



1200 East Broad Street
Mansfield, Texas 76063
Telephone: 817-276-4267

JOB CLASSIFICATION: Correctional Officer
DEPARTMENT: Law Enforcement Center **SALARY:** \$31,695
APPLICATIONS ACCEPTED FROM : October 02, 2015 - Open Until Filled

ALL ACCOMPANYING FORMS MUST BE COMPLETED AT TIME OF APPLICATION. NO CONSIDERATION WILL BE GIVEN IF NOT SUBMITTED.

FUNCTION:

Under direct supervision and on an assigned shift, responsible for enforcing rules and regulations, preventing escapes, maintaining order and discipline among inmates, and for escorting inmates to and from their cells.

EXAMPLES OF WORK TO BE PERFORMED:

- MUST BE ABLE TO WORK ANY SHIFT INCLUDING DAYS, EVENINGS AND MID-NIGHTS. (Shifts are typically eight (8) hours with actual hours being established by operational necessity) MUST BE ABLE TO WORK SATURDAYS, SUNDAYS AND HOLIDAYS.
- MUST BE ABLE TO WORK PAST NORMAL ASSIGNED SHIFT.
- WILL BE SUBJECT TO CALL-BACK
- Control inmates from stations or by patrolling in yards, grounds, cell houses, corridors, and work areas.
- Escort individuals or groups of inmates to work or other activities.
- Keep continued count of inmates assigned.
- Inspect cells, grounds, work locations, and other facilities for unauthorized objects or materials.
- Check on sanitary conditions, fire and safety hazards.
- Enforce rules of conduct, security, and labor standards by making verbal or written reports of significant violations as irregularities to supervisors.
- Assists in averting riots and escapes undertaken by prisoners.
- May assist in the supervision of inmates on transfer to other correctional facilities or on appearances in court.
- Accompany prisoners being transferred for psychiatric diagnosis or to treatment clinics. Attend sanity hearings in courtroom or hospital.
- Distribute cleaning and sanitation supplies; deliver commissary orders, medicines, and mail; pick up and deliver personal laundry and bedding for inmates.
- Operate electric jail doors; advise public on matters such as visiting hours or nature of articles that can be brought in for inmates, issue passes to attorneys, bondsmen, and relatives of inmates upon display of proper credentials; control admission of employees entering and exiting the jail.
- Perform other duties as may be required.

The City of Mansfield is an Equal Opportunity Employer and does not discriminate on the basis of disability.

REQUIRED KNOWLEDGE, SKILLS AND ABILITIES:

- Knowledge of federal, state, and county laws as they relate to inmates, correctional department structure and function.
- Knowledge of department-written directives, rules and regulations, prisoner control and techniques of prisoner control and precautionary measures used in escorting and supervising prisoners work details.
- Ability to supervise inmates.
- Ability to write intelligible, complete, and concise reports.
- Ability to deal with situations requiring tact, diplomacy, understanding, fairness, firmness, and good judgment.
- Remain alert at all times and react quickly and calmly in emergency situations.
- Establish and maintain effective working relationships with inmates and associates.
- Ability to operate two-way radio, camera, and other electronic devices.
- High school diploma or equivalent.

NECESSARY SPECIAL REQUIREMENTS:

- Must be at least 18 years of age.
- Must have vision correctable to 20/20.
- Must be of good character and reputation and possess a valid Texas driver's license.
- Must be emotionally stable, have attention for detail, and be physically fit to perform assigned tasks.
- Ability to run, jump, turn, pivot, stoop, climb, and execute similar movements
- Ability to push, lift, remove, install, and otherwise handle objects and persons weighing 50-200 pounds, and subdue resisting individuals by exercise of physical force so as to take into custody and transport them against their will.

ESSENTIAL PHYSICAL FUNTIONS:

1. The physical activity of this position

- Climbing. Ascending or descending ladders, stairs, scaffolding, ramps, poles and the like, using feet and legs and/or hands and arms. Body agility is emphasized.
- Balancing. Maintaining body equilibrium to prevent falling and walking, standing or crouching on narrow, slippery, or erratically moving surfaces.
- Stooping. Bending body downward and forward by bending spine at the waist.
- Kneeling. Bending legs at knee to come to a rest on knee or knees.
- Crouching. Bending the body downward and forward by bending leg and spine.
- Crawling. Moving about on hands and knees or hands and feet.
- Reaching. Extending hand(s) and arm(s) in any direction.
- Standing. Particularly for sustained periods of time.
- Walking. Moving about on foot to accomplish tasks, particularly for long distances or moving from one work site to another.
- Pushing. Using upper extremities to press against something with steady force in order to thrust forward, downward or outward.
- Pulling. Using upper extremities to exert force in order to draw, haul or tug objects in a sustained motion.
- Lifting. Raising objects from a lower to a higher position or moving objects horizontally from position-to-position. This factor is important if it occurs to a considerable degree and requires substantial use of upper extremities and back muscles.
- Fingering. Picking, pinching, typing or otherwise working, primarily with fingers rather than with the whole hand as in handling.

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- Grasping. Applying pressure to an object with the fingers and palm.
- Feeling. Perceiving attributes of objects, such as size, shape, temperature or texture by touching with skin, particularly that of fingertips.
- Talking. Expressing or exchanging ideas by means of the spoken word. Those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly.
- Hearing. Perceiving the nature of sounds at normal speaking levels with or without correction. Ability to receive detailed information through oral communication, and to make the discriminations in sound.

2. The physical requirements of this position

- Heavy work. Exerting up to 100 pounds of force occasionally, and/or up to 50 pounds of force frequently, and/or up to 20 pounds of force constantly to move objects.

3. The visual acuity requirements including color, depth perception, and field vision.

- The worker is required to have close visual acuity to perform an activity such as: preparing and analyzing data and figures; transcribing; viewing a computer terminal; extensive reading; visual inspection involving small defects, small parts, and/or operation of machines (including inspection); using measurement devices; and/or assembly or fabrication parts at distances close to the eyes.

4. The conditions the worker will be subject to in this position

- The worker is subject to environmental conditions. Protection from weather conditions but not necessarily from temperature changes.
- The worker is subject to both environmental conditions. Activities occur inside and outside.
- The worker is subject to hazards. Includes a variety of physical conditions, such as proximity to moving mechanical parts, moving vehicles, electrical current, working on scaffolding and high places, exposure to high heat or exposure to chemicals.
- The worker is frequently in close quarters, crawl spaces, shafts, man holes, small enclosed rooms, small sewage and line pipes, and other areas that could cause claustrophobia.
- The worker is required to function in narrow aisles or passageways.



APPLICATION FOR EMPLOYMENT

City of Mansfield, Texas
1200 E. Broad Street
Mansfield, Texas 76063
Phone: (817) 276-4267
FAX: (817) 473-7487
www.mansfield-tx.gov

Please print. All information must be legible. Application must be completed in full or will not be considered. Resumes may be attached to completed application. Applicants requiring reasonable accommodation to the application and/or interview process should contact the Human Resources Department for assistance. Equal access to programs, services, and employment is available to all qualified persons. The City of Mansfield is an Equal Opportunity Employer.

Position applied for: _____ Date: _____ Salary Expected: _____

NAME: _____ (Last) _____ (First) _____ (Middle)

ADDRESS: _____ (Street) _____ (City) _____ (State) _____ (Zip)

E-MAIL ADDRESS: _____

TELEPHONE: (Home) _____ (Work) _____ (Cell) _____

Please check all that apply: Do you want [] Regular Full Time [] Regular Part Time [] Temporary Full Time [] Temporary Part Time [] Seasonal (as needed)

How did you learn of this position? [] Newspaper* [] Internet* [] Professional Magazine* [] Employee Referral [] HR Office [] Employment Agency [] Texas Workforce Commission (employment office)

*Specify which _____

Do you have a valid Texas Driver's License? [] No [] Yes Type of License: [] Operator [] CDL [] Chauffer License Number: _____ Expiration Date: _____

Does anyone related to you (by blood or marriage) work here or is currently a member of the City Council? [] Yes [] No City Board Commissions? [] Yes [] No If yes, list name, their position, and relationship: _____

Have you ever worked here before? [] Yes [] No If yes, give dates and position held: _____

Are you legally eligible for employment in the United States of America? [] Yes [] No

Answering "yes" to the following question will not be an automatic bar to employment. Factors such as date of the offense, seriousness, and nature of the violation, rehabilitation and position applied for will be taken into consideration.

Have you ever plead "guilty" or "no contest" (nolo contendere) to, or been convicted of a crime? [] Yes [] No If you answered "yes," please provide the date(s), location, and details: _____

Have you served in the armed forces, armed forces reserve, or national guard of the United States of America? [] Yes [] No If "yes," please complete the following: BRANCH _____ DATE ENTERED _____ DATE OF DISCHARGE _____ RANK AT DISCHARGE _____ LIST DUTIES AND TRAINING _____

ARE YOU CURRENTLY A MEMBER OF THE RESERVES OR NATIONAL GUARD? [] Yes [] No

EMPLOYMENT HISTORY

List all periods of employment or volunteer activities. If currently UNEMPLOYED, write "unemployed" in the CURRENT EMPLOYER block and go to the next block. Start with your current status and work backward. If you need additional space, use a plain sheet of paper using the format below for each additional position. You may attach a resume or other documents. COMPLETE EACH SECTION FULLY.

CURRENT EMPLOYER: _____
BUSINESS ADDRESS: _____ PHONE NO. _____
JOB TITLE: _____ SUPERVISOR'S NAME: _____
DATES OF EMPLOYMENT: From _____ To _____
REASON FOR DESIRING CHANGE: _____
STARTING SALARY: \$ _____ ENDING SALARY \$ _____ MAY WE CONTACT THIS EMPLOYER? ____
YOUR DUTIES: _____

LAST EMPLOYER: _____
BUSINESS ADDRESS: _____ PHONE NO. _____
JOB TITLE: _____ SUPERVISOR'S NAME: _____
DATES OF EMPLOYMENT: From _____ To _____
REASON FOR LEAVING: _____
STARTING SALARY: \$ _____ ENDING SALARY \$ _____ MAY WE CONTACT THIS EMPLOYER? ____
YOUR DUTIES: _____

NEXT PREVIOUS EMPLOYER: _____
BUSINESS ADDRESS: _____ PHONE NO. _____
JOB TITLE: _____ SUPERVISOR'S NAME: _____
DATES OF EMPLOYMENT: From _____ To _____
REASON FOR LEAVING: _____
STARTING SALARY: \$ _____ ENDING SALARY \$ _____ MAY WE CONTACT THIS EMPLOYER? ____
YOUR DUTIES: _____

NEXT PREVIOUS EMPLOYER: _____
BUSINESS ADDRESS: _____ PHONE NO. _____
JOB TITLE: _____ SUPERVISOR'S NAME: _____
DATES OF EMPLOYMENT: From _____ To _____
REASON FOR LEAVING: _____
STARTING SALARY: \$ _____ ENDING SALARY \$ _____ MAY WE CONTACT THIS EMPLOYER? ____
YOUR DUTIES: _____

PLEASE EXPLAIN IN DETAIL ANY TIME LAPSES DUE TO UNEMPLOYMENT OR OTHER REASONS.

LIST LICENSES or CERTIFICATIONS RELATED TO THE JOB FOR WHICH YOU ARE APPLYING.

LIST PROFESSIONAL OR TECHNICAL LICENSES, REGISTRATION, CERTIFICATES, OR MEMBERSHIPS YOU POSSESS.

CHECK ALL SKILLS OR ABILITIES, BELOW, THAT YOU POSSESS THAT RELATE TO THE POSITION FOR WHICH YOU ARE APPLYING.

- Typing / Speed _____ WPM Ten-Key Calculator
 Computer List programs in which proficient: _____

FOR TRADES JOBS ONLY:

- Truck List type(s): _____
 Backhoe List type(s): _____
 Grader List type(s): _____
 Dozer List type(s): _____
 Tractor List type(s): _____
 Mower List type(s): _____
 Other equipment List type(s): _____

EDUCATION

SCHOOL	NAME AND LOCATION	FROM	TO	GRADUATED/COMPLETED
High School				<input type="checkbox"/> Diploma <input type="checkbox"/> GED
Trade School				Course of Study _____ Certification _____
College				Degree obtained _____ Major _____ Minor _____
Other				

ACKNOWLEDGEMENT

READ THE FOLLOWING CAREFULLY BEFORE SIGNING

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from employment with the City of Mansfield whenever it is discovered.

I give the City of Mansfield the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the City of Mansfield and its representatives for seeking, gathering, and using such information and all other persons, corporations, or organizations for furnishing such information.

The City of Mansfield does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

This application is current for only six (6) months for the position for which application is made. I acknowledge that this application, once submitted to the City of Mansfield, becomes the property of the City of Mansfield.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the City of Mansfield reserves the same right to terminate my employment during the probationary period at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the City of Mansfield, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I understand it is the policy of the City of Mansfield not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant: _____ Date: _____



Mansfield Police Department
1305 E. Broad Street Mansfield, Texas 76063

Tracy Aaron, Chief of Police

Mansfield Police Department Applicant Qualifications

Effective: November 18, 2014

The following is a list of conditions that may disqualify an applicant, whether sworn or civilian, at any time during the hiring process for the Mansfield Police Department:

- Omission of a required personal history statement
- Willful misrepresentation or falsifications of personal history
- Failure to attach or include required documentation
- Presently under indictment or charges for any criminal offense other than a Class C traffic violation
- Has been on court-ordered community supervision or probation for any criminal offense above the grade of Class B misdemeanor or a Class B misdemeanor within the past ten years from the date of the court order
- Has been convicted of an offense above the grade of a Class B misdemeanor or a Class B misdemeanor within the past ten years
- Has been convicted of a family violence offense
- Conviction at any time for a felony offense
- Is currently prohibited by state or federal law from operating a motor vehicle
- Employees that may potentially operate any city vehicles are prohibited from having more than three moving violations in the past three years.
- Is prohibited by state or federal law from possessing firearms or ammunition
- Multiple convictions (three or more) for failure to maintain financial responsibility within the past three years.
- Unlawful use of marijuana or hashish within the past three years.
- Unlawful use of any controlled substance or dangerous drugs as defined by the Texas Health and Safety Code within the past ten years.
- Any sale or manufacture of a controlled substance, marijuana or dangerous drug as defined by the Texas Health and Safety Code
- Presently on court ordered community supervision or probation for any offense above a Class C misdemeanor
- Less than honorable discharge from the military service
- Indicators of serious, repeated employment instability
- Financial history indicating lack of judgment, dependability, or trustworthiness
- Indicators of inadequate interpersonal skills
- Indicators that applicant is not suited for employment
- Deceptive polygraph results
- Unfavorable background investigators recommendation
- Unfavorable psychological exam
- Unfavorable medical/drug screening results as reported to the Human Resource Department by the testing agency

TEXAS COMMISSION ON LAW ENFORCEMENT

APPLICANT'S PERSONAL HISTORY STATEMENT

Mansfield Police Department

NAME _____

DATE ISSUED _____

COMPLETE AND RETURN BY _____

I am applying for:

- Peace Officer PID# _____
- County Jailer PID# _____
- Telecommunicator PID# _____
- Civilian Employment

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 Applicants Only)
 - Copy of your Texas peace officer license and all training certificates awarded to you. (Peace Officer 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 your assigned background investigator

11. When submitting the completed documents, please place them in a sealed envelope marked Personal and Confidential to your assigned background investigator.

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	State & 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 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: _____



Human Resources
1200 East Broad Street
Mansfield, Texas 76063
(817) 276-4267

READ CAREFULLY BEFORE SIGNING

Prior to employment, applicants will be investigated as to convictions for prior criminal offenses. A prior conviction will not automatically disqualify an applicant for employment and will be considered only as it relates to the job applied for and as it may assist in determining character traits of the applicant. However, falsification of the application will result in disqualification for employment.

All applicants for full time or regular part-time positions are requested to take a physical examination, INCLUDING DRUG SCREENING.

All job offers are contingent on the successful completion of reference checks, police check, driver's license check (if applicable), and physical exam (if applicable).

All applications become the property of the *City of Mansfield*. Applications will be kept on file six months.

I hereby request and authorize you to render any information regarding my employment, character, qualifications, habits, reputation, credit, medical history, past record of performance, or any other pertinent information to the City of Mansfield. Any information furnished is at my express request and for my benefit.

I hold said representative or agent furnishing aforesaid information harmless, and I do hereby release them from any and all liability for damage of whatsoever nature because of furnishing such information.

I further understand that this information will be "confidential" between the City of Mansfield and all other parties involved.

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: _____

Print Name: _____ Today's Date: _____
Last First Middle Maiden Month Day Year

SUPPLEMENTAL INFORMATION CARD

The information on this card is used for statistical reporting to various regulatory agencies only. It will be detached from your application and will in no way be used in consideration of your application for employment.

Position applying: _____

Race/Sex: Female Male

- A. American Indian or Alaska Native
- B. Asian
- C. Black or African American
- D. Hispanic or Latino
- E. Native Hawaiian or Other Pacific Islander
- F. Two or more races
- G. White

How did you learn of this position?

- Dallas Morning News
- Employee Referral
- Fort Worth Star Telegram
- HR Office
- Mansfield News-Mirror
- Professional Magazine*
- Texas Workforce Commission
- Other * _____

Internet Site

- Career Builder
- City
- Monster
- TML
- Other *

Specify Which:

- _____
- _____
- _____
- Other *

Birth Date: _____
Month Day Year

Birthplace: _____ U.S. Citizen Yes No

Have you previously worked for the City? No Yes If yes, when? _____
Mo. Year to Mo. Year

Department: _____ Position: _____

Under what other names have you been employed? _____