BRING ON THE DAY OF TESTING. UPON SUCCESSFUL COMPLETION OF THE CIVIL SERVICE EXAM AND THE AGILITY TEST, THIS PACKET WILL BE COLLECTED BY THE ACADEMY STAFF FOR FURTHER PROCESSING.

IF MAILING SUPPORTING DOCUMENTS, PLEASE SEND TO

**GARLAND POLICE DEPARTMENT
ATTN: TRAINING DIVISION
1891 FOREST LANE
GARLAND, TX 75042**

PERSONAL HISTORY STATEMENT DISCLOSURES ARE VERIFIED BY POLYGRAPH

Any questions concerning the Personal History Statement; please call:

<i>Police Academy</i>	<i>Officer S. May</i>	<i>(972) 487-7360</i>
<i>Police Academy</i>	<i>Officer A. Hunter</i>	<i>(972) 205-2033</i>
<i>Police Academy</i>	<i>Officer R. Jones</i>	<i>(972) 487-7358</i>
<i>Background Investigations</i>	<i>Officer D. Morrow</i>	<i>(972) 205-1614</i>
<i>Background Investigations</i>	<i>Officer N. Kubiak</i>	<i>(972) 205-1644</i>
<i>Background Investigations</i>	<i>Officer T. Castro</i>	<i>(972) 205-2076</i>
<i>Personnel Technician:</i>	<i>Jane Carnes</i>	<i>(972) 205-2086</i>

SHIFT WORK REQUIREMENT NOTICE

The Garland Police Department is 24-hour, 365 day per year service provider with many positions requiring around the clock staffing including weekends and holidays.

All Police Officers and other positions as determined by the Chief of Police are subject to shift work assuring uninterrupted service. Applicant's for those positions must but be available and remain available to work any shift assigned. Specific shifts are not guaranteed. Employees work shifts as assigned and subject to change.

Positions may include mandatory overtime as required to assure minimum staffing or increased response to emergencies and other events.

Any assigned shift or regular days off may be overridden at any time by the Chief of Police or at his designee's direction in order to maintain public service and safety.

Your signature indicates you as an applicant understand shift work requirements for the position you have applied, and can work as directed.

Signature: _____

Date: _____

Are there any duties or requirements for the position you have applied that you know at this time that you will be unable to complete if extended an offer of employment? Yes No

Have you been deceptive in your application process to obtain the position for which you have applied? Yes No

Submit supplemental pages along with this document as needed to continue your response at any place you find allotted space does not support you providing a full, detailed, and factual response addressing all information requested. Clearly identify on any attached page the location of the original question you are continuing your response from. Do not remove the staple from this document.

(ATTACH EXTRA PAGES IF NECESSARY)

3. List any and all persons with whom you have ever shared a residence (even temporarily), **except members of your immediate family (parents, siblings, spouses, children, etc.):**

Full Name	Relationship	Current Daytime Phone#	Address (es) Shared LIST ALL LOCATIONS
ATTACH	EXTRA	PAGES	IF NECESSARY.

C. EMPLOYMENT HISTORY - Beginning with your present or most recent job

list **all** employment since the age of 15 starting on page-17. Include all part-time, temporary, or seasonal employment regardless of how long you actually worked. Also list all reserve duty, volunteer work and internships, identifying them as such. **Note any periods of unemployment stating what you were doing along with your means of support during this time.** Even if you have only a few jobs to list, **YOU MUST CHECK THE APPROPRIATE BOX AT THE TOP OF PAGE 37. Attach extra pages if necessary. (ON ATTACHED PAGES, YOU MUST INCLUDE ALL INFORMATION REQUESTED.)**

Will contacting your current employer threaten your job security? YES NO

(Note: This agency verifies **all** employments past and present as part of your background process if you continue in this process.)

(THIS AREA INTENTIONALLY BLANK)

1. Employment began: _____ Ended: _____
DATE HOURLY PAY DATE HOURLY PAY

Employer: _____

Address: _____

Phone number: _____ Supervisor: _____

Supervisor's phone: _____ Co-worker: _____

full-time part-time temporary seasonal other: _____

Job title(s): _____

Duties: _____

Nature of separation: Resigned (with notice) Quit (without notice) Fired
 Laid Off Temporary (term ended)

Reason for separation: _____

If resigned or quit, how much notice was given? _____

Was the amount of notice given in agreement with company policy? YES NO

If resigned/quit, was it an alternative to termination or other disciplinary action? YES NO

If so, explain: _____

Did you ever receive any disciplinary action on this job? (Counseling, memo, reprimand, etc.)
 YES NO

If you answered yes, list the TYPE OF DISCIPLINE, DATE, and FULLY EXPLAIN ALL INSTANCES
IN DETAIL:

2. Employment began: _____ Ended: _____
DATE HOURLY PAY DATE HOURLY PAY

Employer: _____

Address: _____

Phone number: _____ Supervisor: _____

Supervisor's phone: _____ Co-worker: _____

full-time part-time temporary seasonal other: _____

Job title(s): _____

Duties: _____

Nature of separation: Resigned (with notice) Quit (without notice) Fired
 Laid Off Temporary (term ended)

Reason for separation: _____

If resigned or quit, how much notice was given? _____

Was the amount of notice given in agreement with company policy? YES NO

If resigned/quit, was it an alternative to termination or other disciplinary action? YES NO

If so, explain: _____

Did you ever receive any disciplinary action on this job? (Counseling, memo, reprimand, etc.)
 YES NO

If you answered yes, list the TYPE OF DISCIPLINE, DATE, and FULLY EXPLAIN ALL INSTANCES
IN DETAIL:

3. Employment began: _____ Ended: _____
DATE HOURLY PAY DATE HOURLY PAY

Employer: _____

Address: _____

Phone number: _____ Supervisor: _____

Supervisor's phone: _____ Co-worker: _____

full-time part-time temporary seasonal other: _____

Job title(s): _____

Duties: _____

Nature of separation: Resigned (with notice) Quit (without notice) Fired
 Laid Off Temporary (term ended)

Reason for separation: _____

If resigned or quit, how much notice was given? _____

Was the amount of notice given in agreement with company policy? YES NO

If resigned/quit, was it an alternative to termination or other disciplinary action? YES NO

If so, explain: _____

Did you ever receive any disciplinary action on this job? (Counseling, memo, reprimand, etc.)
 YES NO

If you answered yes, list the TYPE OF DISCIPLINE, DATE, and FULLY EXPLAIN ALL INSTANCES IN DETAIL:

4. Employment began: _____ Ended: _____
DATE HOURLY PAY DATE HOURLY PAY

Employer: _____

Address: _____

Phone number: _____ Supervisor: _____

Supervisor's phone: _____ Co-worker: _____

full-time part-time temporary seasonal other: _____

Job title(s): _____

Duties: _____

Nature of separation: Resigned (with notice) Quit (without notice) Fired
 Laid Off Temporary (term ended)

Reason for separation: _____

If resigned or quit, how much notice was given? _____

Was the amount of notice given in agreement with company policy? YES NO

If resigned/quit, was it an alternative to termination or other disciplinary action? YES NO

If so, explain: _____

Did you ever receive any disciplinary action on this job? (Counseling, memo, reprimand, etc.)

YES NO

If you answered yes, list the TYPE OF DISCIPLINE, DATE, and FULLY EXPLAIN ALL INSTANCES IN DETAIL:

5. Employment began: _____ Ended: _____
DATE HOURLY PAY DATE HOURLY PAY

Employer: _____

Address: _____

Phone number: _____ Supervisor: _____

Supervisor's phone: _____ Co-worker: _____

full-time part-time temporary seasonal other: _____

Job title(s): _____

Duties: _____

Nature of separation: Resigned (with notice) Quit (without notice) Fired
 Laid Off Temporary (term ended)

Reason for separation: _____

If resigned or quit, how much notice was given? _____

Was the amount of notice given in agreement with company policy? YES NO

If resigned/quit, was it an alternative to termination or other disciplinary action? YES NO

If so, explain: _____

Did you ever receive any disciplinary action on this job? (Counseling, memo, reprimand, etc.)

YES NO

If you answered yes, list the TYPE OF DISCIPLINE, DATE, and FULLY EXPLAIN ALL INSTANCES IN DETAIL:

6. Employment began: _____ Ended: _____
DATE HOURLY PAY DATE HOURLY PAY

Employer: _____

Address: _____

Phone number: _____ Supervisor: _____

Supervisor's phone: _____ Co-worker: _____

full-time part-time temporary seasonal other: _____

Job title(s): _____

Duties: _____

Nature of separation: Resigned (with notice) Quit (without notice) Fired
 Laid Off Temporary (term ended)

Reason for separation: _____

If resigned or quit, how much notice was given? _____

Was the amount of notice given in agreement with company policy? YES NO

If resigned/quit, was it an alternative to termination or other disciplinary action? YES NO

If so, explain: _____

Did you ever receive any disciplinary action on this job? (Counseling, memo, reprimand, etc.)
 YES NO

If you answered yes, list the TYPE OF DISCIPLINE, DATE, and FULLY EXPLAIN ALL INSTANCES IN DETAIL:

7. Employment began: _____ Ended: _____
DATE HOURLY PAY DATE HOURLY PAY

Employer: _____

Address: _____

Phone number: _____ Supervisor: _____

Supervisor's phone: _____ Co-worker: _____

full-time part-time temporary seasonal other: _____

Job title(s): _____

Duties: _____

Nature of separation: Resigned (with notice) Quit (without notice) Fired
 Laid Off Temporary (term ended)

Reason for separation: _____

If resigned or quit, how much notice was given? _____

Was the amount of notice given in agreement with company policy? YES NO

If resigned/quit, was it an alternative to termination or other disciplinary action? YES NO

If so, explain: _____

Did you ever receive any disciplinary action on this job? (Counseling, memo, reprimand, etc.)

YES NO

If you answered yes, list the TYPE OF DISCIPLINE, DATE, and FULLY EXPLAIN ALL INSTANCES IN DETAIL:

8. Employment began: _____ Ended: _____
DATE HOURLY PAY DATE HOURLY PAY

Employer: _____

Address: _____

Phone number: _____ Supervisor: _____

Supervisor's phone: _____ Co-worker: _____

full-time part-time temporary seasonal other: _____

Job title(s): _____

Duties: _____

Nature of separation: Resigned (with notice) Quit (without notice) Fired
 Laid Off Temporary (term ended)

Reason for separation: _____

If resigned or quit, how much notice was given? _____

Was the amount of notice given in agreement with company policy? YES NO

If resigned/quit, was it an alternative to termination or other disciplinary action? YES NO

If so, explain: _____

Did you ever receive any disciplinary action on this job? (Counseling, memo, reprimand, etc.)

YES NO

If you answered yes, list the TYPE OF DISCIPLINE, DATE, and FULLY EXPLAIN ALL INSTANCES IN DETAIL:

9. Employment began: _____ Ended: _____
DATE HOURLY PAY DATE HOURLY PAY

Employer: _____

Address: _____

Phone number: _____ Supervisor: _____

Supervisor's phone: _____ Co-worker: _____

full-time part-time temporary seasonal other: _____

Job title(s): _____

Duties: _____

Nature of separation: Resigned (with notice) Quit (without notice) Fired
 Laid Off Temporary (term ended)

Reason for separation: _____

If resigned or quit, how much notice was given? _____

Was the amount of notice given in agreement with company policy? YES NO

If resigned/quit, was it an alternative to termination or other disciplinary action? YES NO

If so, explain: _____

Did you ever receive any disciplinary action on this job? (Counseling, memo, reprimand, etc.)
 YES NO

If you answered yes, list the TYPE OF DISCIPLINE, DATE, and FULLY EXPLAIN ALL INSTANCES IN DETAIL:

10. Employment began: _____ Ended: _____
DATE HOURLY PAY DATE HOURLY PAY

Employer: _____

Address: _____

Phone number: _____ Supervisor: _____

Supervisor's phone: _____ Co-worker: _____

full-time part-time temporary seasonal other: _____

Job title(s): _____

Duties: _____

Nature of separation: Resigned (with notice) Quit (without notice) Fired
 Laid Off Temporary (term ended)

Reason for separation: _____

If resigned or quit, how much notice was given? _____

Was the amount of notice given in agreement with company policy? YES NO

If resigned/quit, was it an alternative to termination or other disciplinary action? YES NO

If so, explain: _____

Did you ever receive any disciplinary action on this job? (Counseling, memo, reprimand, etc.)

YES NO

If you answered yes, list the TYPE OF DISCIPLINE, DATE, and FULLY EXPLAIN ALL INSTANCES IN DETAIL:

EMPLOYMENT HISTORY CONTINUED

Check the appropriate box:

I have read and complied with the instructions of Section C: Employment History. I needed additional space, and have attached extra pages to comply with the instructions of Section C: Employment History.

Have you ever claimed to be injured or disabled when you were not? Yes No

Have you ever filed a complaint against an employer? Yes No

Have you ever borrowed any money from any business owner and failed to pay it back? Yes No

Have you ever called in sick when you were not sick? Yes No Number of times _____
What did you do on those days? _____

Have you ever filed a lawsuit against an employer either past or present? Yes No

Have you ever damaged an employer's property for revenge? Yes No

Have you ever attempted in any way to get revenge against a past or present employer? Yes No

Have you ever failed to report to work without contacting your employer? Yes No How many times?
_____ Please explain: _____

Have you caused problems, or asked someone to cause problems, as a customer of a business? Yes No

Have you ever walked off a job because you were angry? Yes No

Have you ever walked off a job because of pressure? Yes No

Have you ever quit a job without two weeks of notice? Yes No

Have you ever quit a job knowing you would be fired if you did not quit? Yes No

Have you ever been reprimanded for reporting late to work? Yes No

How many times _____

If you are late, on an average how many minutes? _____

Please explain: _____

Have you ever taken any money, merchandise, materials, uniforms or tools from where you work or have worked without direct permission? Yes No

PLACE(S) _____

DATES(S) _____

ITEM(S) _____

VALUE OF EACH _____

Do you still have the items listed above? Yes No Not Applicable

Have you ever taken part in a theft with another employee? Yes No

Have you ever had personal knowledge that another employee was stealing or being dishonest and not acted upon it? Yes No

Have you ever witnessed an employee steal, take or destroy anything from work? Yes No

Have you ever submitted a falsified expense report? Yes No

Have you ever charged any item or material to a business charge account that was not business related? Yes No

Have you ever submitted an untruthful statement in order to obtain unemployment benefits? Yes No

Have you ever been denied unemployment benefits? Yes No

Have you ever claimed that you worked more hours than you actually worked? Yes No

Have you ever knowingly violated a company policy? Yes No

Have you ever had confrontations or conflict with co-workers? Yes No

Have you ever had confrontations or conflict with employers? Yes No

Have you ever claimed to be working when you were not at the job or doing what you were being paid to do? Yes No

Have you ever consumed alcoholic beverages at work? Yes No

Have you ever consumed any form of an illegal substance at work? Yes No

Have you ever reported to work while under the influence of alcohol or controlled substance? Yes No

Have you ever committed an undetected act while working, which if detected would result in disciplinary action? Yes No

Have you ever slept while at work? Yes No

If "Yes" how many times: _____ Reason:

(THIS AREA INTENTIONALLY LEFT BLANK)

D. MILITARY HISTORY

- 1. Have you ever registered with the Selective Service System? YES NO
- 2. Have you ever applied to serve in any branch of the armed forces? YES NO
- 3. Have you ever served in the armed forces? YES NO

If your answer is "YES" to questions 2 and 3, complete the following questions in section D. If you served multiple enlistments or in different branches, **PHOTOCOPY this page and complete it for each branch:**

4. Enlistment date: _____ Discharge date: _____

Monthly salary at enlistment: _____ Monthly salary at discharge: _____

Unit Designation
Branch of Service: _____ @ time of discharge: _____

Highest rank held: _____ Nature of discharge: _____

If you **originally** received a discharge that was **other than Honorable**, give complete details:

_____ (ATTACH EXTRA PAGES IF NECESSARY)

5. Did you ever receive any of the following, regardless of the final disposition?

- | | | |
|--------------------------|--------------------------|--|
| YES | NO | |
| <input type="checkbox"/> | <input type="checkbox"/> | Article 15 |
| <input type="checkbox"/> | <input type="checkbox"/> | Court-martial |
| <input type="checkbox"/> | <input type="checkbox"/> | Captain's masts |
| <input type="checkbox"/> | <input type="checkbox"/> | Company punishment |
| <input type="checkbox"/> | <input type="checkbox"/> | Letter of Reprimand/Page 11/other written reprimands |
| <input type="checkbox"/> | <input type="checkbox"/> | Reduction in rank or any other disciplinary action not listed here |

If you answered, "YES" to any of the above, give complete details (including date, charge, circumstances, etc.) for EVERY DISCIPLINARY INCIDENT: _____

_____ (ATTACH EXTRA PAGES IF NECESSARY)

6. Do any of these circumstances apply to your military service?

- | | | |
|--------------------------|--------------------------|---|
| YES | NO | |
| <input type="checkbox"/> | <input type="checkbox"/> | Rejected from any branch of the military? |
| <input type="checkbox"/> | <input type="checkbox"/> | Subject of any military investigation? |
| <input type="checkbox"/> | <input type="checkbox"/> | While in the military, were you ever AWOL or on unauthorized absence? |
| <input type="checkbox"/> | <input type="checkbox"/> | Ever confined to the brig or guardhouse? |
| <input type="checkbox"/> | <input type="checkbox"/> | Ever had an accident while in the military whether reported or not? |
| <input type="checkbox"/> | <input type="checkbox"/> | Were you discharged prior to the end of your tour of duty? |
| <input type="checkbox"/> | <input type="checkbox"/> | Could you have re-enlisted if you wanted to? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you ever been refused a security clearance by the government? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you ever violated a government security clearance? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you ever sold or attempted to sell government information? |

If you answered, "YES" to any of the above, give complete details (including date, charge, circumstances, etc.) for EVERY DISCIPLINARY INCIDENT: _____

(ATTACH EXTRA PAGES IF NECESSARY)

MILITARY HISTORY CONTINUED

Check the appropriate box:

- I did not receive any disciplinary action in the military.
- I have listed all disciplinary action I received in the military.
- I have listed my entire military history, including all reserve duties.
- I have served in more than one branch of the military, and have continued to list the remainder of my military history on an attached page. *(I have included ALL information requested above for each branch of service.)*

7. List **all** assignment locations/dates (include overseas assignments): _____

(ATTACH EXTRA PAGES IF NECESSARY)

8. Did you ever sell anything belonging to the military on the black market? YES NO

If "Yes" list all items and describe: _____

9. Are you currently a member of a U.S. Reserve, National or State Guard Organization? NO YES

Branch of Service: _____ Unit/Location: _____

Circle your status: Active Inactive Standby

Reserve obligation end date: _____

(THIS AREA INTENTIONALLY LEFT BLANK)

E. EDUCATIONAL HISTORY - List all high schools, colleges, trade or technical schools you have enrolled in / attended, even if you did not complete course work or pass.

1. Did you graduate from a state-accredited high school? YES NO

High School(s)	Attended From (date)	To (date)	Credit Hours, Diploma, Degrees or Certificates earned
Name:			
Address:			
Name:			
Address:			
Colleges / Universities			
Name:			
Address:			
Name:			
Address:			
Name:			
Address:			
Trade/Vocational/Business Schools/CE			

EDUCATIONAL HISTORY CONTINUED

CHECK THE APPROPRIATE BOX:

I HAVE LISTED ALL EDUCATIONAL INSTITUTIONS WHERE I HAVE ENROLLED. I NEEDED MORE SPACE, SO I LISTED ON AN ATTACHED PAGE ALL EDUCATIONAL INSTITUTIONS WHERE I HAVE ENROLLED.

3. Have you ever been expelled or suspended from any school? YES NO
If so, provide the date(s), school(s) and reason(s) for **EVERY** incident of suspension or expulsion:

_____ (ATTACH EXTRA PAGES IF NECESSARY)

4. Have you ever been placed on academic/scholastic probation? YES NO If so, give the date(s), school(s) and reason(s) for **EVERY** instance:

_____ (ATTACH EXTRA PAGES IF NECESSARY)

5. Indicate the highest degree you have earned (if you have multiple degrees at the same level, specify):

High School Associate's Bachelor's Master's Doctorate

6. Indicate the total amount of college credit hours you have earned: _____

7. List all school activities in which you participated. Include any positions of leadership, awards, and any other recognition you received related to school activities.

School	Activity	Date(s)	Award/Leadership Role

F. SPECIAL QUALIFICATIONS

1. List any special licenses/certifications you hold (radio operator, peace officer, scuba, concealed handgun, EMT, etc.) Indicate date of issue and expiration for each license/certification.

2. Are you fluent in a **foreign** language? YES NO
3. If so, indicate in each area your degree of fluency (Excellent, Good, Fair, or Poor)

<u>Language</u>	<u>Oral</u>	<u>Understanding</u>	<u>Writing</u>	<u>Reading</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

G. MEMBERSHIP IN ORGANIZATIONS, COMMUNITY ACTIVITIES

List your involvement in any organizations, past or present (social, fraternal, professional, charitable); gangs or with any organization espousing bias or prejudice against a group identified by race, color, disability, religion, national origin or ancestry, age, gender or sexual preference, etc. You are not obligated to list religious or political organizations, but you may list them voluntarily.

Name and Address of Organization	Type of Organization	Dates of Membership

1. Are you now, or have you ever been, a member of an organization that supports or advocates the control, or overthrow of, the government of the United States or the government of the State of Texas, by force, violence or other unconstitutional means? YES NO
2. Have you been requested or encouraged to apply for this position by any foreign national, foreign government, or, foreign governmental official or agent? YES NO
3. Have you ever been a member of, or made a contribution to, an organization dedicated to terrorism, and which engaged in illegal activities to that end, either with an awareness of the organization’s dedication to that end or with the specific intent to further such unlawful activities? YES NO
4. Have you ever been a member of, or participated in any militia or paramilitary group (not including official state government militias)? YES NO

(THIS AREA INTENTIONALLY LEFT BLANK)

H. INCIDENTS OF DETENTION/ARREST, CRIMINAL ACTS & LITIGATION

*******READ THESE DEFINITIONS THOROUGHLY!**

"Law enforcement agency" includes not only municipal police departments, state police, and sheriff's departments, but also transit police, college campus security/police, airport security/police, hospital security/police, Coast Guard, constable officers, local or national police in any foreign country, military police and any other local, state, or federal entity whose purpose is to enforce the law and investigate violations.

*A person is "detained" or "arrested" when his liberty is suspended for any amount of time, such as being "held for questioning." The Texas Code of Criminal procedure states a person has been arrested "when he has been actually placed under restraint or taken into custody by an officer or other person executing a warrant of arrest, or by an officer or person arresting without a warrant." **The following circumstances DO NOT DISQUALIFY an incident as an actual arrest:** the person being arrested was not handcuffed; the person was allowed to be escorted to the jail facility rather than being taken in a squad car; the person was not physically placed in a cell; or was a minor and was simply released to his parents; or the person was released with no formal charges filed.*

A "conviction" not only includes being actually tried and found guilty in a court of law, but also includes pleading guilty or no contest to receive deferred adjudication, or non-adjudicated probation, or any other such disposition, which required probation or payment of fines, even if the charges were eventually dropped or expunged.

Answer the following questions related to your criminal history, regardless of the final disposition (i.e., formal charges were never filed, charges were dropped, adjudicated probation was completed, record was expunged, conviction was successfully appealed, etc.).

1. Have you ever been investigated, detained or questioned by any law enforcement agency? YES NO
2. Have you ever been summoned into court for any offense (or court-martialed)? YES NO
3. Have you ever been charged with an offense other than traffic citation? YES NO
4. Have you ever had a warrant for your arrest? YES NO
5. Have you ever been arrested, even as a juvenile? YES NO
6. Have you ever been convicted of, or plead guilty/no contest to a misdemeanor other than a traffic citation? YES NO
7. Have you ever been convicted of, or plead guilty/no contest to a felony? YES NO
8. Have you ever been intoxicated in a public place? YES NO
9. Have you ever assaulted another person? YES NO

If you answered YES to any of the above questions in this section (H), complete the following attaching extra pages if necessary: **(List traffic Citation history on page-65. Include traffic ARRESTS on this page.)**

Charge	Date	Law Enforcement Agency	Disposition (fine, probation, jail time etc.)	Disposition Date

CHECK THE APPROPRIATE BOX:

- I HAVE NEVER BEEN DETAINED, QUESTIONED, ARRESTED, OR CHARGED WITH ANY CRIMINAL OFFENSE.
- I HAVE BEEN DETAINED, QUESTIONED, ARRESTED, OR CHARGED WITH A CRIMINAL OFFENSE, AND I HAVE LISTED EVERY INCIDENT AND ALL CHARGES ABOVE. I HAVE NOT BEEN DETAINED,

QUESTIONED, ARRESTED, OR CHARGED WITH ANY OTHER CRIMINAL OFFENSES OR ON ANY OTHER OCCASION THAN WHAT I HAVE LISTED ABOVE.

H. INCIDENTS OF DETENTION/ARREST, CRIMINAL ACTS & LITIGATION
(Continued)

Have you **ever** committed or been a party to any act(s) that could be considered a criminal act? (Including, but not limited to: criminal mischief, hit-and-run, DWI, public intoxication, assault, theft [even shoplifting, giving/receiving illegal discounts], receiving stolen property, issuance of bad check/ theft by check, failure to identify/using a fake or altered ID, obstruction, fleeing/resisting/evading arrest, purchase/possession/distribution of illegal drugs, burglary, criminal trespass, unlawfully carrying a weapon, insurance fraud, income tax evasion, fraud, forgery, child abuse/neglect/endangerment, criminal nonsupport, harassment, failure to appear or answer court summons, contempt, etc.” YES NO If you answered “yes,” give dates and details of **EVERY INCIDENT:**

(ATTACH EXTRA PAGES IF NECESSARY)

All of these questions require a “Yes” or “No” answer.

Have you ever committed any of the following acts?

- YES NO Indecent exposure.
- YES NO Public lewdness (sexual act in public place).
- YES NO Urinating in public.
- YES NO Any sexual act on the job.
- YES NO Sexual assault.
- YES NO Sexually explicit “prank” phone calls.
- YES NO Sexual contact with a sleeping, drugged, unconscious or incapacitated person.
- YES NO Sexual contact with a child or minor (person under the age of 17).
- YES NO Sexual act with a person that had a mental or physical handicap.
- YES NO Solicitation of a prostitute.
- YES NO Prostitution.
- YES NO Window peeping.
- YES NO Have you ever sexually fondled, or been accused of sexually fondling a child or minor.
- YES NO Have you ever exposed your genitals to another person in a public place.
- YES NO Have you ever been a participant in any sexual act with an animal.
- YES NO Have you ever forced anyone to have sexual intercourse with you against their will.
- YES NO Have you ever forced anyone to commit a sexual act.
- YES NO Have you ever engaged in a sexual act for money.
- YES NO Have you ever been present when there were people involved in a criminal sexual act.
- YES NO Have you ever been intoxicated in a public place.
- YES NO Have you been involved with or associated with any street gang.
- YES NO Have you ever been detained by the police for anything other than as a witness or on a traffic stop?
- YES NO Have you ever been questioned, detained, interrogated, indicted, arrested or charged with a crime by a law enforcement agency?
- YES NO Have you ever been convicted, placed on probation or given deferred adjudication for any Arrest(s)?
- YES NO Have you ever run from or attempted to elude a police officer either on foot or in a vehicle?

- YES NO Have you ever illegally entered onto or into the property, house, building or a vehicle of another when you did not have permission to do so?
- YES NO As an adult, have you ever assaulted (struck, pushed, or hit) anyone, including a family member, roommate or partner?
- YES NO Have you ever requested, suggested or received money or anything of value from a person for your protection or for not harassing or hurting them?
- YES NO Have you ever testified before a grand jury?
- YES NO Have you ever illegally sold or attempted to sell government information or secrets?
- YES NO Have you ever taken anything from a store without paying regardless of your age?
- YES NO Have you ever changed or altered the price tags on any merchandise?
- YES NO Have you ever used a credit card without the owner's permission?
- YES NO Have you ever converted government property to your own use or sold it?
- YES NO Have you ever taken a "joy ride" in a stolen vehicle?
- YES NO Have you ever entered a vehicle (not your own) and taken anything out of it?
- YES NO Have you ever used a vehicle without the permission of the owner?
- YES NO Have you ever been present when someone committed a crime?
- YES NO Have you ever committed any Criminal Mischief offenses?
- YES NO Have you ever entered a house or a building with the intent of hurting someone or stealing any property?
- YES NO Have you ever suggested to anyone that you might be able to protect them from harm if they paid you?
- YES NO Have you ever received any money or item of value from a person as a gift to thank you for your protection?
- YES NO Have you ever worked as a bodyguard?
- YES NO Have you ever forged any checks or prescriptions?
- YES NO Have you ever been married to more than one person at the same time?
- YES NO Have you ever taken part in an act of civil disobedience?
- YES NO Have you ever committed any criminal act that went undetected by any law enforcement entity?
- YES NO Have you ever made money from placing a bet with a bookmaker?
- YES NO Have you ever illegally gained access to a computer that you were not authorized to enter?
- YES NO Without the permission of the owner, have you ever used the password of another person to gain access to a secure computer, web site or other electronic device?
- YES NO Have you ever set any item, regardless of value or ownership, on fire; for personal reasons, profit, revenge, self-gratification, pleasure or fun?
- YES NO Do you have any personal contacts, family or friends that are involved in any criminal activities now?
- YES NO Have you ever or are you currently friends with anyone that is a felon?
- YES NO Have you ever lived with a felon?
- YES NO Have you ever bought anything that you suspected was stolen?
- YES NO Do you currently possess any property that you believe may have been stolen?
- YES NO Have you ever participated in any money laundering operations?
- YES NO Have you ever worked for any illegal bookmaking organization?
- YES NO Have you ever been a paid or unpaid police informant?

Have you ever been involved in any way in any of the following- WHETHER ARRESTED OR NOT? (Circle the appropriate response)

- | | | | | | |
|-----|----|--------------------|-----|----|--------------------------|
| YES | NO | Murder | YES | NO | Kidnapping |
| YES | NO | False Imprisonment | YES | NO | Fighting in public |
| YES | NO | Injury to a child | YES | NO | Injury to the elderly |
| YES | NO | Terroristic Threat | YES | NO | Violate protective order |

YES	NO	Criminal Non-support	YES	NO	Criminal Mischief
YES	NO	Robbery	YES	NO	Burglary
YES	NO	Unauthorized use of a vehicle	YES	NO	Theft
YES	NO	Forgery	YES	NO	Theft of a motor vehicle
YES	NO	Disorderly conduct	YES	NO	Perjury
YES	NO	Riot	YES	NO	Harassment
YES	NO	Public Intoxication	YES	NO	Violated a person's civil rights
YES	NO	Abuse of a Corpse	YES	NO	Cruelty to Animals
YES	NO	Theft of Utilities	YES	NO	Organized criminal activity
YES	NO	Intoxicated Assault	YES	NO	Keeping a gambling place
YES	NO	Credit Card Abuse	YES	NO	Unlawful Carry Weapon

1. Are you now or have you ever been a member of a street gang, attended a gang activity or gathering?
YES NO

2. If you answered YES to any of the above questions, give dates and details of **EVERY INCIDENT**:

_____ (ATTACH
EXTRA PAGES IF NECESSARY)

3. Have you ever been involved in any kind of civil litigation/lawsuit? YES NO

4. Have you ever filed a lawsuit? YES NO Have you ever been sued? YES NO

5. If you answered YES to any of the above, give dates and details of **EVERY INCIDENT**:

_____ (ATTACH
EXTRA PAGES IF NECESSARY) (Copy of court cases including final judgment must be provided per instruction regarding "supporting documents".)

6. Have been finger printed for any reason? YES NO
 If YES, list date, agency, and reason: _____

7. Have you ever viewed, purchased, possessed, manufactured, or distributed child pornography?
YES NO

8. Have you ever owned, operated or participated in the operation of a "WEB SITE" that depicted child pornography, nudity and/or sexual acts of children/minors? YES NO

9. Have you ever purchased, sold or furnished any alcoholic beverages to a person that you knew to be under 21 years of age? YES NO

If you answered YES to any of the above, give dates and details of **EVERY INCIDENT**:

 _____(ATTACH
EXTRA PAGES IF NECESSARY)

In answering the following questions, you are advised that an offense is a “misdemeanor crime of domestic violence” for purposes of this section when the offense:

(a) is a misdemeanor under Federal or State law; and (b) has, as an element, the use or attempted use of physical force, or the threatened use of a deadly weapon, committed by (1) a current or former spouse, parent, or guardian of the victim, (2) a person with whom the victim shares a child in common, (3) a person who is cohabiting with or has cohabited with the victim as a spouse, parent, or guardian, or (4) a person similarly situated to a spouse, parent, or guardian of the victim.

A. Have you ever been convicted of a “misdemeanor crime of domestic violence” within the meaning of the definition set forth above, in Texas or otherwise? YES NO

B. If you answered, “YES” to question A, provide all information below for EVERY conviction:

(If this information is a duplication of what you listed in the beginning of this section list it again.)

Date of conviction:	
Offense / Charge:	
City, County, and State of conviction:	
Court where received:	
Case number:	
Sentence imposed:	
Is conviction currently on appeal?	<input type="checkbox"/> YES <input type="checkbox"/> NO

Date of conviction:	
Offense / Charge:	
City, County, and State of conviction:	
Court where received:	
Case number:	
Sentence imposed:	
Is conviction currently on appeal?	<input type="checkbox"/> YES <input type="checkbox"/> NO

Date of conviction:	
Offense / Charge:	
City, County, and State of conviction:	
Court where received:	

Case number:	
Sentence imposed:	
Is conviction currently on appeal?	<input type="checkbox"/> YES <input type="checkbox"/> NO

I HAVE NEVER BEEN CONVICTED OF A CRIME OF DOMESTIC VIOLENCE. I HAVE BEEN CONVICTED OF A CRIME OF DOMESTIC VIOLENCE, AND HAVE ACCURATELY LISTED ALL SUCH INCIDENTS AND DETAILS AS REQUESTED.

H. CRIMINAL ACTS- ILLICIT DRUG USE

Possessing/using an illegal drug is not a social activity or experiment; it is a law violation and therefore a part of your history of criminal activity, which you must disclose.

- Drug use means all terms used to describe the ingestion or intended ingestion of any illegal/controlled substance into your system in any manner, no matter how small the amount, regardless of the effects and including another person’s prescription drug (**EXCLUDING PRESCRIPTION DRUGS LEGALLY ISSUED TO YOU, TAKEN IN THE PRESCRIBED MANNER**).
- Illegal drug use includes (**but is not limited to**) the following:

Marijuana	Crack	Cocaine	Heroin	LSD
Hashish	Speed	Amphetamines	Methamphetamines	Psilocybin
Mushrooms	Designer Drugs	Steroids	Ritalin	Tranquilizers
Pain Relievers	Muscle Relaxers	Barbiturates	Sleeping Pills	Stimulants
Codeine	Quaaludes	Ecstasy (X)	GHB	
Morphine				

INHALANTS:
AEROSOL PAINTS, NITROUS OXIDE, GLUES, ISOBUTYL NITRITE “POPPERS”, RUSH LOCKERROOM, MARKERS, SYNTHETIC STIMULANTS, OR ANY GASES INGESTED FOR THE PURPOSES OF GETTING HIGH

Have you ever used any substance listed above, **or any illegal substance not listed?** YES NO

Describe in your own words the frequency, extent, and amount of any illegal substances you have ever used, **regardless of whether you felt any effects from the substance, or you were/are uncertain of the true composition of the substance.**

Drug used	Number of times	Date last used	How obtained?

(ATTACH EXTRA PAGES IF NECESSARY)

CHECK THE APPROPRIATE BOX:

I have never used an illegal/controlled substance or ingested any substance for “mood-altering.”
I have listed ALL my illegal/controlled substance use and experimentation. I have not used or
experimented with any other illegal/controlled substance other than what I have listed.

YES NO Have you been present when illicit drugs/ narcotics were being used?

YES NO Have you been present when illicit drugs/narcotics were being sold or purchased?

If yes to either of the above, explain including-Type of Drug / Number of times / Dates:

YES NO Have you used K2, Special K, any synthetic marijuana under any brand or name?

YES NO Have you ever lied to a doctor in order to obtain prescriptions such as
valium or painkillers? What drug: _____ When: _____

YES NO Have you ever taken a prescription more than the prescribed amount?

What drug: _____ When: _____

YES NO Have you ever grown marijuana?

YES NO Have you ever grown mushrooms?

YES NO Have you ever had an illegal injection?

When was the last time you were around someone using illegal drugs? _____

What were the circumstances? _____

Have you ever purchased, possessed, sold, given away, transported or distributed any illegal/controlled
substance? YES NO

If so, explain in detail:

Have you ever possessed, transported, or purchased any precursor chemicals or any chemical laboratory
glassware or apparatus used in the manufacturing of any controlled substance or dangerous drugs?

YES NO

If yes, please explain: Item / Number of times / Last time

Have you ever been involved, or assisted anyone, in the smuggling or transportation of any illegal
contraband (drugs, chemicals for drug manufacturing, money, weapons etc.), persons or property for any
illegal purpose? If yes, please

(THIS AREA INTENTIONALLY BLANK)

I. TRAFFIC HISTORY

- 1. List every entity that has issued you a driver's license: _____
- 2. Has your driver's license ever been suspended or revoked in any state? YES NO
If so, give all dates of suspension and details: _____

- 3. Have you ever driven a vehicle without financial responsibility/auto liability insurance? YES NO
If so, give all approximate dates and details: _____

- 4. Have you ever committed a hit/run accident, regardless of the severity of the damage? YES NO
If so, give all approximate dates & details: _____
- 5. Have you ever operated a vehicle/boat while intoxicated? YES NO
If so, give all approximate dates & details: _____
- 6. Have you ever been involved in an accident after you had been drinking alcoholic beverage or under the influence of a narcotic? YES NO
If so, give all approximate dates & details: _____
- 7. Have you ever failed to lawfully respond to a traffic citation resulting in additional Failure to Appear Charge or Warrant of Arrest? YES NO
- 8. With what company do you carry auto liability insurance? _____

Agent's Name

Phone #

Policy #

- 9. List all traffic citations you have **EVER** received as an adult or juvenile, **REGARDLESS OF THE DISPOSITION.** (Exclude parking tickets.) *****DO NOT LIST D.W.I./D.U.I. OR FAILURE TO LEAVE ID/STOP & RENDER AID CHARGES HERE--THEY ARE CRIMINAL CHARGES.*****

Date Issued	Offense / Charge	Issuing Agency	Court Disposition

Check the appropriate box:
 I have **NEVER** received a traffic citation.

I have received a traffic citation, and have listed ALL of them (ATTACH EXTRA PAGES IF NECESSARY). I HAVE NOT RECEIVED ANY OTHER TRAFFIC CITATIONS OTHER THAN THE ONES I HAVE LISTED.

10. List all traffic collisions in which you have EVER been involved as a driver, REGARDLESS OF WHETHER THE COLLISION WAS REPORTED OR ON YOUR RECORD.

Date	Location, City, State	Police Report?	Who was at fault?

Check the appropriate box:

I have NEVER been the driver in a traffic collision.

I HAVE been the driver in a traffic collision(s), and have listed ALL of them. (ATTACH EXTRA PAGES IF NECESSARY). I HAVE NOT BEEN INVOLVED IN ANY OTHER COLLISION OTHER THAN THE ONES I HAVE LISTED.

11. Have you ever had a traffic collision while driving a company vehicle or vehicle other than your own?
 YES NO

If so, list dates and details of EVERY INCIDENT: _____

_____ (ATTACH EXTRA PAGES IF NECESSARY)

12. Have you ever been a participant in a “drag race”? Yes No

13. Have you ever been an observer at a “drag race”? Yes No

J. MARITAL & FAMILY HISTORY

1. Indicate your marital status: Single Engaged Married (including common-law)
 Separated Divorced Widowed

2. If engaged or married (including common-law marriage), complete the following:

 SPOUSE/FIANCÉE’S FULL NAME (INCLUDE MAIDEN/OTHER MARRIED NAMES) DATE OF BIRTH

 HOME ADDRESS HOME PHONE #

 PLACE OF EMPLOYMENT OCCUPATION WORK PHONE#

 DATE OF MARRIAGE COUNTY/STATE OF MARRIAGE

3. If separated, divorced (including past common-law marriage and annulments), or widowed (indicate which), complete the following. (ATTACH EXTRA PAGES IF YOU HAVE MORE THAN ONE EX-SPOUSE AND LIST ALL OF THEM):

 PRIOR SPOUSE’S FULL NAME (INCLUDE MAIDEN/OTHER MARRIED NAMES) DATE OF BIRTH

PRESENT ADDRESS

HOME PHONE#

DATE OF MARRIAGE

COUNTY/STATE OF MARRIAGE

DATE OF ORDER/DECREE OF DIVORCE

COUNTY/STATE OF DIVORCE

4. List **all** children related to you or your spouse: (natural, past/present stepchildren, adopted, foster, etc.)

FULL NAME (INCLUDE MAIDEN)	RELATION	DATE OF BIRTH	FULL ADDRESS	SUPPORTED BY
ATTACH EXTRA	PAGES	IF	NECESSARY	

Check the appropriate box:

- I have listed my current spouse/fiancee, ALL previous spouses, and ALL CHILDREN.
- I needed more space, and have continued to list ALL CHILDREN AND ALL PREVIOUS SPOUSES on an attached page. I have not been married (including common-law relationships) to ANY OTHER PERSON, AT ANY OTHER TIME, nor do I have ANY OTHER CHILDREN other than those I have listed.

5. Do you pay child support or alimony? YES NO
 Are you delinquent in these payments? YES NO
 Have you ever been delinquent on any child support payment? YES NO
 Have you ever been ordered into court for non-payment of alimony or child support? YES NO

If you answered "YES" to regarding late or delinquent payment(s), give dates and details of every incident:

(ATTACH EXTRA PAGES IF NECESSARY)

6. List ALL immediate family members of your spouse or fiancee, or most recent ex-spouse (parents, step- parents, siblings, stepsiblings, etc. If deceased, list and so state).

FULL NAME (INCLUDE MAIDEN)	RELATION	DATE OF BIRTH	FULL ADDRESS & PHONE

7. List **ALL** of your immediate family members in the following order: father, mother, brothers and sisters. Also list **ALL** step-brothers/sisters, half-brothers/sisters and stepparents. If deceased, list and so state. Please include their Driver's License (DL) number as well if possible.

FULL NAME (INCLUDE MAIDEN NAME)	RELATION	DATE OF BIRTH	FULL ADDRESS, PHONE, DL #

Check the appropriate box:

- I have listed ALL relatives as requested.
- I needed more space, and have continued on an attached page to list ALL relatives as requested.

Has any member of your family, cohabitant or boyfriend/girlfriend (any of the individuals you have listed, including in-laws) ever been summoned into court for a criminal act, arrested/charged/convicted of any crime? YES NO

If you answered YES, list EVERY PERSON'S FULL NAME, DATE OF BIRTH, CHARGES (ALL KNOWN TO YOU), DATE OCCURRED, ARRESTING AGENCY, and DISPOSITION.

(ATTACH EXTRA PAGES IF NECESSARY)

K. FINANCIAL HISTORY

1. What are your total earnings from your current job(s)? _____ Weekly Monthly

2. Do you have income from any other source, other than your principal occupation? (i.e., income from other members of household, child support, alimony, dividends, rental property, side-jobs such as baby-sitting, lawn mowing, etc.) YES NO If so, list **ALL** SOURCES:

AMOUNT	FREQUENCY	SOURCE

(ATTACH EXTRA PAGES IF NECESSARY)

3. Do you have a bank account? YES NO

Checking account: _____
BANK NAME AVERAGE BALANCE

BANK ADDRESS

Savings account: _____
BANK NAME AVERAGE BALANCE

BANK ADDRESS

Other accounts/holdings (LIST ALL AMOUNTS AND LOCATIONS): _____

 (ATTACH EXTRA PAGES IF NECESSARY)

4. Have you ever filed for bankruptcy? YES* NO

If so, how many times? _____ Provide DATE, LOCATION FILED and REASON for each time:

 (ATTACH EXTRA PAGES IF NECESSARY)

*** If you have filed for bankruptcy, you must submit copies of the court record including Judgment.**

5. Have you ever failed to fulfill any financial obligations? YES NO
 (Debts past due/collection, failure to repay any loan; default on credit, loan or rent; delinquent child support or other court-ordered payments, charge-offs, etc.) **If so, list: ALL UNPAID DEBTS OR UNFULFILLED AGREEMENTS, EVEN IF THEY WERE WRITTEN OFF/CHARGED OFF, OR RELIEVED BY BANKRUPTCY, and /or IF YOU LATER PAID THE DEBTS OR ARE PAYING THEM NOW.**

CREDITOR	AMOUNT	DATE

(ATTACH EXTRA PAGES IF NECESSARY)

6. Have you ever been sued for unpaid bills or had a financial judgment against you? YES
NO If so, give DATE, CREDITOR, AMOUNT, and details for EVERY such incident:

(ATTACH EXTRA PAGES IF NECESSARY)

(THIS AREA INTENTIONALLY BLANK)

7. List names and addresses of ALL individuals, companies, or others to whom you are indebted, such as rent, mortgage, auto payment, insurance, charge accounts, child support, including payments for regular services which you pay for (i.e., utilities, pager, cellular phone, cable/satellite, alarm monitoring, etc.).

List all requested information. Indicate with an asterisk (*) payments, which are over 30 days late.

Debt Type (loan; credit card; child support; utility etc.)	Creditor & Creditor's Address	Reason for Debt (home, transportation, education, medical, etc.)	Total Balance	Monthly Payment

(ATTACH EXTRA PAGES IF NECESSARY)

TOTALS:

	Total Debt	Monthly Payments
--	---------------	---------------------

8. Are you current in filing your income tax for this year and years past? Yes No
9. Do you currently owe income tax from past years and how much? Yes No
10. Have you ever had anything repossessed by a bank, creditor, financial institution or lender? Yes No

List and explain:

CHECK THE APPROPRIATE BOX:

- I have listed ALL debts and payments above; I have no others except what I have listed.
- I needed extra space, and have continued to list ALL debts and payments on an attached page.

Tattoos / Body Art / Piercings

1. Do you have any tattoo(s) that would likely be uncovered or visible when wearing a typical short sleeve Police uniform shirt? Yes No
2. Do you have or have you ever had any tattoo related to race, an ethnic group, or racial statement? Yes No
3. Do you have any tattoo with depiction of the female body that might reasonably prove offensive to another? Yes No
4. Do you have or have you ever had any gang related tattoo? Yes No

3. YES NO Have you ever used marijuana, illegal drugs, or narcotics while you were on duty or employed as a police officer?
4. YES NO Have you ever committed any undetected act, if it were to be discovered would result in disciplinary action?
5. YES NO Have you ever watched another officer commit any criminal act and not report it to the proper authorities or supervisors?
6. YES NO Have you ever watched another officer violate the civil rights of another person and not report it to the proper authorities?
7. YES NO Have you ever solicited or attempted to solicit money or material objects in return for not enforcing the law?

If yes to any of these questions, explain:

VEHICLES

List **ALL** vehicles you own or drive:

Year	Make	Model	License Plate # and State

AFFIDAVIT

I hereby certify that there are **no willful misrepresentations, omissions, or falsifications** in the foregoing statements and answers to questions.

I further understand that all foregoing statements will be verified through a background investigation and polygraph examination, and that the findings of these examinations and evaluations are confidential and will not be released.

I am fully aware that any such misrepresentations, omissions, or falsifications will be grounds for immediate rejection or termination of my application or employment. Further, if there are any

I will immediately notify the Garland Police Department of any changes in my status (arrests, citations, employment changes, any information covered in this document) or changes I need to make to responses already given during the hiring process, or in your personal history statement changes following the submission of this personal history statement or during the hiring process,

I have read and understand the entire above affidavit including the printed, typewritten, and handwritten portions thereof, and the statements therein are true and complete. By signing this Personal History Statement, I certify that all my answers in this form are true, correct, and complete.

Affiant

Sworn to and subscribed before me by the said affiant on this _____ day of _____, 20____, given under my hand and seal of office.

NOTARY PUBLIC

My commission expires: _____.