

# CITY OF LA FERIA



## Instructions for Police Applicants:

Read these instructions carefully before proceeding. These instructions are provided as a guide for completing your personal history statement, it is essential that the information that you provide is accurate in all respects. It will be used on basis for a background investigation that will determine your eligibility for employment with the La Feria Police Department.

1. Print legibly in black ink; answer all questions to the best of your ability.
  2. If a question is not applicable, enter "N/A" in the space provided.
  3. Avoid errors 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 the correct address and phone numbers in this application. If you are not sure of an address or phone number, personally verify it before entering the information.
  5. If there is insufficient space on the form to include all the information required, attach extra sheets to the form. Be sure to reference the relevant section and questions number before you continue your answers.
  6. An accurate and complete form will expedite your application. An incomplete or unclear entry may require your application being returned to you for additional information. Deliberate omissions or falsifications may result in disqualification of your application.
- A. Return completed form to this department with the following information attached that is applicable to you:
- If you have served in the military service, attach a copy of your DD-214
  - If you hold a certificate from the Texas Commission of Law Enforcement Officer Standards and Education, attach a copy of that certificate.
  - Attach a copy of your High School Diploma, G.E.D., and or College Transcript.



**15. Other information applicable but not listed above:**

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**B. Residence:**

List all addresses where you have lived during the past ten ( 10 ) years. List date by month and year. Attach extra sheets if necessary.

From	To	Address
_____ - _____	_____	_____
_____ - _____	_____	_____
_____ - _____	_____	_____

**C. Beginning with your present or most recent job. List All employment since age sixteen ( 16 ). Including part – time, Temporary, or seasonal employment. Include all periods of unemployment. Attach extra sheets if necessary.**

1. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_  
Address \_\_\_\_\_  
Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Job Title \_\_\_\_\_  
Duties \_\_\_\_\_  
Supervisor \_\_\_\_\_ Co-worker \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_
2. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_  
Address \_\_\_\_\_  
Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Job Title \_\_\_\_\_  
Duties \_\_\_\_\_  
Supervisor \_\_\_\_\_ Co-worker \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_
3. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_  
Address \_\_\_\_\_  
Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Job Title \_\_\_\_\_  
Duties \_\_\_\_\_  
Supervisor \_\_\_\_\_ Co-worker \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

4. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Job Title \_\_\_\_\_  
 Duties \_\_\_\_\_  
 Supervisor \_\_\_\_\_ Co-worker \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_

5. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Job Title \_\_\_\_\_  
 Duties \_\_\_\_\_  
 Supervisor \_\_\_\_\_ Co-worker \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_

6. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Job Title \_\_\_\_\_  
 Duties \_\_\_\_\_  
 Supervisor \_\_\_\_\_ Co-worker \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_

7. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Job Title \_\_\_\_\_  
 Duties \_\_\_\_\_  
 Supervisor \_\_\_\_\_ Co-worker \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_

**D. Military Record**

1. Have you ever served in the U.S. Armed Forces? Yes \_\_\_\_\_ No \_\_\_\_\_

2. Date of service: From \_\_\_\_\_ to \_\_\_\_\_ Branch of Service \_\_\_\_\_  
 \_\_\_\_\_ Unit Designation \_\_\_\_\_

3. Were you ever disciplined while in the Military Service (include Court Martial, Captain's Masts, Company Punishment, Ect.)?  
 Yes \_\_\_\_\_ No \_\_\_\_\_

Change	Agency	Date	Age at time	Disposition
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**E. Education History**

High School Attended	City & State	From	To	Yes	No
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

2. Collage or University Attended \_\_\_\_\_  
City and State \_\_\_\_\_  
Dates Attended \_\_\_\_\_  
Units Completed \_\_\_\_\_ Major/Minor \_\_\_\_\_  
Degree Received, if any & Date \_\_\_\_\_

Collage or University Attended \_\_\_\_\_  
City and State \_\_\_\_\_  
Dates Attended \_\_\_\_\_  
Units Completed \_\_\_\_\_ Major/Minor \_\_\_\_\_  
Degree Received, if any & Date \_\_\_\_\_

Collage or University Attended \_\_\_\_\_  
City and State \_\_\_\_\_  
Dates Attended \_\_\_\_\_  
Units Completed \_\_\_\_\_ Major/Minor \_\_\_\_\_  
Degree Received, if any & Date \_\_\_\_\_

**3. List other schools attended (Trade, Vocational, Business, Etc.) Give Name and Address of schools, dates attended, course of study, certificates, and any other pertinent information.**

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**F. Special Qualifications & Skills**

**1. List any special Licenses you hold (such as Pilot, Radio Operation, Scuba, Ect.)**

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**2. List any specialized machinery or equipment which you can operate.**

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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 special skills or qualifications you may possess.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**G. Arrest, Detention, & Litigation**

1. Have you ever been arrested, detained by police or summoned into court? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, Complete the following:

Offense Charge	Police Agency City & State	Date	Disposition of Case
_____	_____	_____	_____
_____	_____	_____	_____

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 details, \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. With what company do you carry auto insurance? \_\_\_\_\_

\_\_\_\_\_

3. List the best of your memory all traffic citations you have received, excluding parking tickets.

Month/Year	Charge	City/State	Disposition
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. Describe in a brief narrative any traffic accidents in which you have been involved, giving approximate dates and locations.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. List all children related to you or your spouse (Natural, Step-Children, Adopted, & Foster Children).

Name	Relation	DOB	Address	Supported by Whom
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



**6. List all other Dependents.**

<b>Name</b>	<b>Address</b>	<b>Relation</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**7. List other relatives in the following order: Father, Mother, (include maiden name) Brothers, & Sisters. If deceased, so indicate.**

<b>Name</b>	<b>Address</b>	<b>Phone</b>	<b>Relation</b>	<b>Age</b>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**I. Marital & Family History**

1. Are you? \_\_\_\_\_ **Single**  
\_\_\_\_\_ **Engaged**  
\_\_\_\_\_ **Married**  
\_\_\_\_\_ **Separated**  
\_\_\_\_\_ **Divorced**  
\_\_\_\_\_ **Widow**

**2. If engaged:**

Name of Fiancée \_\_\_\_\_

Address \_\_\_\_\_

City & State \_\_\_\_\_

Phone Number \_\_\_\_\_

**3. If married:**

Date \_\_\_\_\_

City & State \_\_\_\_\_

Spouse's Name (wife's maiden name) \_\_\_\_\_

**4. If ever separated, divorced or widowed:**

Date of Marriage \_\_\_\_\_

City & State \_\_\_\_\_

Spouse's Maiden Name \_\_\_\_\_

Present Address & Phone Number \_\_\_\_\_

\_\_\_\_\_

Separated, Divorced or Annulled \_\_\_\_\_

\_\_\_\_\_

Date of Order or decree \_\_\_\_\_

Court & State where issued \_\_\_\_\_

\_\_\_\_\_

If more space is needed attach additional sheets as necessary.

List other schools, trade, vocational, business, ect. . . .

Give name, dates attended, graduation date, diploma earned, ect. . . .

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

References: List five persons who know you well enough to provide current information about you. Do not list relatives or former employers.

1. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

City	State	Zip
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Phone#: \_\_\_\_\_ Years known: \_\_\_\_\_

2. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

City	State	Zip
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Phone#: \_\_\_\_\_ Years known: \_\_\_\_\_

3. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_ City State Zip

Phone#: \_\_\_\_\_ Years known: \_\_\_\_\_

4. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_ City State Zip

Phone#: \_\_\_\_\_ Years known: \_\_\_\_\_

5. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_ City State Zip

Phone#: \_\_\_\_\_ Years known: \_\_\_\_\_

6. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_ City State Zip

Phone#: \_\_\_\_\_ Years known: \_\_\_\_\_

7. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_ City State Zip

Phone#: \_\_\_\_\_ Years known: \_\_\_\_\_

**I hereby certify that there are no willful misrepresentations, omission, or falsifications in the foregoing statement and the answers to the questions posed in this application for the employment with the City of La Feria. I am fully aware that such willful misrepresentation, omissions, or falsifications may be ground for immediate rejection of my application or termination of my employment.**

**Signature:**

\_\_\_\_\_

**Date:** \_\_\_\_\_

**I hereby grant permission to the La Feria Police Department of any representative thereof to conduct an investigation into my background and any other information they need to obtain in an effort to determine my qualifications for the position I have applied for.**

**Signature:**

\_\_\_\_\_

**Date:** \_\_\_\_\_