# MOORE COUNTY SHERIFF'S OFFICE

- 1. <u>All documents requested must be submitted with the application (photocopies are acceptable in most cases)</u>.
  - Copy of your Social Security card.
  - <u>Original certified</u> copy of your birth certificate. (We will make photo copy when turning in your application)
  - 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.
  - <u>Sealed original certified</u> 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.
  - <u>Original certified</u> copy of your Naturalization papers, if applicable. (No photo copy)
  - Copy of current proof of automobile liability insurance.



### MOORE COUNTY SHERIFF'S OFFICE DUMAS, TEXAS APPLICATION FOR EMPLOYMENT

It is our policy to comply with employment based on race, a					
DATE:					
NAME:		FIRST	MID	DLE	
SOCIAL SECURITY NUMB	ER:		D/L NUMBE	ER	ST
CURRENT ADDRESS:		P.O. BOX			700
PERMANENT ADDRESS:		P.O. BOX	CITY	STATE	ZIP
	STREET	P.O. BOX	CITY	STATE	ZIP
TELEPHONE NUMBER (	)				
ARE YOU LEGALLY ELIG (VERIFICATION MAY BE REQUIN		PLOYMENT IN	THE U.S.A.?	YES	NO
POSITION APPLIED FOR:	EPUTY SHERIFF,	CORRECTIONS OF	FICER, CLERICAL,	FOOD SERVICE	ECT)
IF APPLYING FOR DEPUTY CERTIFIED AS A PEACE O	FFICER.		UST BE CURRE		DSE
IF APPLYING FOR CORREC CURRENTLY LICENSED B	CTIONS OFFIC	CER OR DISPAT		ON ARE YOU YES	
HAVE YOU EVER BEEN PE IF YES, WHICH DEPARTM					
IF YOUR APPLICATION IS AVAILABLE TO BEGIN WO				FE WOULD Y	OU BE
ARE YOU RELATED TO AN STATE NAME AND POSITI			R EMPLOY,	_ YES	NO, IF YES
LIST ANY EXPERIENCE, S BENEFIT IN THE JOB FOR					

EDUCATION:

SCHOOL NAME	AND ADDRESS	S OF SCHOO	DL LAST YE COMPLETE	EAR GRADUATE ED	DEGREE
ELEMENTARY			5678	Y N	
HIGH SCHOOL			9 10 11 1	2Y N	
COLLEGE			1 2 3 4	Y N	
OTHER				Y N	
LIST BELOW PRESEN	T AND PAST EN	MPLOYMEN	T, BEGINNI	NG WITH YOUR MO	ST RECENT:
NAME & ADDRESS <u>OF COMPANY</u>	FROM MO. YR.			REASON FOR LEAV	ING
	DESCRIBE	E YOUR WO	RK		
PHONE NO: ( ) -					
NAME & ADDRESS OF COMPANY					VING
	DESCRIBE	YOUR WOR	RK		
PHONE NO. ( ) -					
NAME & ADDRESS <u>OF COMPANY</u>	-	-	ENDING SALARY		AVING
	DESCRIBE Y	OUR WORF	X		
PHONE NO. ( ) -					
NAME & ADDRESS <u>OF COMPANY</u>			ENDING SALARY		AVING
	DESCRIBE Y	OUR WORF	 K		
PHONE NO. ( ) -					

## I HEREBY GIVE PERMISSION TO CONTACT THE EMPLOYERS LISTED ABOVE CONCERNING MY PRIOR WORK EXPERIENCE.

<b>SIGNED:</b>	
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\_\_\_\_

IF THERE IS A PARTICULAR EMPLOYER YOU DO NOT WISH US TO CONTACT , INDICATE WHICH ONE:

PERSONAL REFERENCES: (NOT FORMER EMPLOYERS OR RELATIVES)

NAME & OCCUPATION ADDRESS PHONE

MILITARY SERVICE:

WERE YOU IN THE U.S. ARMED FORCES? \_\_\_\_ YES \_\_\_\_ NO, IF YES, WHICH BRANCH

IF YES, DID YOU RECEIVE ANY TRAINING THE ARMED FORCES THAT IS RELEVANT TO THE POSITION YOU APPLIED FOR: \_\_\_\_\_ YES \_\_\_\_\_ NO. IF YES, WHAT TRAINING: \_\_\_\_\_

#### PLEASE READ AND SIGN BELOW

THE FACTS SET FORTH IN MY APPLICATION FOR EMPLOYMENT ARE TRUE AND COMPLETE. I UNDERSTAND THAT IF EMPLOYED, ANY FALSE STATEMENT ON THIS APPLICATION MAY RESULT IN MY DISMISSAL. I FURTHER UNDERSTAND THAT THIS APPLICATION IS NOT AND IS NOT INTENDED TO BE A CONTRACT OF EMPLOYMENT, NOR DOES THIS APPLICATION OBLIGATE THE EMPLOYER IN ANY WAY, IF THE EMPLOYER DECIDES TO HIRE ME. I UNDERSTAND THAT EMPLOYMENT WITH MOORE COUNTY IS "AT WILL", WHICH MEANS THAT EITHER I OR THE COUNTY CAN TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, WITH OR WITHOUT NOTICE, AND FOR ANY REASON NOT PROHIBITED BY STATUTE. ALL EMPLOYMENT IS CONTINUED ON THAT BASIS.

I AM HEREBY AUTHORIZING THE MOORE COUNTY SHERIFF'S OFFICE TO MAKE ANY BACKGROUND INVESTIGATION OF MY PERSONAL HISTORY AND FINANCIAL AND CREDIT HISTORY THROUGH ANY INVESTIGATIVE OR CREDIT AGENCIES OF THEIR CHOICE. I ALSO STATE THAT I HAVE NOT BEEN CONVICTED OF ANY MISDEMEANOR OR FELONY CRIMINAL OFFENSE OTHER THAN ANY LISTED BELOW:

SIGNATURE

DATE

#### **Moore County Sheriff's Office**

#### AUTHORITY TO RELEASE INFORMATION

#### TO WHOM IT MAY CONCERN:

I hereby authorize the	and its
authorized representatives bearing this release, or a copy thereof, within one year of its date, to of	btain any
information in your files pertaining to my employment, military, credit, education or medical re-	ecords,
including not limited to academic, achievement, attendance, athletic, personal history, and disci	iplinary
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,,	_,	
	in and for county, in the state of		
	Signature of Notary Public:		
NOTARY SEAL			
	Printed Name of Notary Public:		
	My Commission Expires:		

Shiftwork Acknowledgement

I, \_\_\_\_\_\_ understand that the operations of the Moore County Sheriff's Office are divided into the following shifts and hours:

Deputy:

- 2 Shifts (Days and Evenings)
  - o 12 hours per shift to be manned twenty four hours a day, every day

Jail/Dispatch:

- 3 Shifts (Days, Evenings, Midnights)
  - o 8 hours per shift to be manned twenty four hours a day, every day

As a new employee, I understand that I may be assigned to any one of the shifts on a regular type basis; however, I may be re-assigned to another shift as the need arises and as determined by a supervisor. It may even result in a temporary re-assignment to a different shift until the manpower problem is corrected or a resolution has been achieved.

Applicant Signature

Date

DATE INTERVIEWED: \_\_\_\_\_ COMMENTS: \_\_\_\_\_