

EL PASO COUNTY SHERIFF'S OFFICE

VOLUNTEER PROGRAM APPLICATION



NAME OF APPLICANT

TELEPHONE NUMBER

Application Checklist

- 1. Complete this Application Form as completely as possible
- _____ 2. Hand Deliver the entire package to:

Volunteer Program

3850 Justice Drive

El Paso, TX (915) 538-2116



El Paso County Sheriff's Office

BACKGROUND INVESTIGATION

PERSONAL HISTORY STATEMENT

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"WE SERVE WITH PRIDE"

Position Applied for: _____

INSTRUCTIONS

READ CAREFULLY

Your Personal History Statement is subject to a complete background investigation consisting of family, personal, and employment history. Questions relating to age, height, weight and physical characteristics, when not specifically related to the job requirements are used for the purpose of identification in our background investigation and for no other purpose.

Any misstatement of fact or omission of material information reported in this Personal History Statement, or withholding new information that may affect your clearance from completing the background section for the condition of employment under contract or volunteer service within the El Paso County Sheriff's Office. If more space is needed to answer any question, use a separate piece of 8 1/2 X 11 lined notebook paper; be sure to number the question to which you are responding. All responses made by you will be held in the strictest confidence.

Print all answers in ink. **DO NOT TYPE.**

1. Answer every question. If the information requested does not apply to you, print "N/A" in the blank space provided.
2. If you cannot remember or do not know the requested information print "I cannot remember" or "I do not know" in the blank space. Do not use this as a scratch however, make all attempts to gather the information that you are lacking.
3. Once you have completed this personal history statement, notarize the last page and return it to your employment agency. Do not return it to any other person as it could possibly be misplaced.

Have you ever applied with the El Paso County Sheriff's Office or the Sheriff's Office Volunteer Program, Jail Ministry, Prison Health Serviced or any other contract position requiring a background investigation?_____ If yes, provide the following:

Date:_____ Reason why you separated from employment or program?

APPLICANT'S IDENTIFICATION

- 1. Name: _____
 LAST FIRST MIDDLE MAIDEN
- 2. Your present residence: _____
- 3. Home Phone _____ Business Phone _____ Cellular/Pager _____ Email: _____
- 4. Names of the Persons whom you live with and relationship: _____

- 5. How long have you lived at your present address? _____
- 6. By what other names have you been known (nicknames, monikers, alias-refer to question #7)

- 7. Have you ever legally changed your name? _____ If yes, Date _____ Place _____
Court: _____ Reason: _____
- 8. Date of Birth: _____ Age: _____ Social Security Number _____
- 9. Place of Birth: City: _____ County: _____ State: _____ Country: _____
- 10. Are you: Single: _____ Married: _____ Divorced: _____ Separated: _____
- 11. Your: Height: _____ Weight: _____ Sex: _____ Do you wear glasses: _____
- 12. Natural Eye Color: _____ Hair: _____ Distinguishing Marks: _____

- 13. Current Driver License/Identification Card: _____
 State Number Expiration Date
- 14. Are you a United States Citizen? Yes _____ No _____ Naturalized? Yes _____ No _____
Naturalization Number: _____
- 15. If you cannot be contacted during the day at home or at work, list a telephone number where messages can be left for you, with the name and relationship of the person to receive the messages:

FAMILY HISTORY

16. PRESENT MARRIAGE (This includes common-law marriages)

Full name of spouse _____
DOB: _____ Occupation _____ Date of marriage _____
Number of children by this marriage: _____ Ages: _____
Is your spouse employed? _____ If Yes, Title _____
Name of spouse's employer: _____
Address: _____ Phone: _____

17. List all residences where you have lived for the past ten years. Attach additional sheet if necessary.

ADDRESS	FROM	TO

18. RELATIVES: List relatives (Father, Mother, brothers, and sisters, including step relatives.)

NAME	RELATIONSHIP	ADDRESS	PHONE	AGE

SOCIAL HISTORY

19. List all clubs, societies and organizations of which you are or have been a member
(Include civic, religious, outlaw gang, party crew, car club, fraternity, non-school athletics)

NAME ADDRESS CITY AND STATE DATES

20. Are you now or have you been a member of any foreign or domestic organization, association, movement, group, or combination of persons which is totalitarian, fascist, communist, subversive, or which has adopted, shows a policy of advocating or approving the commission of acts offenses or violence to deny other persons their rights under the Constitution of the United States, or which seeks to alter the form of Government of the U.S. by unconstitutional means?

If the answer to any of these is Yes, explain fully.

MILITARY RECORD

21. Have you served in the U.S. Armed Forces? Yes____No____

Date of Service: From _____ To _____ Branch of Service _____

Unit Designation/City and State _____

Military Service Number _____ Highest rank held _____

Type of Discharge _____

22. Were you ever disciplined while in the military service (including court-martial, captain's masts, company punishment, etc.)? If so, explain:

Charge Date Disposition of Case

23. If you received a discharge other than honorable, give complete details..

EMPLOYMENT HISTORY

24. Have you ever been dismissed or asked to resign from any employment or position you have ever held? _____ If yes, give the following:

Employer's Name: _____

Address: _____

Date: _____ Reason(s) _____

25. Have you ever had any disciplinary action taken against you? If yes, give the following:

Employer's Name: _____

Address _____ Phone Number _____

Date _____ Nature of disciplinary action and reason(s):

26. Have you ever been accused, suspected, or investigated with regard to any dishonesty or irregularities connected with your employment or any organization which you were or are connected with? If yes, give the date, employer, or organization, nature of any accusation or investigation and the final disposition of matter? _____

LEGAL HISTORY

27. Have you ever been detained or arrested by a Peace Officer or summoned into court? If yes:

REASON	DATE	CITY & STATE	DISPOSITION
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28. Has your driver license ever been suspended or revoked? If yes:

REASON	DATE	CITY & STATE	DISPOSITION
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29. List to the best of ability all traffic citations you have received, excluding parking tickets:

Month/Year	Charge	City/State	Disposition
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30. At this time, is there any pending criminal court action, which might involve you? If yes, give explanations:

DRUG USAGE

31. Have you ever experimented at any time with any of the below listed substances for any reason, even if you were not sure of what it was. This includes any and all use including experimentation, curiosity, peer pressure, and any one time use whether you felt the effects of the substance or not. Answer each question TRUTHFULLY, The El Paso County Sheriffs Office is looking for mature, honest people who can admit to their mistakes and discuss those mistakes honestly. Your drug information will be verified by an intensive background investigation. Do not minimize or rationalize the facts. If you are not sure of the exact date, list the approximate month and year as best you can recall. All questions must be answered. Give explanation at the end of question # 53. If more space is needed, answer on separate sheet of paper.

- | | |
|--|---|
| A) Marijuana, pot, grass, weed, etc. | Yes___No___ Date First used_____ Last used_____ |
| B) Hash, hash oil, hashish, etc. | Yes___No___ Date First used_____ Last used_____ |
| C) Cocaine, crack, rock, snow, blow, etc. | Yes___No___ Date First used_____ Last used_____ |
| D) Barbiturates, downers, etc. | Yes___No___ Date First used_____ Last used_____ |
| E) Amphetamines, uppers, speed, met amphetamines, crank, white crosses, etc. | Yes___No___ Date First used_____ Last used_____ |
| F) Heroin, black tar heroin, horse, H, etc. | Yes___No___ Date First used_____ Last used_____ |
| G) LSD, Blotter, Acid, Rohypnol, any other hallucinogenic drug not listed. | Yes___No___ Date First used_____ Last used_____ |
| H) PCP, Angel Dust, etc. | Yes___No___ Date First used_____ Last used_____ |
| I) THC, opium, morphine, etc. | Yes___No___ Date First used_____ Last used_____ |
| J) Mushrooms, peyote, etc. | Yes___No___ Date First used_____ Last used_____ |
| K) Quaaludes, ecstasy, extasy, etc. | Yes___No___ Date First used_____ Last used_____ |
| L) Inhaled any paint, glue, solvent, gases for the sole purpose of getting high? | Yes___No___ Date First used_____ Last used_____ |
| | Type used _____ |
| M) Poppers, "Rush", etc. | Yes___No___ Date First used_____ Last used_____ |
| N) Steroid, injected or oral. | Yes___No___ Date First used_____ Last used_____ |
| Total number of single pills or injections taken, not number of cycles? | |
| _____ | |
| O) Any other illegal substance not listed? | Yes___No___ Date First used_____ Last used_____ |

IF YOU HAVE ANSWERED YES TO ANY OF THE ABOVE, EXPLAIN YOUR ANSWERS:

32. Have you ever purchased any narcotics, illegal drugs, steroids or marijuana without a doctor's prescription for you or anyone else? This includes, but not limited to, giving someone else money to purchase any of them for you or to defray the cost, chip in, etc. If so, explain:

33. Have you ever used any illegal drugs or narcotics on any job, or gone to work under the influence of any illegal drug, alcohol or narcotic? If so, explain:

34. Have you ever sold for anything of value or given away any illegal or counterfeit drugs, or narcotics? If so, explain:

35. Have you ever sold or traded anything of value, OTHER THAN MONEY, to purchase any illegal drugs, or narcotics? If so, explain:

36. Have you or have you ever assisted in the manufacture, i.e. help make, produce, supply or packaging of any illegal drug, narcotic, or counterfeit drug? If so, explain:

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I have reviewed this complete personal data statement and believe it to be true and correct to the best of my knowledge and recollection. I understand what willfully withholding information or making false statements concerning this statement will be basis for rejection.

I also understand that after I have turned in this personal history statement, I must inform the Sheriffs Human Resource Section immediately, of any changes or updates of information contained in this statement. Failure to do so could be basis for rejection.

I also do hereby authorize a review and full disclosure of all records concerning myself to any duty authorized agent of the El Paso Sheriffs Office, whether the said records are of public, private or confidential nature.

The intent of this authorization is to give my consent for a full and complete disclosure of the records of educational institutions; financial or credit institutions including records of loans, the records of commercial and retail credit agencies, credit reports and ratings, and other financial statements and records wherever filed. Employment and pre-employment records including background reports, efficiency ratings, complaints or grievances filed by or against me and the records and recollections of any person who may have any record or recollection about me.

I certify that any person(s) who may furnish such information concerning me shall not be held liable for giving this information; and I do hereby release said persons from any and all liability which might otherwise be incurred as a result of furnishing such information.

A copy of this release form will be valid as an original thereof, even though which copy does not contain an original writing of my signature.

Name: _____ Address: _____

Signature: _____ Date: _____

Sworn and subscribed before me this _____ day _____, 20____
Notary Public, in and for El Paso County, Texas.

Notary Public for El Paso, Texas

My Commission Expires

