## **NOLAN COUNTY SHERIFF'S OFFICE**

# APPLICATION FOR EMPLOYMENT AND PERSONAL HISTORY STATEMENT ADDENDUMS



Name of Applicant	
Please circle the position(s) that you are applying for:	
Deputy (Patrol) Deputy (Courthouse Secu	rity)
Other (Specify)	TCOLE PID# (if already licensed)
Application Date of Issuance:	Date of Application Return:
(This application should be retur	ned within 14 days of issuance)

All licensed law enforcement positions require a completed **TCOLE Personal History Statement** that can be downloaded at <a href="https://www.tcole.texas.gov/">https://www.tcole.texas.gov/</a>.

### **NOLAN COUNTY APPLICATION FOR EMPLOYMENT**

NOLAN COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER

// Date of Application			_			
Office or Agency Applying With		_	Position App	lying For		
ABOUT YOU						
First Name Mid	dle Nam	е	Last	Name	Suffix	
Date of Birth / / Mo. Day Year		Place of	f Birth			
Mo. Day Year			City	(County)	State	
Alias or Past Names: (Please in	nclude i	maiden n	ame, if applicable	.)		
First Name	Middle	. Name		Last Name		
First Name	Middle	Name		Last Name		
Current Residence						
Address			_	Cell and/or Home Phor	ne (best way to contact you)	
City			_	Work Phone		
State	ZIP Co	ode	_	Okay to call you at wo	rk? Yes No	
Past Residence(s)						
/	to		/	_		
Start Date			End Date			
Address		City	State		ZIP Code	
/	to		// End Date	_		
Address		City	State		ZIP Code	
Are You:				Have You:		
Over 18 Years Old?	Yes	No	Ever bee violation	n convicted of a crime?		
A previous applicant?				ease describe and inclu		
A previous employee?			uate of c	onviction		
Legally able to work in the U.S.?						
Able to make it to work using a reliable means of transportation?						

### **Your Work Experience**

Present/Last Employer	Type of Organization or	Work	Start Date	to	// End Date
Address		Phone		Sal	ary
Supervisor That You Worked For	Job Title		May We	Contact?	Yes No
Reason for Leaving					
Past Employer	Type of Organization or	Work	// Start Date	to	// End Date
Address		Phone			ary
Supervisor That You Worked For	Job Title		May We	Contact?	Yes No
Reason for Leaving					
Past Employer	Type of Organization or	Work	// Start Date	to	// End Date
Address		Phone		Sal	ary
Supervisor That You Worked For	Job Title		May We	Contact?	Yes No
Reason for Leaving					
Past Employer	Type of Organization or	Work	// Start Date	to	// End Date
Address		Phone		Sal	ary
Supervisor That You Worked For	Job Title		May We	Contact?	Yes No
Reason for Leaving					
Professional Information	(if applicable)				
License Description		License	Number		
Effective Date		Expiration	on		
Registry or Certification		Registra	tion No		
Other		TCOLE P	ID Number sed by the Texas Co	ommission o	on Law Enforcemen

### **Your Education & Training**

Type of School	Name and Location of School/Training	Dates of Attendance	Name and Date of Degree Earned	Fields of Study (Major and Minor)
High School/ Trade School				
Business or Tech School				
Colleges				
Sexual Harassment Training				
Other Training (Explain)				
	ualifications for the position /	•		
Pate/	/ Des	cription		
oate/	/ Des	cription		
Date/	/ Des	cription		
Additional Qualit	<u>fications</u>			
Special technical com	outer or individual skills tl	hat would qualify you	for the position)	
escription				
escription				
escription				
Description				
Description	vice			

#### **Please Read Carefully**

Signature of Applicant

If you have any questions regarding the application, this statement or have need of special assistance in regard to applying for this position, please see the person of this organization who is assisting you with this application.

Nolan County does not discriminate in hiring on basis of race, color, religion, sex, national origin, disability, veteran status, or your membership in any protected class protected under law of this jurisdiction. This application does not intend to ask questions that would provide information that could be used for discrimination.

Your application will be given the consideration it deserves; however, completing an application does not imply that you will be offered employment. By signing your name below, you understand that nothing contained in this application or any information gained or discussed during the interview process creates an employment contract between you and Nolan County. Should this application and the process surrounding this application result in your employment, you have the right to terminate your employment at any time and for any reason. Likewise, Nolan County reserves the right to terminate your employment at any time and for any reason.

Moreover, you understand that no person of Nolan County has any authority to enter into any agreement with you for any specified period of time or to guarantee any other personnel benefit. This includes any statements or guarantees made prior to your application or after you are employed.

When processing this application, Nolan County may request a criminal, police or credit background check about you. Nolan County may also request the last 3 year driving record of all new applicants that will be driving any County owned vehicles or equipment. In addition to background checks and/or driving records, Nolan County may contact past employers, supervisors and/or any other person listed in this application regarding the statements made herein and your suitability for employment. This inquiry may include information as to your general character, reputation and work-related characteristics. You have the right to make a written request to the Nolan County Auditor Payroll Department to disclose to you the content of these reports.

Also note that should you become employed by Nolan County, the County Auditor has established cash handling, fraud detection/prevention, and internal control procedures to perform investigations surrounding any claim of wrongdoing including sexual harassment, theft or fraud.

By signing your name, you consent to the above and certify that all statements made by you on this application are true and complete to the best of your knowledge and that any misrepresentations or omissions by you may be the cause for rejection of your application or may be cause for subsequent dismissal if you are hired.

Data

Signature of Applicant			
References	<u>Internal Offic</u>	<u>ce Use</u>	
Date Organization _	Contact		
Information Obtained or Verified			
Date Organization _	Contact		
Information Obtained or Verified			
Date Organization _	Contact		
Information Obtained or Verified			
Criminal Background Check P	erformed?Yes	No	
Date Performed	Type of Check		
Eligible for Hire?Yes	No Position Title	Location	
Starting Date	Hiring Rate	e of Probation Pay	

#### "AT WILL" EMPLOYMENT

As a condition of employment, I agree to conform to all rules, regulations, and/or the Nolan County Sheriff's Office Policy Manual promulgated by the Nolan County Sheriff's Office, the Nolan County Sheriff and/or his or her designees, and acknowledge that these rules, regulations, and/or the Nolan County Sheriff's Office Policy Manual may be changed, interpreted, withdrawn, or added to by the Nolan County Sheriff or his designee(s) at any time at the Nolan County Sheriff's sole option and without any prior notice to me. I further acknowledge that my employment may be terminated and any offer of employment, or my acceptance of an employment offer, if such is to occur, may be withdrawn with or without cause, and with or without prior notice, at any time, at the option of the Nolan County Sheriff. I understand and acknowledge that any employment with the Nolan County Sheriff's Office is considered "at will" employment and that employees of NCSO serve at the discretion of the Sheriff. I understand and acknowledge that the Sheriff has the right to terminate an employee at any time, with or without cause or reason.

I understand that any offer of employment by the Nolan County Sheriff is contingent on me providing consent to the administration of, and the results of, any drug testing, physical exam, psychological exam, or other recognized procedure and that I may be required to undergo additional alcohol and/or drug screening, psychological exam or other recognized procedural testing and counseling during the course of my employment.

## I HAVE READ AND FULLY UNDERSTAND AND AGREE TO THE ABOVE EMPLOYEE AGREEMENT WITHOUT ANY RESERVATIONS WHATSOEVER.

Signature of Applicant		Date
STATE OF TEXAS	§	
COUNTY OF NOLAN	§	
Before me personally appexecuted the above instragreement to the purpos	rument of his/her own free wi	who says he/she
SWORN AND SUBSCRIBE	ED BEFORE ME this the	day of
Notary Public SIG	SNATURE and SEAL	

## PERSONAL INQUIRY WAIVER AUTHORITY FOR RELEASE OF INFORMATION

I respectfully request and authorize you to furnish to the Nolan County Sheriff's Office any and all information that you may have concerning me, my work record, school record, reputation, financial and credit status and any other information requested, including, but not limited to; employment, medical, physical, and mental records or reports, including all information of a confidential or privileged nature, and photocopies of same, if requested. This information is to be used to assist the aforementioned Office in determining my qualifications and fitness for the position I am seeking with the Nolan County Sheriff's Office.

I hereby release you, your organization, or others from any liability or damage which may result from furnishing the information requested above.

Signature of Applicant		Date	
Home Address	City	State	Zip
STATE OF TEXAS	§		
COUNTY OF NOLAN	§		
	eared ument of his/her own free wi e thereof.		
SWORN AND SUBSCRIBE	D BEFORE ME this the	day of	
Notary Public SIG	NATURE and SEAL		

#### **CONFIDENTIAL INFORMATION AGREEMENT**

A thorough investigation will be conducted to determine your qualifications for the position applied for. To a great extent your employment will depend on information obtained in confidential interviews of persons with whom you have been associated. Information will be obtained through interviews, physical examinations, psychological evaluations, credit reports, and documents of a confidential nature. Applicants will not have access to such information; furthermore, since the information is confidential, the Nolan County Sheriff's Office does not reveal the reason(s) of rejection for those applicants who are not selected.

If the reason(s) for your n accepted at a later date, y		emporary nature, whereb	y you could be
Signature of Applicant			nte
J ,,			
STATE OF TEXAS	§		
COUNTY OF NOLAN	§		
Before me personally appe executed the above instrui agreement to the purpose	ment of his/her own fre	e will and accord with ful	who says he/she I knowledge and
SWORN AND SUBSCRIBED	BEFORE ME this the _	day of	
Notary Public SIG	SNATURE and SEAL		