

Applicant EEO Data Form- POLICE

The City of Granbury is an Equal Opportunity Employer who does not discriminate on the basis of race, color, religion, sex, age, national origin, disability or veteran status



The information requested is being collected in order to comply with federal reporting requirements and **will not be considered** as part of the application for employment. This form is separated from the rest of the application.

Today's Date _____

Personal Information

Name _____

Address			City	State	Zip
Phone number			Email address		Gender Male Female
Race White Asian American Black Hispanic American Indian Other			Check highest level of education completed 0-5 Grade Grad or GED Master's Degree 6-8 Grade College Law Degree 9-11 Grade Bachelor's Degree Doctoral High School		

Position

Position you are applying for _____

Type of Employment desired

Full time

Part time

Seasonal/Temporary

How did you learn about this Job?

Newspaper

City Employee

Internet

City Personnel Office

Employment Agency or TWC

Applicant Signature

Date

Application For Employment- POLICE



Today's Date _____

Failure to fully complete the information requested on this application will eliminate you from further consideration

Personal Information

Name _____

Address	City	State	Zip
Phone number	Email address		

Position

Position you are applying for	Available start date
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Are you, or have you ever been employed by the City of Granbury

Yes No if yes, when

Employment desired	Full time	Part time	Seasonal/Temporary
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Please list names of any relatives employed with the City of Granbury

Do you have a Commercial Driver's License	Check all applicable License/Endorsement(s)			
Yes No	Trailer	Tank	HazMat	Combination

Eligibility

Only United States citizens or aliens who are legally entitled to work in the United States are eligible for employment, Can you, upon employment, submit documentation verifying your identity and your legal right to work in the United States?

Yes No

Have you ever been convicted of a felony, or have you ever been convicted of a public indecency or a violation of the Texas Controlled Substance Act, or have you ever plead guilty or no contest to a criminal act, or have you ever been placed on probation or had your driver's license suspended or revoked, or have you ever been notified of any exclusion or sanctioning by a federal program?

Yes No If yes, when

Details

Note: a positive response to the previous question will not necessarily prevent you from being considered for employment, but a false statement or omission of information will. The City of Granbury will consider the offense for which you were convicted, the circumstances surrounding the conviction, and the date of the conviction as factors in making hiring decision.

Military History

Branch of Service	Dates Served (mm/yy) to	Highest Rank
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Employment History (Starting with Most Recent)

Employer (1)	Job title	Dates employed	Still Employed
			to
Employer Address	City	State	Zip
Supervisor's Name	Supervisor's Phone	May we Contact Employer Yes No	Ending pay rate
Number of employees supervised, if any	Reason for Leaving		
Description of Work			

Employer (2)	Job title	Dates employed	
			to
Employer Address	City	State	Zip
Supervisor's Name	Supervisor's Phone	May we Contact Employer Yes No	Ending pay rate
Number of employees supervised, if any	Reason for Leaving		
Description of Work			

Employer (3)	Job title	Dates employed	
			to
Employer Address	City	State	Zip
Supervisor's Name	Supervisor's Phone	May we Contact Employer Yes No	Ending pay rate
Number of employees supervised, if any	Reason for Leaving		
Description of Work			

A resume may also be attached, but will not be substituted for a completed application.

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Education

School Name	Location	Degree Received	Major

References (Business and Professional only)

Name	Years Known	Email Address	Phone

Skills

Office Skills (select all that apply)

MS Word

MS Excel

MS Powerpoint

Other

Certifications

Specialized Skills

Special Interests and Professional Groups

Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my employment being terminated.

Name (please print)	Signature
Date	

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Today's Date _____ Failure to fully complete the information requested on this application will eliminate you from further consideration

Name of Applicant: _____

Police Department Eligibility Questions

Yes	No	Do you have a valid Texas driver's license?	Yes	No	Are you a United States Citizen?
DDL#:		State:	Yes	No	If you selected "No", can you obtain one prior to employment?
Date of Birth:					
Yes	No	Are you at least 21 years of age?	If you are not 21 years of age, please select one of the following that applies: I am at least 18 years of age with an Associate's degree I am at least 18 years of age with 60 college semester hours or more I am at least 18 years of age with 2 or more years of military service with honorable discharge? None of the above apply to me		
Yes	No	Are you a high school graduate?	If you are not a high school graduate, please select one of the following that applies: I have passed a general educational development (GED) test indicating a high school graduation level and passed at least 12 semester credit hours from an accredited college or university with a GPA I have at least 24 months active duty service with an honorable discharge? None of the above apply to me		
Yes	No	Have you been placed on court ordered community supervision or probation for any offense above the grade of Class C Misdemeanor within the last 10 years?			
Yes	No	Have you been convicted of a Class B or Class A Misdemeanor within the last 10 years?			
Yes	No	Have you ever been convicted of a Felony offense?			
Yes	No	Have you ever been convicted of any offense involving family violence?			
Yes	No	Are you prohibited by state or federal law from operating a vehicle?			
Yes	No	Are you prohibited by state or federal law from possessing firearms or ammunition?			
Yes	No	Have you been discharged from the military under less than honorable conditions, specifically bad conduct, dishonorable, or any other characterization of service indicating bad behavior?			
Yes	No	Have you ever had a TCOLE/TCLEOSE license denied by final order, revoked, or voluntarily surrendered?			
Yes	No	Have you used Marijuana or Hashish within the last two years?	If yes, approximate last date of use:		
Yes	No	Have you used Methamphetamine, Cocaine, Anabolic Steroids, Ecstasy within the last three years?	If yes, approximate last date of use:		
Yes	No	Have you ever used any of the following: LSD (Acid), Peyote, Heroin, Synthetic Heroin, Fentanyl, PCP, GHB, Rohypnol, Crack Cocaine, Synthetic Cannabinoids (K2), or Psilocybin Mushrooms?			

Applicant Signature

Date

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Authorization for Background Check

I hereby authorize, without reservation, the city of Granbury to investigate, now and during my employment with the city, if applicable, my past employment, education and activities. I similarly authorize the city to request and receive any information concerning me, including but not limited to criminal history, consumer reports, credit reports, and public records, from any persons, entities, schools, companies, corporations, partnerships, associations, credit bureaus, consumer reporting agencies, state agencies, departments of labor, law enforcement agencies, licensing agencies, and from my previous employers.

A "consumer report" refers to any information bearing on an individual's creditworthiness, credit standing, credit capacity, character, general reputation or personal characteristics. For example, it includes, but is not limited to, a criminal records check.

I further release, discharge, and hold harmless the city of Granbury, Texas and all of its agents, any persons, law enforcement agencies, schools, or personal/business entities and their respective officers, directors, employees, representatives and agents of any kind from any and all claims, liability, damages and responsibility of whatever kind or nature, arising out of or in connection with any act or omission in any such investigation or compliance with this authorization and request to release information, or any attempt to comply with it. This paragraph applies to any negligence, sole negligence, comparative negligence, concurrent negligence, error, or omission.

I have voluntarily signed this release to assist in the evaluation of my employment qualifications and, if employed, to assist in the determination of whether I have violated any City of Granbury policy or acted adversely to the interests of the City of Granbury. I understand and agree that this means that a background investigation may be conducted by the city of Granbury prior to being offered a position, after being offered a position, and during my employment.

I agree that if any investigation at any time reveals that I provided false information to or omitted information from the City of Granbury (including, but not limited to, my application, resume or interview), then the application process may be halted, any offer of employment may be withdrawn, or if employed, disciplinary action may occur, including termination of employment with the City of Granbury, without liability.

I understand that if the city of Granbury uses information from a consumer report for an adverse action - for example, denying employment to me, or if I am employed, terminating my employment - the city of Granbury will take the following two steps.

- Before the adverse action is taken, the city will provide a "pre-adverse action disclosure" that includes a copy of the consumer report and an explanation of the law.
- After the adverse action is taken, the city will provide an "adverse action notice." This document will contain the name, address and telephone number of the consumer reporting agency background check company, a statement that the company did not make the adverse decision but that the City did, and a notice that I have the right to dispute the accuracy or completeness of any of the information in the report.

I agree that a telephonic facsimile or photographic copy of this release shall be as valid as the original.

Applicant Signature

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Terms and Conditions

I certify that all of the information provided by me on this application is true, correct and complete. I understand that false or misleading statements, or the omission of any information necessary to make this application complete, may result in the rejection of my application for employment or, if hired, in my dismissal.

I understand that no employment is being offered to me by my completion of this application. I also understand that if I am hired, my employment with the City of Granbury will be "at will". I understand that the phrase "at will" means that the City of Granbury is allowed to change the conditions of my employment, up to and including my involuntary termination, at any time and for any reason, and that similarly, I may resign at any time and for any reason. I understand that this "at will" relationship may not be changed, either verbally or by any written documentation, unless such change is specifically acknowledged in writing by the City Manager.

I also understand that nothing contained in this application or in the granting of an interview creates a contract between Granbury and myself, either for employment or for the providing of benefits.

If I am hired, I agree to abide by all policies and procedures of the City of Granbury.

If I am hired, I agree to return all property of the City of Granbury, including but not limited to cellphones, computers, keys, uniforms, tools and equipment. In this connection, I authorize the City of Granbury to withhold from my wages a sum of money equal to the value of the property not returned.

I hereby authorize the City of Granbury to investigate all facts contained in my application for employment. I also authorize the release of any and all information by my present and past employers, wherever located, which may be required for a reference check. I further authorize all of my previous employers and current employer to give any and all information concerning my employment and any other pertinent information which said employers may have, personal or otherwise, and I release all parties from all liabilities for any damages which may result from the furnishing of said information. A telephonic facsimile or photographic copy of these terms and conditions, including the release, shall be as valid as the original.

Applicant Signature

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DPS Computerized Criminal History (CCH) Verification (Agency Copy)

I, _____ acknowledge that a Computerized Criminal History (CCH) check may
APPLICANT OR EMPLOYEE NAME (Please Print)

be performed by accessing the Texas Department of Public Safety Secure Website and may be based on name and DOB identifiers. (This is not a consent form, but serves as information for the applicant). Authority for this agency to access an individual's criminal history data may be found in Texas Government Code 411; Subchapter F. Name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history record information (CHRI), therefore, the organization conducting the criminal history check is not allowed to discuss with me any CHRI obtained using the name and DOB method. The agency may request that I also have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search. In order to complete the fingerprint process, I must make an appointment with the Fingerprint Applicant Services of Texas (FAST) as instructed online at www.txdps.state.tx.us/CrimeRecords/Review of Personal Criminal History or by calling the DPS Program Vendor at 1-888-467-2080, submit a full and complete set of fingerprints, request a copy be sent to the agency listed below, and pay a fee of \$25.00 to the fingerprinting services company.

Once this process is completed the information on my fingerprint criminal history record may be discussed with me.

(This copy must remain on file by this agency. Required for future DPF Audits)

Applicant Signature or Employee (optional)

Date

For Agency Use Only:

Agency Name: _____
(Please Print)

Agency Representative Name: _____
(Please Print)

Signature of Agency Representative: _____

Date: _____

CCH Report Printed: _____ Yes _____ No _____ Initial

Purpose of CCH: _____

Employment _____ Vol/Contractor _____ _____ Initial

Date Printed: _____ _____ Initial

Destroyed Date: _____ _____ Initial