Hood County Sheriff's Office

APPLICANT'S PERSONAL HISTORY STATEMENT

NAME_____

DATE RECEIVED_____

DATE RECEIVED BY BACKGROUND INVESTIGATOR_____

I am applying for:

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

The attached Personal History Statement (PHS) is what TCOLE considers to be the minimum information necessary to meet the required Background Investigation (BI) for any Peace Officer, Jailer, or Telecommunicator appointed to an agency, as defined under TCOLE Rule 211.1(a)(8).

The BI/PHS is an auditable document which must be retained along with all other required TCLEOSE appointment documents throughout the licensee's employment and five (5) years after he or she leaves the agency.

Personal History Statement Instructions

Employees are exposed to confidential and law enforcement sensitive information. A thorough background investigation is required to properly evaluate the suitability of applicants for employment with the agency. Although it is an achievement to reach the background phase of the hiring process, this is still a competitive process and does not, in any way, guaranty selection.

These instructions are provided as a guide to assist you in properly completing your Personal History Statement. **It is essential that the information is accurate in all respects so please read all instructions carefully before proceeding**. The Personal History Statement will be used as a basis for a background investigation that will determine your eligibility for becoming an employee.

1. Your application must be printed legibly in **BLACK INK** by the applicant or typed. Answer all questions truthfully and accurately.

2. If a question is not applicable to you, enter **N/A** in the space provided.

3. Avoid errors by reading the directions carefully before making any entries on the form. Be sure your information is accurate and in proper sequence before you begin.

4. You are responsible for obtaining correct and full addresses. If you are not sure of an address, personally verify before making that entry on this history statement. Errors will not be viewed favorably. **ALL ADDRESSES MUST BE COMPLETE WITH ZIP CODES.**

5. If you need additional space for your answers, attach an additional sheet or sheets as needed. Be sure to indicate what question number and page this refers to.

6. An accurate and complete form will help expedite your investigation. **Omissions or falsifications** will result in **disqualification.**

7. You are responsible for furnishing any changes and/or updating your application as needed, such as address changes or telephone changes in writing.

8. Any candidate submitting an incomplete application **WILL NOT BE CONSIDERED FOR EMPLOYMENT**. Your application **will be evaluated on completeness and neatness.**

9. All documents requested must be submitted with the application (photocopies are acceptable in most cases). Required documents vary according to the position being sought and the history of the applicant. Hiring agency please check off documents required- modify list as necessary

   - ☐ Completed Personal History Statement
   - ☐ Copy of your Social Security card.
   - ☐ Original certified copy of your birth certificate. (No photo copy)
   - ☐ Copy of your valid Texas driver license or a copy of another State's driver license. Applicant must possess a valid Texas driver license prior to being offered employment.
   - ☐ Copy of your High School diploma or GED certificate.
   - ☐ Sealed original certified copy of your college transcript. (No photo copy)
   - ☐ Photocopy of your college diploma.
   - ☐ Copy of your Peace Officer Certificate from your police academy. (Peace Officer, Jailer, & Telecommunicator Applicants Only)
   - ☐ Copy of your Texas peace officer license and all training certificates awarded to you. (Peace Officer, Jailer, & Telecommunicator Applicants Only)
   - ☐ Copy of your DD-214 if applicable. Must possess an honorable discharge.
   - ☐ Original certified copy of your Naturalization papers, if applicable. (No photo copy)
   - ☐ Copy of current proof of automobile liability insurance.
   - ☐ Copy of a TCOLE approved Firearms Qualifications within the last 12 months.

10. If you have any questions, please contact Hood County Human Resources/Personnel at 817-408-3450.

11. When submitting the completed documents, please place them in a sealed envelope marked Personal and Confidential.

Applicant Qualification Section

Before you begin to fill out this personal history statement, please ensure that you meet the following requirements. You must meet all five of these requirements to qualify for licensure as a peace officer or jailer in Texas.

Initial: _____I am a citizen of the United States of America.

_____I have earned a high school diploma or a GED.

_____I have never been convicted, plead guilty (nolo contendere), nor have I been on court-ordered community service/probation or deferred adjudication for a Class A misdemeanor or a felony.

_____During the last ten (10) years, I have not been convicted, plead guilty (nolo contendere), been on community service/probation or deferred adjudication for a Class B misdemeanor in this state, other state, or while serving in the military.

_____I have never had a military court martial that resulted in a dishonorable or bad conduct discharge.

DISQUALIFICATION

There are very few automatic basis for rejection. Even issues of prior misconduct, employee terminations, and arrests are usually not, in and of themselves, automatically disqualifying. However, deliberate misstatements or omissions can and often will result in your application being rejected, regardless of the nature or reason for the misstatements/omissions. In fact, the number one reason individuals "fail" background investigations is because they deliberately withhold or misrepresent job-relevant information from their prospective employer.

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

APPLICANT IDENTIFICATION

INFORMATION PROVIDED IN THIS SECTION IS USED FOR IDENTIFICATION PURPOSES ONLY.

Last Name	First	Middle	Maiden
Street Address		Apt. No.	
City		State & Zip Code	
Mailing Address (if different from residence)		State & Zip Code	
Home Telephone No.	Work Telephone No.	Cellular No. Pager No.	
Date of Birth	Social Security No.	Drivers License No. & State	

Have you ever been known or gone by any other name (excluding nick-names)? If yes, give details.

_____

_____

Place of Birth (City, County, State, Country)_____

Are you a U.S. Citizen by Birth?_____ Are you a Naturalized Citizen?_____

Height_____ Weight_____ Eye Color_____ Hair Color_____

Scars, Tattoos (description and location) or other distinguishing marks_____

_____

Do you have a social networking, instant messaging, or other internet-based profile(s)? If yes, provide screen name(s), service provider(s)._____

List ALL E-Mail Addresses (s) _____

_____

MARITAL & FAMILY HISTORY

Single_____ Married_____ Engaged_____ Co-habiting_____

Spouse's/Co-habitant's name (include maiden name)_____

Address_____

Date of Birth_____ Date of Marriage_____

Employer(s)_____

Employer & Address_____

Home Telephone No._____ Work Telephone No._____

Roommate(s)(do not include parents or cohabitants)_____

Date(s) of birth_____

If you have been separated, divorced, or widowed, provide details below:

Date of Marriage_____
City & State_____
Separated_____ Date_____
Divorced_____ Date_____
Widowed_____ Date_____
Annulled_____ Date_____
Court or State issued_____
Ex-spouse's Name_____
Date of Birth_____
Telephone No._____

Date of Marriage_____
City & State_____
Separated_____ Date_____
Divorced_____ Date_____
Widowed_____ Date_____
Annulled_____ Date_____
Court or State issued_____
Ex-spouse's Name_____
Date of Birth_____
Telephone No._____

Identify children related to you or your spouse (Natural, Step-Children, Adopted, or Foster Children)

Relation	Name	Date of Birth	Address

Identify relatives in the following order: Father, Mother (include maiden name), step-parents (if any), brothers and sisters.

Relationship	Name	Complete Address	Phone Number	DOB

RESIDENCES

Identify all residences where you have lived in the last 10 years, **beginning with the most recent,_including your present address.** List date by month/year. **Include military assignments. (No TDY's)**

From	To	Address	City	Sate & Zip code

PERSONAL REFERENCES

List five (5) persons who know you well enough to provide current information about you. Do not list relatives, former or present employers, or supervisors.

Name_____ Years known_____

Address_____

Home Telephone _____ Alternate Telephone _____

Nature of Relationship_____

Name_____ Years known_____

Address_____

Home Telephone _____ Alternate Telephone _____

Nature of Relationship_____

Name_____ Years known_____

Address_____

Home Telephone _____ Alternate Telephone _____

Nature of Relationship_____

Name_____ Years known_____

Address_____

Home Telephone _____ Alternate Telephone _____

Nature of Relationship_____

Name_____ Years known_____

Address_____

Home Telephone _____ Alternate Telephone _____

Nature of Relationship_____

Identify below any employees of the Texas Commission on Law Enforcement with whom you are acquainted:

_____ _____

_____ _____

_____ _____

_____ _____

TRAFFIC RECORD

Identify all vehicles that you currently own or operate:

Year	Make	Model	Color	License Plate No.	Owner

Please list your current automobile insurance carrier: _____ Expires: _____

Have you ever possessed a driver's license issued by any state other than Texas? Yes_____ No_____
If yes, give details below:

Driver's License No._____ State_____ Date issued_____

Driver's License No._____ State_____ Date issued_____

Have you **ever** had your driver's license suspended or revoked? Yes___ No___ If yes, give reason, date, and length of suspension: _____

_____

Identify all motor vehicle accidents you have been involved in during the last 10 years.

Date	Location	Police Report: Yes/No
Cause of Accident (e.g., ran red light, failed to control speed)		
Date	Location	Police Report: Yes /No
Cause of Accident (e.g., ran red light, failed to control speed)		

Identify all traffic citations you have received within the last 10 years, excluding parking tickets:

Month/Year	Violation	City & State	Disposition (e.g., defensive driving, dismissed)

ARRESTS, DETENTIONS, AND LITIGATION

Have you **ever** been arrested or detained by law enforcement?

Yes_____ No_____ If yes, complete the following table:

Agency	Offense	Date	Location	Outcome

Have you **ever** committed an act of family violence? ("Family violence" means an act by a member of a family or household against another member of the family or household that is intended to result in physical harm, bodily injury, assault, or sexual assault or that is a threat that reasonably places the member in fear of imminent physical harm, bodily injury, assault, or sexual assault, but does not include defensive measures to protect oneself.) (Texas Family Code Section 71.004) If yes, explain:_____

_____

_____

Have you **ever** assaulted another person since the age of seventeen (17)? ("Assault" means to cause bodily injury to another, threaten another with imminent bodily injury, or to cause physical contact with another when the person knows or should reasonably believe that the other will regard the contact as offensive or provocative.) (Texas Penal Code Section 22.01) If yes, explain:_____

_____

_____

Have you **ever** been considered or named a suspect in a criminal investigation or criminal offense? If yes, explain:_____

_____

_____

Have you **ever** been a party to a civil suit or action? If yes, explain: _____

_____

Have you **ever** been involved in any incident (do not include vehicular accidents) in which a police report was made or law enforcement was called? If yes, explain: _____

_____

Other than crimes that would have been sealed by juvenile records, have you ever committed – or assisted another person in the commission of – a felony crime, serious misdemeanor, or a crime involving moral turpitude that went undetected or unreported to law enforcement? If yes, explain: _____

_____

_____

Do you anticipate being sued or named in any type of lawsuit or proceeding? Yes_____ No_____

FAMILY AND RELATIVES' ARRESTS

Have members of your immediate family or close relatives have ever been arrested?

Yes_____ No_____ If yes, complete the following table:

Name/Relationship	Charge/Offense	Outcome	Year	Agency

FINANCIAL HISTORY

Your current net monthly income _____ Spouse's current net monthly income _____

Source	Amount	Frequency

Do you have any accounts with a financial institution? Yes____ No___

Name(s) of financial institution(s)_____

Type(s) of account(s)_____

Identify any person or entity to whom you are indebted, and the extent of your indebtedness. Include mortgages, vehicle payments, charge accounts, credit cards, loans, child support payments, and any other debts or payments.

Name of Creditor (e.g., Sears, Citi financial)	Type of Debt (e.g., student loan, automobile)	Monthly Payment	Approx Balance

CREDIT INFORMATION

Have you **ever** filed bankruptcy personally or on behalf of a business? Yes_____ No_____

If "Yes" to above, indicate type _____

Have you **ever** had any personal or real property repossessed or foreclosed? Yes_____ No_____

Have you **ever** failed to pay Federal, state, or other taxes? Yes_____ No_____

Have you **ever** failed to file a tax return, when required by law? Yes_____ No_____

Have you **ever** had a lien placed against your property for failing to pay taxes or other debts? Yes_____ No_____

Have you **ever** had a judgment entered against you? Yes_____ No_____

Have you **ever** defaulted on any type of loan? Yes_____ No_____

Have you **ever** had bills or debts turned over to a collection agency? Yes_____ No_____

Have you **ever** had any credit account suspended, charged off, or cancelled for failure to pay? Yes_____ No_____

Have you **ever** written a check that was later returned for Non Sufficient Funds (NSF)? Yes_____ No_____

Have you **ever** been delinquent on court-imposed alimony or child support payments? Yes_____ No_____

Have you **ever** been disciplined regarding the use of a travel/credit card provided by an employer? Yes_____ No_____

Are you currently more than sixty (60) days delinquent on any debts? Yes_____ No_____

Have you **ever** applied for unemployment compensation? Yes_____ No_____ When? _____

Have you **ever** received unemployment compensation? Yes_____ No_____ When? _____

Identify any person or entity to which you are **more than 30 days late** in paying. Include mortgages, vehicle payments, charge accounts, credit cards, loans, child support payments, and any other debts or payments.

Name of Creditor (e.g., Sears, Citi financial)	Type of Debt (e.g., student loan, automobile)	Number of Days Late	Reason

EMPLOYMENT HISTORY

Beginning with your present or most recent job, list all employment since the age of seventeen (17). Include full-time, part-time, temporary, seasonal, military assignments, or unpaid internships, plus all periods of unemployment.

If you are currently employed, may we contact your present employer? Yes _____ No _____

1. Employer _____ From_____ To_____

Address _____

Telephone No._____

Job Title_____ Beginning and Ending Salary _____/_____

Work Schedule _____

Name of supervisor_____ Supervisor contact information _____

Name of a co-worker _____ Co-worker contact information _____

Duties: _____

_____

_____

_____

_____

_____

_____

Identify any disciplinary actions you received: _____

_____

_____

Reason for Leaving: _____

_____

_____

Was there an unemployment period between previous employment and the one listed above? _____Yes ____No

If yes, provide dates and explain: _____

_____

2. Employer _____ From_____ To_____

Address _____

Telephone No._____

Job Title_____ Beginning and Ending Salary _____/_____

Work Schedule _____

Name of supervisor_____ Supervisor contact information _____

Name of a co-worker _____ Co-worker contact information _____

Duties: _____

_____

_____

_____

_____

_____

_____

Identify any disciplinary actions you received: _____

_____

_____

Reason for Leaving: _____

_____

_____

Was there an unemployment period between previous employment and the one listed above? _____Yes ____No

If yes, provide dates and explain: _____

_____

3. Employer _____ From_____ To_____

Address _____

Telephone No._____

Job Title_____ Beginning and Ending Salary _____/_____

Work Schedule _____

Name of supervisor_____ Supervisor contact information _____

Name of a co-worker _____ Co-worker contact information _____

Duties: _____

_____

_____

_____

_____

_____

_____

Identify any disciplinary actions you received: _____

_____

_____

Reason for Leaving: _____

_____

_____

Was there an unemployment period between previous employment and the one listed above? _____Yes ____No

If yes, provide dates and explain: _____

_____

4. Employer _____ From_____ To_____

Address _____

Telephone No._____

Job Title_____ Beginning and Ending Salary _____/_____

Work Schedule _____

Name of supervisor_____ Supervisor contact information _____

Name of a co-worker _____ Co-worker contact information _____

Duties: _____

_____

_____

_____

_____

_____

_____

Identify any disciplinary actions you received: _____

_____

_____

Reason for Leaving: _____

_____

_____

Was there an unemployment period between previous employment and the one listed above? _____Yes ____No

If yes, provide dates and explain: _____

_____

5. Employer _____ From_____ To_____

Address _____

Telephone No._____

Job Title_____ Beginning and Ending Salary _____/_____

Work Schedule _____

Name of supervisor_____ Supervisor contact information _____

Name of a co-worker _____ Co-worker contact information _____

Duties: _____

_____

_____

_____

_____

_____

_____

Identify any disciplinary actions you received: _____

_____

_____

Reason for Leaving: _____

_____

_____

Was there an unemployment period between previous employment and the one listed above? _____Yes ____No

If yes, provide dates and explain: _____

_____

6. Employer _____ From_____ To_____

Address _____

Telephone No._____

Job Title_____ Beginning and Ending Salary _____/_____

Work Schedule _____

Name of supervisor_____ Supervisor contact information _____

Name of a co-worker _____ Co-worker contact information _____

Duties: _____

_____

_____

_____

_____

_____

_____

Identify any disciplinary actions you received: _____

_____

_____

Reason for Leaving: _____

_____

_____

Was there an unemployment period between previous employment and the one listed above? _____Yes ____No

If yes, provide dates and explain: _____

_____

7. Employer _____ From_____ To_____

Address _____

Telephone No._____

Job Title_____ Beginning and Ending Salary _____/_____

Work Schedule _____

Name of supervisor_____ Supervisor contact information _____

Name of a co-worker _____ Co-worker contact information _____

Duties: _____

_____

_____

_____

_____

_____

_____

Identify any disciplinary actions you received: _____

_____

_____

Reason for Leaving: _____

_____

_____

Was there an unemployment period between previous employment and the one listed above? _____Yes ____No

If yes, provide dates and explain: _____

_____

8. Employer _____ From_____ To_____

Address _____

Telephone No._____

Job Title_____ Beginning and Ending Salary _____/_____

Work Schedule _____

Name of supervisor_____ Supervisor contact information _____

Name of a co-worker _____ Co-worker contact information _____

Duties: _____

_____

_____

_____

_____

_____

_____

Identify any disciplinary actions you received: _____

_____

_____

Reason for Leaving: _____

_____

_____

Was there an unemployment period between previous employment and the one listed above? _____Yes ____No

If yes, provide dates and explain: _____

_____

EDUCATIONAL HISTORY

High School(s) attended	Address	Dates attended From-To	Graduated Yes/No

Do you have a G.E.D. Certificate?_____

Were you **ever** expelled from school? If yes, give details: _____

_____

Identify all colleges, universities, or technical schools you have attended:

Name	City & State	Dates attended	Hours completed	Major	Degree & Date

MILITARY OBLIGATION

Have you ever served in the U.S. Armed Forces or State Military Forces? Yes_____ No_____

Served from_____ to_____ Highest Rank held_____
Date Date

Branch of Service_____ Unit _____

Job Title(s) (e.g., Rifleman, Security)_____

Type of discharge_____ Last Duty Station: _____

Are you actively serving in a Reserve Unit (including State Military Forces)? Yes _____ No_____

Serving from_____ to_____ Current Rank held_____
Date Date

Branch of Service_____ Unit _____

Job Title(s) (e.g., Rifleman, Security)_____

Have you **ever** been subject to court martial or any other disciplinary proceeding under the Uniform Code of Military Justice? (Include non-judicial, Captain's mast, etc.) If "Yes," provide date(s), charge(s), military court(s) or authority(ies), and outcome(s).

_____

_____

_____

SPECIAL QUALIFICATIONS & SKILLS

Identify any special licenses you hold (e.g., pilot, radio operator): _____

If you know a foreign language, indicate your fluency in each block below (excellent, good, fair)

Language	Understanding	Speaking	Reading	Writing

Do you have any experience with firearms? Yes_____ No_____

MEMBERSHIP IN ORGANIZATIONS (PAST AND PRESENT)

Name & Address	Type (e.g., social, fraternal, professional)	From	To

Have you **ever** been an officer or a member of, or made a contribution to, an organization that advocates or practices the commission of acts of force or violence to discourage others from exercising their rights under the U.S. Constitution or right granted by law. Yes_____ No_____

PERSONAL DECLARATIONS

Do you consume alcoholic beverages? Yes_____ No_____ If "Yes", how often? _____

Have you **ever** used marijuana or hashish? Yes_____ No_____ If yes, when last used?_____

Have you **ever** used any illegal drug (including a performance-enhancing steroid) not prescribed by a physician?

Yes _____ No _____ If yes how often_____ When last used_____

Provide explanation:_____

Have you **ever** sold or furnished controlled substances or prescription drugs to anyone? Yes____ No___

If yes, give details:_____

_____

Are there any incidents in your life, or details not mentioned herein, which may influence this department's evaluation of your suitability for employment as a police officer?

If yes, explain:

_____

_____

_____

Have you **ever** been employed by or applied with any other law enforcement agency? Yes _____ No _____

If yes, please identify to the best of your knowledge:

Agency Name & Address	Date Applied or Hired	Result

Identify any additional information you think should be considered in your application for the position you are seeking, and/or any further explanation of answers to previous questions:

_____

_____

_____

I hereby certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers to the above questions. I fully understand that any misrepresentation, omission, or falsification may deem me permanently unsuitable, or if hired, may lead to the termination of my employment.

_____
Signature of applicant

_____
Date

Before me personally appeared_____who stated this document and its intent was explained to him/her that he/she has full knowledge of its purpose and that he/she executed this instrument of his/her free will and accord.

Sworn to and subscribed before me on this_____ day of_____, _____

SEAL or STAMP

_____
Signature of Notary

My Commission Expires: _____

AUTHORITY TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

I hereby authorize the **HOOD COUNTY SHERIFF'S OFFICE** and its authorized representatives bearing this release, or a copy thereof, within one year of its date, to obtain any information in your files pertaining to my employment, military, credit, education, or medical records, including but not limited to academic, achievement, attendance, athletic, personal history, and disciplinary records, medical records, and credit records.

I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for official use. Consent is granted to all parties to furnish such information, as described above, to third parties in the course of fulfilling its official responsibilities. I hereby release you, as custodian of such records, and any school, college, university, or other educations institution, hospital, or other repository of medical records, credit bureau, lending institution, consumer reporting agency, or retail business establishment including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or attempt to comply with it.

I am furnishing my Social Security Account Number on a voluntary basis with the understanding such is not required by any law or regulation. I have been advised that all parties will utilize this number only to facilitate the location of employment, military, credit, and educational records concerning me in connection with this application. Should there be any question as to the validity of this release, you may contact me as indicated below:

Applicant's Printed Full Name: _____

Address: _____

_____

Telephone Number: _____

Applicant's Notarized Signature: _____

Sworn to and signed before me, on this the _____ day of _____, 20_____,

in and for _____ county, in the state of _____.

Seal or Stamp

Signature of Notary Public: _____

Printed Name of Notary Public: _____

My Commission Expires: _____