

# City of Ruidoso Downs

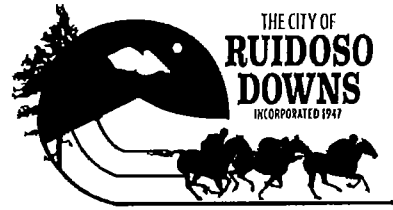
## Application Requirements

The City of Ruidoso Downs appreciates your interest in a position with our City. Please take a few minutes to read the following requirements of our application process.

1. Please fill out the application completely including your signature and driver's license number.
2. The job description must be signed and returned with the application.
3. You may attach a personal resume, or other information for consideration, however the City application must be completed and turned into Personnel to be considered for any positions available.

**All applications for positions of Law Enforcement Officer, Law Enforcement Communication Operator, or other Public Safety Position with the City of Ruidoso Downs must provide a complete Personal History Statement, Personal Integrity Questionnaire, Disclosure Affidavit, Authorization to Release Personal Information along with three letters of reference and the City application to be considered.**

The City of Ruidoso Downs appreciates your application and should you require any assistance or need answers to your questions, please do not hesitate to contact the Personnel Department at 575-378-4422, Monday through Friday, 8 a.m. to 5 p.m., 123 Downs Drive, Ruidoso Downs, New Mexico 88346.



# Application for Employment

PLEASE PRINT

Equal access to programs, services and employment is available to all persons. Those applications requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position applied for \_\_\_\_\_ Date of application \_\_\_\_/\_\_\_\_/\_\_\_\_

Referral Source  Advertisement  Employee  Relative  Government Employment Agency  
 Walk-in  Private Employment Agency  Other \_\_\_\_\_

Name \_\_\_\_\_  
LAST FIRST MIDDLE

Address \_\_\_\_\_  
STREET CITY STATE ZIP CODE

Telephone # (\_\_\_\_) \_\_\_\_\_ Cell # (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Driver's license number \_\_\_\_\_ State \_\_\_\_\_

If you are under 18 and it is required, can you furnish a work permit?  Yes  No

If no, please explain \_\_\_\_\_

Have you submitted an application here before?  Yes  No

If yes, give date(s) and position(s) \_\_\_\_\_

Have you ever been employed here before?  Yes  No

If yes, give date(s) and position(s) \_\_\_\_\_

Are you legally eligible for employment in this country?  Yes  No

Date available for work \_\_\_\_/\_\_\_\_/\_\_\_\_ What is your desired salary range? \$ \_\_\_\_\_

Type of employment desired  Full-Time  Part-Time  Temporary  Seasonal  Educational Co-Op

Will you relocate if job requires it?  Yes  No Will you travel if job requires it?  Yes  No

Are you able to meet the attendance requirements of the position?  Yes  No

Will you work overtime if required?  Yes  No

If no, please explain \_\_\_\_\_

## Employment History

Provide the following information of your past and current employers, assignments or volunteer activities, stating with the most recent (use additional sheets if necessary.) Explain any gaps in employment in comments section below.

EMPLOYER	DATES EMPLOYED		SUMMARIZE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITY
	FROM	TO	
TELEPHONE # ( )			
ADDRESS			
STARTING JOB TITLE/FINAL JOB TITLE	HOURLY RATE/SALARY STARTING		
IMMEDIATE SUPERVISOR AND TITLE	\$	PER	
REASON FOR LEAVING	HOURLY RATE/SALARY FINAL		
	\$	PER	
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			
EMPLOYER	DATES EMPLOYED		
	FROM	TO	
TELEPHONE # ( )			
ADDRESS			
STARTING JOB TITLE/FINAL JOB TITLE	HOURLY RATE/SALARY STARTING		
IMMEDIATE SUPERVISOR AND TITLE	\$	PER	
REASON FOR LEAVING	HOURLY RATE/SALARY FINAL		
	\$	PER	
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			
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IMMEDIATE SUPERVISOR AND TITLE	\$	PER	
REASON FOR LEAVING	HOURLY RATE/SALARY FINAL		
	\$	PER	
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			

Comments INCLUDING EXPLANATION OF ANY GAPS IN EMPLOYMENT

**Skills and Qualifications**

Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

**Educational Background**

A. List last three (3) schools attended starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned, if any. D. Grade Point Average or Class Rank E. Major field of study. F. Minor field of study (if applicable.)

A. SCHOOL	B. NUMBER OF YEARS COMPLETED	C. DEGREE DIPLOMA	D. GPA CLASS RANK	E. MAJOR	F. MINOR

**References**

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are not related to you.

NAME	TELEPHONE	NUMBER OF YEARS KNOWN

**Additional Information**

List professional, trade, business or civic associations and any offices held.

EXCLUDE MEMBERSHIPS THAT WOULD REVEAL RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, CITIZENSHIP, AGE, MENTAL OR PHYSICAL DISABILITIES, VETERAN/RESERVE, NATIONAL GUARD OR ANY OTHER SIMILARLY PROTECTED STATUS.

ORGANIZATION	OFFICES HELD

List special accomplishments, publications, awards, etc.

EXCLUDE MEMBERSHIPS THAT WOULD REVEAL RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, CITIZENSHIP, AGE, MENTAL OR PHYSICAL DISABILITIES, VETERAN/RESERVE, NATIONAL GUARD OR ANY OTHER SIMILARLY PROTECTED STATUS.

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List any additional information you would like us to consider.

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**Applicant Statement**

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer 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 applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

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 employer reserves the same right to terminate my employment 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 supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the Mayor.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**CITY OF RUIDOSO DOWNS  
P. O. BOX 348  
123 DOWNS DRIVE  
RUIDOSO DOWNS, NM 88346**

**AN EQUAL OPPORTUNITY EMPLOYER**

# City of Ruidoso Downs

## Police Officer

Revised: January 5, 2011

Revised: July 30, 2013

**Reports To:** Chief of Police

**Definition:** Performs law enforcement and crime prevention work including, but not limited to patrol of assigned area, apprehension and arrest of alleged violators and performance of a variety of technical and administrative tasks in support of the City of Ruidoso Downs police department. Non-Exempt FLSA.

**Essential Functions:** Essential functions, as defined under the Americans with Disabilities Act, may include the following tasks, knowledge, skills, and other characteristics. This list of tasks is ILLUSTRATIVE ONLY, and is not a comprehensive listing of all functions and tasks performed by positions in this class.

This job description has been designed to indicate the general nature and level of work performed by employees within this classification. It is not to contain or be interpreted as a comprehensive inventory of all duties and responsibilities required of the designated employee assigned to this position.

### **Tasks:**

Answers calls and complaints involving automobile accidents, domestic disputes, robberies, assaults and other misdemeanors and felonies.

Assumes control at traffic accidents to maintain flow, assist accident victims and investigates cause of accidents.

Apprehends suspects, searches, inspects, transports and takes custody of prisoners and secures the scene of crimes.

Conducts preliminary and extensive investigations, identifies and instructs witnesses, gathers information and prepares detailed reports

May be called upon to provide Drug Abuse Resistance Education (DARE) and/or Gang Resistance Education and Training (GREAT)

Identifies community problems which can be resolved through proactive measures, attends neighborhood block parties and meetings to enhance community police efforts

May be assigned as Field Training Officer for trainees upon their graduation from the basic academy

May be called upon to instruct training classes for Departmental and City Personnel

Patrols the City in a radio-equipped police unit and at times on foot to preserve law and order, enforces traffic and criminal laws

Appears in court to present evidence and testifies on behalf of the City and/or state

Maintains professional demeanor in the courtroom

Ensures that submitted evidence is properly secured and stored and readily retrievable

Responsible for knowing and abiding by all department and City policies and procedures

Performs other related duties as needed or assigned.

**Working Conditions:** while performing the duties of this job, the employee regularly works in outside weather conditions, is exposed to temperature extremes or humid conditions depending upon weather conditions, exposed to hazardous conditions such as physical confrontations, driving hazards and high speed chases, animals, gunfire rescue attempts on difficult terrain; exposed to fumes or airborne particles, stressful and dangerous situations depending on the severity of the emergency. The employee is occasionally exposed to vibration such as shotgun and/or off-road travel; toxic or caustic chemicals.

The noise level in the work environment may be moderate, however, may occasionally be loud and maybe exposed to long working hours and job induced mental stress and tension

**Physical Demands:** The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions

While performing the duties of this job, the employee regularly is required to walk or sit for long periods of time, use hands to finger, handle or feel objects, tools or controls, reach with hands and arms; talk or hear, operate a patrol vehicle with automatic transmission and other vehicles with standard transmission. The employee is occasionally required to stand; climb or balance, run stoop, kneel, crouch or crawl; bend at waist and twist/rotate waist, remain in a prone position during an emergency situation and taste or smell. Will be required to participate in physical agility test as mandated by the New Mexico Law Enforcement Academy Standards.

The employee must regularly lift and or move up to 10 pounds; carry 10 pounds on waist and 4 pounds on chest. The employee must frequently lift and/or move up to 25 pounds and occasionally lift and/or move up to 50 pounds, push and pull (with legs and/or arms) 50 pounds more of force during an emergency situation.

Specific vision abilities by this job include close vision, distance vision peripheral vision and depth perception.

**Knowledge, Skills, and Other Characteristics:** Must have knowledge of and be able to apply: Law enforcement methods, techniques and procedures including patrol crime prevention, traffic control, accident investigation, and criminal investigation and identification techniques.

Criminal law and criminal procedure involving the apprehension, arrest and custody of persons allegedly committing misdemeanors and felonies.

Evidence pertaining to the seizure and preservation of evidence, self-defense tactics.

First aid principles, practices and techniques for both the ill and injured.

Writing clear, concise and comprehensive reports.

Identifying potential crime situation(s) or traffic hazards and taking prevention action.

Analyzing situations quickly and objectively to determine the appropriate level of force to be used and when to take emergency action.

Listening and communicating effectively with others.

Learning and applying standard broadcasting procedures of law enforcement radio system, testifying in court

Use of an automobile, firearms, baton, handcuffs and other police-related equipment

Solving problems dealing with emotionally volatile issues

Operating a personal computer or computer terminal

Establishing and maintaining effective and cooperative working relationships with others

**Travel Requirements**

Normal Travel-ability to travel for activities such as meetings, classes, and workshops in and out of the area.

Overnight travel as required.

**Other Qualifications:** High school Diploma or equivalent. College degree preferred. Must be a U.S. citizen, Must be a State approved Police Academy graduate or 21 years of age and possess or be able to obtain a valid New Mexico Driver's License. Must pass background investigation, polygraph exam, firearms and drug screening. Bilingual (English and Spanish) preferred. Certification through New Mexico Law Enforcement

**Employee Declaration**

I have reviewed and understand the job functions of this position and state that I can perform these functions without accommodation: \_\_\_\_\_ Yes \_\_\_\_\_ No

If an accommodation is needed, please describe below the reasonable accommodation required for you to perform these job functions.

\_\_\_\_\_  
**Employee Signature**

\_\_\_\_\_  
**Date**

Note: Employees must sign the job description and initial all pages.



**RUIDOSO DOWNS POLICE AND FIRE DEPARTMENT  
123 DOWNS DRIVE  
RUIDOSO DOWNS, NM 88346**

**AUTHORIZATION TO RELEASE PERSONAL INFORMATION**

I, \_\_\_\_\_ on behalf of and representing myself,  
hereby authorize \_\_\_\_\_ (Leave Blank)

to release any and all information which may include, but are not limited to my financial and credit history, criminal history and information, civil actions, regulatory agency actions or allegations, and/or any other information which may be used by the Ruidoso Downs Police and Fire Department in conducting a pre-employment background investigation.

I hereby authorize any employees and/or agents to release and provide copies of any and all information that is requested and/or any records they may hold which disclose information regarding myself for purposes of this pre-employment background investigation to the Ruidoso Downs Police and Fire Department.

I hereby agree to hold harmless and forever release from liability any person, agent, employee, custodian, representative or assign for releasing this information to the Ruidoso Downs Police and Fire Department.

I hereby agree to hold harmless and forever release from liability the Ruidoso Downs Police and Fire Department and any person, agent, employee, officer, director, custodian, representative or assign of the Ruidoso Downs Police and Fire Department involved in obtaining this information and/or conducting this pre-employment background investigation.

Any duplicated, photocopied or electronically transmitted copy of this "Authorization to Release Personal Information" shall be binding and valid as the original.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF NEW MEXICO  
COUNTY OF LINCOLN

This instrument was signed and sworn to before me on \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My commission expires:

**RUIDOSO DOWNS POLICE AND FIRE DEPARTMENT**

**123 Downs Drive  
RUIDOSO DOWNS, NM 88346**

**DISCLOSURE AFFIDAVIT**

I \_\_\_\_\_, being first duly sworn, upon my oath state:

1. I understand that this Affidavit is given under oath and penalty of perjury to the Ruidoso Downs Police and Fire Department.
2. I have not been convicted of a felony criminal offense under the laws of the United States or any state, or Military laws, or the laws of any other country.
3. I have not been convicted of any offenses (felony or misdemeanor) under the laws of the United States or any state, or Military law, or the laws of any other country that would preclude me from being employed as a police officer.
4. I declare, under penalty of perjury, that the information in this Affidavit, and all other information which I have provided verbally or in writing to the Ruidoso Downs Police and Fire Department is true and correct.

I UNDERSTAND THAT ALL FACTS RECITED IN THIS AFFIDAVIT ARE SUBJECT TO INDEPENDENT VERIFICATION AND THAT IT IS BOTH A FEDERAL AND STATE OFFENSE PUNISHABLE BY A FINE, IMPRISONMENT OR BOTH, TO KNOWINGLY MAKE A FALSE STATEMENT IN THIS AFFIDAVIT.

I FURTHER UNDERSTAND THAT FALSIFICATION OF THIS AFFIDAVIT, OR FALSIFICATION OF ANY INFORMATION WHICH I HAVE PROVIDED TO THE RUIDOSO DOWNS POLICE AND FIRE DEPARTMENT, IN ANY WAY, MAY RESULT IN (1) DENIAL OF EMPLOYMENT WITH THE RUIDOSO DOWNS POLICE AND FIRE DEPARTMENT, AND (2) DISCIPLINARY ACTION AND/OR TERMINATION FROM EMPLOYMENT IF I AM HIRED BY THE RUIDOSO DOWNS POLICE AND FIRE DEPARTMENT.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF NEW MEXICO)  
COUNTY OF LINCOLN)

This instrument was signed and sworn to before me on \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My commission expires:

\_\_\_\_\_

# RUIDOSO DOWNS POLICE AND FIRE DEPARTMENT PERSONAL INTEGRITY QUESTIONNAIRE

**Read the following instructions CAREFULLY!!**

**DIRECTIONS:** This questionnaire is designed to acquaint you with certain standards, which **MAY OR MAY NOT DISQUALIFY YOU AS A CANDIDATE DURING THIS PART OF THE PROCESS.**

Your **truthful** responses to the following questions and during the follow up interview will help to evaluate your chances and ability in continuing the selection process. Recruiting of all candidates is done without regard to race, color, national origin, ancestry, sex, age, religion or disability, in the provision of services, programs or activities. The Ruidoso Downs Police and Fire Department is an Equal Opportunity/Reasonable Accommodation Employer.

All answers on this and other forms may be subject to verification by an intense background investigation. Deliberate inaccuracies, incomplete statements, minimization, rationalizations, omissions and/or misstatements must be corrected. If they are not, it may result in your disqualification from the selection process or termination from employment if hired. It is to your advantage to respond **honestly** and **openly** to all of the following questions. Any negative factors in your background will be evaluated in terms of circumstances and facts surrounding the occurrence and its degree of relevance to the job.

The Ruidoso Downs Police and Fire Department is looking for mature, honest people who can admit their mistakes and discuss those mistakes honestly. For example, being fired from a job or having an arrest record is not, in itself, grounds for disqualification in many cases. During your interview, your background investigator will inquire into the facts surrounding the event. An evaluation will be made of the relevance of the facts to the requirements and guidelines of the job. It is your responsibility to be truthful. A negative factor in your background may not terminate you from the process; being dishonest about the negative factor will. **Be honest.** If you feel some event in your background is indirectly related to your application, even though it is not specifically listed, then disclose it. Save yourself a great deal of time, money, energy and effort if you know you will have to lie at any stage of the application process. It is your responsibility to ask for clarification of any question or word that is not perfectly clear and understandable to you. Unless otherwise stated, each question refers to anytime, any reason, any place, anywhere, at any age, in any jurisdiction, in civilian or military life, domestic or abroad, or on any military installation, base, or federal land. **IT IS YOUR RESPONSIBILITY TO BE HONEST AND TRUTHFUL.**

Please fill out this form in **BLACK INK** only. It is your responsibility to write clearly and legibly. If we cannot read it, the public will not be able to read your police report either. Remember that neatness in writing, grammar, punctuation, spelling, clarity, and ability to follow written instructions are all evaluated as part of the Selection Process. The time limit to complete this questionnaire is no more than one week from the date it was given to you. If you require more time to complete this questionnaire you must coordinate with your background investigator.

You **will** need to write a short narrative to **FULLY EXPLAIN EACH "YES" ANSWER.** Make sure your writing is clear and legible. In your narrative, answer the relevant questions of Who, What, When, Where, Why, How, How Often, etc. as each question requires. Write your narrative in **BLACK INK ONLY.** Again, it is important that your answers are honest, as the extensive background investigation will verify the information you provide.

Make sure you include sufficient detail in your report that your background investigator can read and fully understand the circumstances of what happened, when and why.

Regarding any **DRUG AND SUBSTANCE EXPERIMENTATIONS**, make sure you list the dates first used and last used. Don't rationalize or minimize the facts. If you can't remember the exact dates, put down the month and year to the best of your recollection. If you need more room to write on any given page, continue writing on a separate sheet of paper. You will be informed what the next stage of the selection process will be. Thank you for your time, patience and cooperation in this matter.

**QUALIFICATIONS:**

Are you applying for a police officer or firefighter position? YES NO

If yes, complete the following questions:

- 1. Are you currently at least 21 years of age? YES NO
- 2. Do you have any felony convictions or arrests? YES NO
- 3. Do you have any D.W.I. arrests within the last three (3) years in any jurisdiction? YES NO
- 4. Do you have any misdemeanor arrests or citations, excluding traffic within the last three (3) years, for any reason in any jurisdiction? YES NO
- 5. Are you currently a United States Citizen? YES NO
- 6. Do you currently have a valid driver's license? YES NO
- 7. If you have prior military service in any branch and you have been discharged was the discharge listed on your separation papers (DD-214) characterized as honorable? YES NO

Do you have MILITARY experience? YES NO

If yes, complete the following questions:

-Have you ever been a member of any branch of the armed forces, or are you currently serving in any branch of the armed services? YES NO

Which Branch(s): \_\_\_\_\_ Pay grade last promoted to: \_\_\_\_\_

Date first reported to active duty: \_\_\_/\_\_\_/\_\_\_ Date of discharge: \_\_\_/\_\_\_/\_\_\_

\*If you are currently serving (whether active duty, active reserve, or guard) at what date do you expect to complete your obligation or when do you intend to resign your commission? \_\_\_/\_\_\_/\_\_\_?

List the total time you have in service: (include active-duty, active-reserve and guard service together) \_\_\_\_\_ years.

What was your military specialty in civilian terms: \_\_\_\_\_

\_\_\_\_\_

-Did you ever fail any term or condition of your enlistment for any reason? YES NO

Character of discharge received: (circle correct one)

HONORABLE MEDICAL GENERAL DISHONORABLE

-Were you ever declared U.A., A.W.O.L., or Missing Ships Movement? YES NO

-While in the military did you ever receive any punishment that resulted in a written reprimand, demotion, suspension, reduction in rank, being relieved of duty, loss of pay or confinement? (This includes such things as Article 15's, Page 11's, Captain Mast's, Company punishments, Court Marshal's, written counseling statements, etc.) YES NO

**Personal Integrity Questionnaire continued:**

If you have answered **YES** to any of the above military questions, please briefly explain the circumstances here:

**RESPONSE TO QUESTION:**

# \_\_\_\_\_  
# \_\_\_\_\_

**EVENT HISTORY SECTION:**

Please answer YES or NO to each of the following questions. Each question is asking if at anytime, anyplace, anywhere, at any age, for any reason, both in civilian life or in military life, domestic or abroad, have you ever committed any of the following acts. It does not matter if the act was detected, undetected, was reported or unreported, investigated, discovered, or if anyone was questioned or arrested. The question is simply asking you if you have ever committed this particular act. It is to your benefit to be honest! Examples refer to things that have occurred other than in the line of duty for the job you were in at that time. **WE DO EXPECT EVERYONE TO ANSWER ALL OF THE QUESTIONS HONESTLY.** This section is also designed to measure your reading and comprehension ability, your vocabulary and ability to follow written directions correctly. If you have any question or don't understand any of the following words or ideas, please contact your background investigator for assistance.

**DRUG USE AND EXPERIMENTATION:**

Have you ever experienced at any time, even once with any of the below listed substances for any reason? 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, inhaled or not. Answer each of the questions truthfully *YES or NO*. Do not minimize or rationalize the facts. If you don't know the exact date put down the approximate month and year as best you can recall, answer either *YES or NO*.

1. \_\_\_ Marijuana, pot, grass weed, etc.

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

2. \_\_\_ Hash, hash oil, hashish, etc.

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

3. \_\_\_ Cocaine, crack, rock, snow, blow, etc.

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

# \_\_\_\_\_  
# \_\_\_\_\_  
# \_\_\_\_\_  
# \_\_\_\_\_  
# \_\_\_\_\_

4. \_\_\_ Barbiturates, downers, etc.

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

5. \_\_\_ Amphetamines: uppers, speed, meth, crack, white crosses, etc.

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

**Personal Integrity Questionnaire continued:**

6. \_\_\_ Heroin, black tar heroin, horse, H, etc.

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

7. \_\_\_ LSD, Blotter Acid, any other hallucinogenic drug not listed.

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

8. \_\_\_ PCP, Angel Dust

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

9. \_\_\_ THC, opium, morphine

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

10. \_\_\_ Mushroom, Peyote

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

11. \_\_\_ Quaaludes, Ecstasy, Extasy, etc.

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

12. \_\_\_ Steroids, injected or oral

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

Total number of single injections or pills taken, not number of cycles!

13. \_\_\_ Inhaled any paint, glue, solvents, gases for the sole purpose of getting high?

Type used: \_\_\_\_\_

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

**RESPONSE TO QUESTIONS:**

- # \_\_\_\_\_
- # \_\_\_\_\_
- # \_\_\_\_\_
- # \_\_\_\_\_
- # \_\_\_\_\_
- # \_\_\_\_\_
- # \_\_\_\_\_

14. \_\_\_ Poppers, amityl nitrate, "Rush", etc. (Inhaled)

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

15. \_\_\_ Any other illegal substance not listed?

Type: \_\_\_\_\_

Date FIRST used: \_\_\_\_\_ LAST used: \_\_\_\_\_

16. \_\_\_ Ever abuse any prescription or over the counter drugs, made out to you or anyone else, for the sole purpose of getting "HIGH" or for its effect. Included are drugs such as Valium, Xanax, Codeine, Methadone, Dilauude, Demerol, drinking Listerine, Mouthwash, Cologne, etc.

17. \_\_\_ Ever purchased any narcotics, illegal drugs, steroids or marijuana without a doctor's prescription for you or anyone else? Includes giving someone else money to purchase them for you or to defray the costs, chip in, etc.

18. \_\_\_ Ever used any illegal drugs or narcotics on any job or gone to work under the influence of any illegal drug or narcotic?

19. \_\_\_ Ever sold any illegal or counterfeit drug, including marijuana? (Means received anything of value for it such as a favor, mechanical work, money, goods, sex, travel, food, gas etc.)

20. \_\_\_ Ever manufactured or cultivated any illegal drug or narcotic, including marijuana?

21. \_\_\_ Currently associate with anyone who uses any illegal drug(s) while in your presence?

22. \_\_\_ Ever sold or traded anything of value, OTHER THAN MONEY, to purchase any illegal drugs, including marijuana?

**RESPONSE TO QUESTIONS:**

# \_\_\_\_ . \_\_\_\_\_  
# \_\_\_\_ . \_\_\_\_\_  
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# \_\_\_\_ . \_\_\_\_\_

**CRIMINAL EVENTS**

23. \_\_\_ Ever been placed into PROTECTIVE CUSTODY for any reason?

24. \_\_\_ Ever committed a burglary such as residential, auto or commercial? (Includes entry into any building, structure, vehicle, watercraft, etc., to commit any theft or other crime.)

25. \_\_\_ Ever received or sold any property you knew or suspected was stolen?

26. \_\_\_ Ever committed any theft, larceny or shoplifting?

27. \_\_\_ Ever committed any murder or manslaughter, voluntary or involuntary?

28. \_\_\_ Ever committed any auto theft, including taking an automobile for joy riding?

29. \_\_\_ Ever been a suspect in a crime, stopped or detained and questioned reference any crime?

30. \_\_\_ Ever forged any checks, credit cards, or prescriptions with the purpose of defrauding? (Convert anything to your own personal use)

31. \_\_\_ Ever been arrested, either as an adult or as a juvenile, for any reason in any Jurisdiction?

32. \_\_\_ Ever smuggle any contraband into any jail or correctional facility?



33. \_\_\_ Ever committed any aggravated assault or battery against another person? (Means used any weapon or threatened to use a weapon against another person).
34. \_\_\_ Ever committed any act of physical domestic abuse against another person with whom you had been in or with whom you are in a relationship with, such as a boyfriend/girlfriend, husband, wife, significant other? (This includes any slap, hit, punch, kick, pinch, shove, push, jab, poke or other serious, painful or violent physical contact for any reason.)
35. \_\_\_ Ever committed any act of bombing or dangerous use of explosives? (Includes pipe bombs, M-80's, etc.)
36. \_\_\_ Ever issued any 'NO ACCOUNT' checks? (on any already closed account or on a false account in your or any other name?)
37. \_\_\_ Ever committed any act of graffiti, vandalism, criminal damage to private or public property, including any automobile?
38. \_\_\_ Ever offered or accepted any bribe for any reason?
39. \_\_\_ Ever committed any arson or negligent use of fire? (Intentionally set any fire)
40. \_\_\_ Ever eluded any police officer, either on foot or in a vehicle?
41. \_\_\_ Ever committed any act of kidnapping, false imprisonment, or custodial interference?
42. \_\_\_ Ever counterfeited any money or currency? (Includes Xeroxing.)
43. \_\_\_ Ever made any obscene, harassing, threatening, annoying, intimidating phone calls or any false bomb threats for any reason?
44. \_\_\_ Ever committed any hunting, fishing, or boating violations?
45. \_\_\_ Ever carried any unlawful deadly weapon into any bar or on school premises, other than in the line of duty?
46. \_\_\_ Ever carried any weapon on your person or in your vehicle for you own personal protection?
47. \_\_\_ Ever failed to file an income tax report, federal or state?
48. \_\_\_ Ever been forced to pay any back taxes or tax penalties for any reason, anywhere, anytime, business or personal?
49. \_\_\_ Ever shot at any uninhabited/inhabited dwelling, building, vehicle or at a person, other than in the line of duty?
50. \_\_\_ Ever impersonated a police officer for any reason?
51. \_\_\_ Ever altered or possessed a false identification (I.D.)? (Includes driver's license birth certificate, etc.)
52. \_\_\_ Ever forged another person's signature of any Bill of Sale?
53. \_\_\_ Ever obstructed or refused to obey any police officer?

**Personal Integrity Questionnaire continued:**

54. \_\_\_ Ever committed any act of perjury, lying under oath, either in writing or orally, at any hearing, criminal case or civil suit?
55. \_\_\_ Ever failed to return any rental property such as tapes, tools, equipment or vehicles?
56. \_\_\_ Ever made a false police or insurance report for any reason?
57. \_\_\_ Ever been the target or subject of any Grand Jury Investigation?
58. \_\_\_ Ever knowingly committed any Federal Firearms violation? (Includes automatic weapons, silencers, armor piercing rounds, etc.)
59. \_\_\_ Ever committed any act of sabotage or espionage against the United States?
60. \_\_\_ Ever committed blackmail, mail fraud or extortion?
61. \_\_\_ Ever altered any vehicle V.I.N. (Vehicle Identification Number) for any reason?
62. \_\_\_ Ever falsely obtained any service such as food, utilities, motel, gas, cable TV or garbage without paying for it?
63. \_\_\_ Ever illegally fire any firearm or a BB or pellet gun?
64. \_\_\_ Ever obtained welfare or public assistance benefits to which you were not entitled, such as unemployment, aid for dependent children or food stamps?
65. \_\_\_ Ever aided or concealed any wanted felon from any police agency?
66. \_\_\_ Ever been the subject of any restraining order?
67. \_\_\_ Ever caused the death of another, either intentionally or unintentionally?
68. \_\_\_ Ever been the subject of any arrest warrant? (Juvenile, traffic, misdemeanor, felony, federal, parking warrant etc.)
69. \_\_\_ Ever been the subject of any search warrant?
70. \_\_\_ Ever committed any robbery? (Theft from someone using a weapon, implying a weapon or otherwise using any force?)
71. \_\_\_ Ever purposely provided any false information to any police officer such as a false date of birth, false social security number, name, address, phone number, event or crime facts, etc
72. \_\_\_ Other than traffic, have you ever been issued any misdemeanor citation for any reason? (minor in possession of alcohol, trespassing, loitering, littering shoplifting, open container of alcohol, etc.)
73. \_\_\_ Ever been required to appear before any Children's or Juvenile court as a defendant for any reason?
74. \_\_\_ Ever committed any act of embezzlement? (Includes any theft from any employer, including money or merchandise, or converting anything entrusted to you to your own use.)
75. \_\_\_ Ever been placed on court probation either as an adult or as a juvenile? (Includes doing any community service for any reason, in any state?)

Personal Integrity Questionnaire continued:

76. \_\_\_ Ever been paroled or are you currently serving parole or probation?
77. \_\_\_ Ever been a 'lookout', 'get-away driver' or in any way aided in any illegal act or crime?
78. \_\_\_ Ever reported or made a false fire alarm? (Includes pulling fire alarm.)
79. \_\_\_ Ever tampered with any evidence for any reason, in any type of case?

**RELATIONSHIP EVENTS:**

80. \_\_\_ Ever committed any forcible or criminal sex act, other than rape, against another person? (Includes oral copulation, masturbation, sodomy, etc., against someone's will.)
81. \_\_\_ Ever committed any act of rape or criminal sexual contact of another? (Any sexual intercourse or fondling by use of force or implying any weapon?)
82. \_\_\_ Ever contributed to the delinquency of any minor by providing any liquor or illegal drugs, or for having sex with? (Minor means anyone under the age of 18.)
83. \_\_\_ Ever patronized or procured any prostitute in any country?
84. \_\_\_ Ever committed any act of prostitution? (performed any sex act for anything of value such as money, goods, favors, food, discounts, drugs, travel, lodging, alcohol, mechanical work, services, etc.)
85. \_\_\_ Ever committed any act of indecent exposure, incest or forcible sodomy?
86. \_\_\_ Ever physically abused or sexually molested any child?
87. \_\_\_ Have you ever physically or sexually abused or molested any mentally or physically handicapped or elderly person? (Includes the blind, deaf, mute, Down's Syndrome, Muscular Sclerosis, Muscular Dystrophy, etc.)
88. \_\_\_ Have you ever committed any act of voyeurism at anyone undressing or involved in any sexual activity?

**JOB AND WORK HISTORY:**

89. \_\_\_ Ever been suspended or expelled from any school, high school, trade school, community college, college, university, vocational or technical school for any reason?
90. \_\_\_ Ever drank any alcoholic beverages during working hours contrary to any company policy?
91. \_\_\_ Ever sued any employer, past or present, in any civil action for any reason?
92. \_\_\_ Ever received counseling, a written reprimand, been suspended or relieved of duty for any reason at any job you have ever had?
93. \_\_\_ Ever been fired from, given the option of resigning or resigned to avoid termination from any job?
94. \_\_\_ Ever been refused a security clearance or have lost a security clearance at any job you have worked, or lied or misrepresented any fact in any application or process to secure a security clearance?

**TRAFFIC RELATED EVENTS:**

95. \_\_\_ Ever been involved in a traffic accident in which you were the driver, during the last three(3)years?  
(Includes reported, unreported, hit and run, military, on public or private property.)
96. \_\_\_ Ever received any traffic citations in the last three (3) years? (Includes any parking citations, dismissed citations, military police citations, warning citations, etc.)
97. \_\_\_ Ever had your driver's license suspended, revoked or placed on negligent operator status for any reason in any state?
98. \_\_\_ Are any vehicles currently registered to you not insured for any reason?
99. \_\_\_ Have you ever had a driver's license issued to you other than by the State of New Mexico? (List all state licenses issued, dates licensed, and license number if known.)
100. \_\_\_ Ever committed a hit and run accident on either public or private property? (Includes Military bases, parking lots, etc.)
101. \_\_\_ Do you currently possess a valid driver's license? (List state(s), license number and expiration date.)
102. \_\_\_ Ever been arrested for driving while intoxicated in any jurisdiction?

**FINANCIAL EVENTS:**

103. \_\_\_ Ever declared bankruptcy? (Chapter #7, #11, #13, etc.)
104. \_\_\_ Ever been referred to any collection agency?
105. \_\_\_ Ever had any purchased goods repossessed?
106. \_\_\_ Ever had your wages garnished or any liens placed on any property?
107. \_\_\_ Do you have any unpaid balances on loans, including student loans and credit cards, mortgages, etc., (if you have a mortgage list the approximate balance and monthly payment. For all other loans, list the approximate balance for the loan(s) and the approximate total of the monthly payment(s) required.
108. \_\_\_ Ever been a defendant, petitioner, respondent, or plaintiff in any civil action case? (Refers to any hearings or cases other than of a criminal nature, such as being sued.)
109. \_\_\_ Ever been more that 60 days late in paying any financial responsibility?
110. \_\_\_ Ever failed to pay any child support, alimony, or divorce settlement payments?
111. \_\_\_ Ever gotten into serious financial difficulties?

**PREVIOUS RESIDENCES:**

112. \_\_\_ Ever been evicted from any place you have ever lived? (Includes failing to pay any rent, lease violation, or moving out "in the middle of the night" to avoid rent.)

**Personal Integrity Questionnaire continued:**

**MISCELLANEOUS ISSUES:**

113. \_\_\_ Ever been involved in a physical fight in the last three (3) years?
114. \_\_\_ Ever been a member of, or had any gang affiliations?
115. \_\_\_ Ever committed any animal control violation such as cruelty to, abandonment or death of any domestic animal or been issued a citation or written warning for any other related animal violation that includes: loose animal, barking dog, animal license violation, animal registration, vaccination, spaying, neutering.
116. \_\_\_ Ever been investigated or sued for any Civil or Federal Rights violations?
117. \_\_\_ Ever been the subject of any voice stress analysis or polygraph examination?
118. \_\_\_ Ever changed your name or used another person's name for any reason?
119. \_\_\_ Do you currently have any prejudices against any specific group of people with whom, or for whom you feel you would not be able to comfortably work with or for?
120. \_\_\_ Ever violated a court order of any kind or been held in contempt of court for any reason?
121. \_\_\_ Ever applied to any other law enforcement or corrections agencies? This includes any local, state, or federal agencies, including the Ruidoso Downs Police and Fire Department. (Apply means obtaining the initial application, filling it out and sending it back.) (List agencies, dates applied, and dispositions.)
122. \_\_\_ Ever committed any dishonest act in any police selection process to remain a candidate such as cheating, lying, having another person take a test for you, provide false documents etc.
123. \_\_\_ Ever attended or participated in any cock or dog-fighting event?
124. \_\_\_ Ever failed any background investigation for any law enforcement position or agency?
125. \_\_\_ Are you currently awaiting any court date(s) for any reason?
126. \_\_\_ Have you ever been placed in a pre-prosecution program by any court, judge or court official for any reason?
127. \_\_\_ Ever altered any serial number or ID marks for any reason?
128. \_\_\_ Ever smuggled, transported or concealed illegal aliens?
129. \_\_\_ Have you ever been a member of any radical organization such as the KKK, Aryan Brotherhood, Skin Heads, Black Panthers, IRA, or any other organization that targets any ethnic, racial or religious groups?
130. \_\_\_ Have you ever participated in any physical abuse or threatened any person(s) based solely on their perceived sexual orientation, or cultural differences?
131. \_\_\_ Is there anything else about your background that needs to be revealed or disclosed that may be relevant to your application?

**Personal Integrity Questionnaire continued:**

**RESPONSE TO QUESTIONS:**

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**RESPONSE TO QUESTIONS:**

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Now that you are through answering all of the above questions, take a minute and go through to **MAKE SURE YOU HAVE ANSWERED ALL OF THE QUESTIONS, NO SINGLE QUESTION MAY BE LEFT UNANSWERED.** Once this is done, go through the questions again and make sure you have explained all the YES answers.

**READ AND SIGN:**

I have read the above questions thoroughly and completely. I understand the above questions and have answered them truthfully. I agree to this statement of my own free will and have not been subject to any mental or physical force or coercion of any kind. I am aware that any falsification or omission of any true information made on this questionnaire may cause my name to be removed from the eligibility list, or be the cause of immediate dismissal if any employment has been made. I know and understand what I am doing.

**I FULLY UNDERSTAND THE INFORMATION I HAVE PROVIDED WILL BE VERIFIED BY USE OF THE POLYGRAPH AND/OR VOICE STRESS ANALYZER AND AN EXTENSIVE BACKGROUND INVESTIGATION BY THE RUIDOSO DOWNS POLICE AND FIRE DEPARTMENT.**

**I AM AWARE THAT MY FINGERPRINTS WILL BE USED TO RUN A NATIONAL CRIMINAL BACKGROUND CHECK.**

Candidates Printed Name Date

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Candidates Signature

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# **RUIDOSO DOWNS POLICE AND FIRE DEPARTMENT**

## **Personal History Statement Instructions**

The attached "Personal History Statement" is an important document in the processing of your application for the position of Law Enforcement Officer, Law Enforcement Communications Operator, or other Public Safety Position with the Ruidoso Downs Police and Fire Department. If this form is not completed properly and legibly, your application for the position in which you are applying may not proceed any further. It is your responsibility to read and answer each question carefully, completely, and truthfully.

You must return the completed Personal History Statement and any other required documents in person within one week of the date it was given to you. If there is a problem in meeting this deadline you must contact the designated person on page three (3) to make other arrangements. If you reside out of town or out of state it is your responsibility to make the necessary arrangements to return these documents.

### Important Note:

Incomplete information in any area of this packet will result in halting the processing of your application and you will not continue in the selection process until the missing information is provided.

This is not an offer, contract, or condition of employment by the Ruidoso Downs Police and Fire Department and nothing contained herein constitutes any offer, contract, or condition of employment.

## Please Read Carefully:

Do not misstate or omit facts when completing your Personal History Statement, Personal Integrity Questionnaire, other documents, or during any interviews that may be conducted. Information and statements made on any documents are subject to and will be verified in determining your qualifications for employment.

This information must be filled out by **YOU** and no one else.

Print all answers in BLACK ink.

Print legibly.

If you need additional space to explain information, use a full-size white sheet of paper and leave a minimum margin of one inch at the top, bottom, and both sides. Be sure to list the question and/or item number to the left of each explanation when you are answering with this additional information.

Answer every question. If the information requested does not apply to you, print "N/A" in the blank space provided.

If you cannot remember, or do not know the requested information, print "I can't remember" or "I don't know" in the blank space provided. **DO NOT** use this as a crutch, make ALL attempts to gather and/or locate the requested information you are lacking including but not limited to; current phone numbers, addresses, and time frames.

**ALL** forms must be complete, signed, and if indicated, notarized. This is your responsibility to complete all information as requested.

You must also bring with you copies of the following documents when you return your Personal History Statement, Personal Integrity Questionnaire, and all other documents in this packet.

- Birth Certificate Original or Certified Original Copy from the issuing state (hospital or religious birth records do apply)
- High School Diploma or GED
- College degree diploma and OFFICIAL COPIES of transcripts
- DD-214 (pages 1 and 4) Military Only
- Any training certificates which pertain to law enforcement
- Disposition of any arrest(s)
- Drivers License
- Social Security Card
- Credit Report (No older than 30 days when PHS submitted)
- Copy of Marriage License / Divorce Decree
- Licensures, Business Licenses (past or present), State Tax Certificate and Number

If you have any problems, questions, delays in obtaining requested records, or are not sure what information you should list do not hesitate in contacting the below listed person.

Contact Name: Donna Miller, Payroll/Personnel

Contact Number(s): (575) 378-4422 ext. 6 or (575) 973-0415

Best Contact Hours: Monday through Friday, 8 am to 5 pm

I have read and understand the above instructions and will comply with all instructions herein.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

All information obtained during the background investigation of your personal history may be used as a basis of questioning during the oral interview and polygraph and/or voice stress examination with the background investigator.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

## Personal History Statement

1. \_\_\_\_\_  
Full Legal Name (Last) (First) (Middle)
2. \_\_\_\_\_  
Other Names You Have Been Known By or Used (Maiden, Aliases, Nicknames)  
\_\_\_\_\_
3. \_\_\_\_\_  
Current Residence Address (Number, Street, Apt.#,) City State Zip Code
4. \_\_\_\_\_ / \_\_\_\_\_  
How long at current address? Do You- Own, Rent, Other (explain other)
5. \_\_\_\_\_  
Mailing Address (if different than residential address)
6. \_\_\_\_\_  
Phone Numbers (Including Area Code) for Residence, Cell, Work, Other
7. \_\_\_\_\_ / \_\_\_\_\_  
E-Mail Address(s) Internet Screen Name(s)
8. \_\_\_\_\_ / \_\_\_\_\_  
Date of Birth (Month, Day, Year) Place of Birth (City, County, State, Country)
9. \_\_\_\_\_ / \_\_\_\_\_ / YES NO  
Social Security Number(SSN) State in which issued if known Have you ever used any other SSN
10. \_\_\_\_\_  
Current Drivers License Number, State, Expiration Date  
\_\_\_\_\_  
Other states in which you have held drivers licenses
11. \_\_\_\_\_ / \_\_\_\_\_  
Are you a U.S. Citizen or a Naturalized Citizen If Naturalized, list city and state where naturalized and Naturalization Number

**12. Past Residences in Chronological Order (Present to Past)**

**List each place of residence back to age 18**

\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR (number, street, apt.#)      City      State      Zip Code

\_\_\_\_\_  
Name of person lived with, relationship, and his/her address and phone number if applicable



\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR (number, street, apt.#)      City      State      Zip Code

\_\_\_\_\_  
Name of person lived with, relationship, and his/her address and phone number if applicable



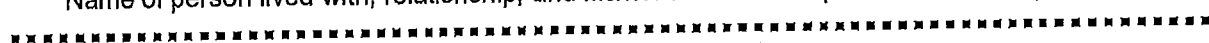
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MO/YR to MO/YR (number, street, apt.#)      City      State      Zip Code

\_\_\_\_\_  
Name of person lived with, relationship, and his/her address and phone number if applicable



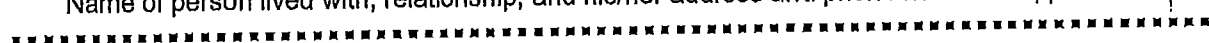
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MO/YR to MO/YR (number, street, apt.#)      City      State      Zip Code

\_\_\_\_\_  
Name of person lived with, relationship, and his/her address and phone number if applicable



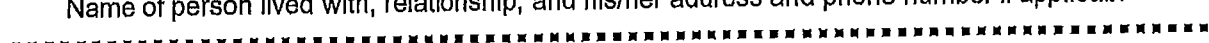
\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR (number, street, apt.#)      City      State      Zip Code

\_\_\_\_\_  
Name of person lived with, relationship, and his/her address and phone number if applicable



\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR (number, street, apt.#)      City      State      Zip Code

\_\_\_\_\_  
Name of person lived with, relationship, and his/her address and phone number if applicable



\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR (number, street, apt.#)      City      State      Zip Code

\_\_\_\_\_  
Name of person lived with, relationship, and his/her address and phone number if applicable



**13. Past Employment in Chronological Order (Present to Past)**  
**List each place of employment back to age 18**

MO/YR to MO/YR	Employer Name	Employer Phone #		
Employers Address (number, street)	City	State	Zip Code	
Position Held	Description of Duties			
Immediate Supervisor & Current Phone #		Co-Worker & Current Phone #		
Reason for Leaving				



MO/YR to MO/YR	Employer Name	Employer Phone #		
Employers Address (number, street)	City	State	Zip Code	
Position Held	Description of Duties			
Immediate Supervisor & Current Phone #		Co-Worker & Current Phone #		
Reason for Leaving				



MO/YR to MO/YR	Employer Name	Employer Phone #		
Employers Address (number, street)	City	State	Zip Code	
Position Held	Description of Duties			
Immediate Supervisor & Current Phone #		Co-Worker & Current Phone #		
Reason for Leaving				



MO/YR to MO/YR	Employer Name	Employer Phone #		
Employers Address (number, street)	City	State	Zip Code	
Position Held	Description of Duties			
Immediate Supervisor & Current Phone #		Co-Worker & Current Phone #		
Reason for Leaving				

\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      Employer Name                      Employer Phone #  
\_\_\_\_\_  
Employers Address (number, street)                      City                      State                      Zip Code  
\_\_\_\_\_  
Position Held                      Description of Duties  
\_\_\_\_\_  
Immediate Supervisor & Current Phone #                      Co-Worker & Current Phone #  
\_\_\_\_\_  
Reason for Leaving



\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      Employer Name                      Employer Phone #  
\_\_\_\_\_  
Employers Address (number, street)                      City                      State                      Zip Code  
\_\_\_\_\_  
Position Held                      Description of Duties  
\_\_\_\_\_  
Immediate Supervisor & Current Phone #                      Co-Worker & Current Phone #  
\_\_\_\_\_  
Reason for Leaving



\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      Employer Name                      Employer Phone #  
\_\_\_\_\_  
Employers Address (number, street)                      City                      State                      Zip Code  
\_\_\_\_\_  
Position Held                      Description of Duties  
\_\_\_\_\_  
Immediate Supervisor & Current Phone #                      Co-Worker & Current Phone #  
\_\_\_\_\_  
Reason for Leaving



\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      Employer Name                      Employer Phone #  
\_\_\_\_\_  
Employers Address (number, street)                      City                      State                      Zip Code  
\_\_\_\_\_  
Position Held                      Description of Duties  
\_\_\_\_\_  
Immediate Supervisor & Current Phone #                      Co-Worker & Current Phone #  
\_\_\_\_\_  
Reason for Leaving

## 14. Educational History

### High Schools Attended

(If you received a G.E.D. list High Schools attended prior to G.E.D. program)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      School Name                      Grade Completed

\_\_\_\_\_  
City                      State

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      School Name                      Grade Completed

\_\_\_\_\_  
City                      State

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      School Name                      Grade Completed

\_\_\_\_\_  
City                      State

### If you Received a G.E.D.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      Agency/School Name                      Date Completed

\_\_\_\_\_  
City                      State

### College or University Studies

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      School Name                      # Credit Hours Completed

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
City                      State                      Major                      YES/NO  
Degree Received

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      School Name                      # Credit Hours Completed

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
City                      State                      Major                      YES/NO  
Degree Received

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      School Name                      # Credit Hours Completed

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
City                      State                      Major                      YES/NO  
Degree Received



**Other Schools** (Vocational, trade, other submit certificates)

MO/YR to MO/YR	School Name		
City	State	Subject	YES/NO Certificate Received
MO/YR to MO/YR	School Name		
City	State	Subject	YES/NO Certificate Received
MO/YR to MO/YR	School Name		
City	State	Subject	YES/NO Certificate Received

**Other School/Education Information**

15. Was any disciplinary action taken against you while attending High School, Colleges, Universities, Vocational or Trade Schools, or any other type of Educational Institution; to include, but not limited to, dismissal, suspension, scholastic probation, or any other type of actions.

YES \_\_\_ NO \_\_\_

Action(s) and Reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Military History** (if applicable)

16. Have you ever served in any branch of the Armed Forces of the United States or any other country?

YES \_\_\_ NO \_\_\_ (if no, go to question #20)

\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      Branch                      Unit      (Medical Corps, Engineers, Infantry, etc.)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Serial Number                      Discharge Date                      Type of Discharge

\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      Branch                      Unit      (Medical Corps, Engineers, Infantry, etc.)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Serial Number                      Discharge Date                      Type of Discharge

\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      Branch                      Unit      (Medical Corps, Engineers, Infantry, etc.)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Serial Number                      Discharge Date                      Type of Discharge

\_\_\_\_\_/\_\_\_\_\_  
MO/YR to MO/YR                      Branch                      Unit      (Medical Corps, Engineers, Infantry, etc.)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Serial Number                      Discharge Date                      Type of Discharge

17. Were you ever Court Marshaled, tried on charges, been the subject of a Summary Court, Captains Mast, Company Punishment, Article 15, or any other types of charges or discipline?

YES \_\_\_ NO \_\_\_

Action(s) and Reason: (including any type of discharge other than HONORABLE)

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18. Are you currently a member of the Active Reserves or National Guard?

YES \_\_\_ NO \_\_\_

Branch	Unit (Medical Corps, Engineers, Infantry, etc.)	City	State
C.O. Name	Current Phone #	Immediate Superior Name	Current Phone #

19. Are you registered for the Selective Service? YES \_\_\_ NO \_\_\_

Selective Service Number \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

**Financial History**

20. What types of payments do you currently make? (Check all those that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Home Mortgage            | <input type="checkbox"/> Bank Loans                   |
| <input type="checkbox"/> Rent                     | <input type="checkbox"/> Owe Money to Family, Friends |
| <input type="checkbox"/> Home Improvement         | <input type="checkbox"/> Court Judgments              |
| <input type="checkbox"/> Auto Loans               | <input type="checkbox"/> Child Support                |
| <input type="checkbox"/> Finance Co. Loans        | <input type="checkbox"/> Alimony                      |
| <input type="checkbox"/> Charge Accounts (stores) |   |
| <input type="checkbox"/> Credit Cards             |   |
| <input type="checkbox"/> Other, Specify _____     |   |

21. What are your total monthly payment obligations? (including utilities) \$ \_\_\_\_\_

22. Are there any creditors pressing you for payments? YES \_\_\_ NO \_\_\_

If Yes, list creditor names and reasons why: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

23. Have any of your accounts (past and present) ever been placed in the hands of a collection agency or charged off?

YES \_\_\_ NO \_\_\_

If Yes, list creditor names and reasons why: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_







35. Do you possess a current drivers license?

YES \_\_\_\_\_ NO \_\_\_\_\_ (If Yes, list all information below)

DL Number	State	Type of License (regular, chauffer, Commercial, etc.)	Status
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DL Number	State	Type of License (regular, chauffer, Commercial, etc.)	Status
-----------	-------	---	--------

DL Number	State	Type of License (regular, chauffer, Commercial, etc.)	Status
-----------	-------	---	--------

36. List below all vehicles which you are the primary or secondary driver:

Make	Model	Year	License #	Insurance Company	Current Yes/No
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Make	Model	Year	License #	Insurance Company	Current Yes/No
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Make	Model	Year	License #	Insurance Company	Current Yes/No
------	-------	------	-----------	-------------------	----------------

37. Have you ever been refused vehicle insurance, determined not to be insurable, or your insurance cancelled?

YES \_\_\_\_\_ NO \_\_\_\_\_ (If Yes, list date, reason why, insurance company name, location)

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38. If you do not currently have liability insurance on a vehicle that you own or co-own give reason(s) why not:

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39. Since you have been driving, list the number of accidents you have been involved in as a driver?

Total Number Accidents \_\_\_\_\_

Date	Location City/State	Whose Fault	Seriousness
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

40. Has your drivers license ever been suspended or revoked for any reason other than no insurance?

YES \_\_\_\_\_ NO \_\_\_\_\_ (If Yes, list date, reason(s) why, insurance company name, location)

_____
_____
_____
_____

**Personal References and Associates**

41. List the names of individuals (including any family) that currently work for, or who have worked for this department:

Name	MO/YR to MO/YR	Relationship	Phone #
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



42. List **five (5)** personal references below: (Do Not list a relative as a personal reference)

Full Name	Home Phone #	Cell/Other Phone #	
Residence Address (number, street)	City	State	Zip Code
# Years Known	How Known	Relationship	

.....

Full Name	Home Phone #	Cell/Other Phone #	
Residence Address (number, street)	City	State	Zip Code
# Years Known	How Known	Relationship	

.....

Full Name	Home Phone #	Cell/Other Phone #	
Residence Address (number, street)	City	State	Zip Code
# Years Known	How Known	Relationship	

.....

Full Name	Home Phone #	Cell/Other Phone #	
Residence Address (number, street)	City	State	Zip Code
# Years Known	How Known	Relationship	

.....

Full Name	Home Phone #	Cell/Other Phone #	
Residence Address (number, street)	City	State	Zip Code
# Years Known	How Known	Relationship	

43. Are you a member, current or past, of any party or organization, political or otherwise, that now (or in the past) advocates the overthrow of the government of the United States or of the State of New Mexico by force or violence or other unlawful means?

YES \_\_\_\_\_ NO \_\_\_\_\_ (If Yes, attach a separate sheet with an explanation)

44. Were you ever terminated/fired, given the option of resigning in lieu of termination, or quit before being terminated/fired from any employment, volunteer, or other job position?

YES \_\_\_\_\_ NO \_\_\_\_\_ (If Yes, attach a separate sheet with an explanation including employer or organization name, current phone number, and the reason(s) why)

45. Were you ever subject to disciplinary action in connection with any employment or other organization including but not limited to; supervisory counseling, verbal or written warnings, reprimands, suspensions, etc.?

YES \_\_\_\_\_ NO \_\_\_\_\_ (If Yes, attach a separate sheet with an explanation including employer or organization name, current phone number, and the action(s) and reason(s) why)

46. Were you ever the subject of an internal or administrative investigation including as a target, witness, or other during the investigation?

YES \_\_\_\_\_ NO \_\_\_\_\_ (If Yes, attach a separate sheet with an explanation including employer or organization name, current phone number, and the action(s) and reason(s) why you were involved)

47. Have you ever been fingerprinted? YES \_\_\_\_\_ NO \_\_\_\_\_

When \_\_\_\_\_ Where \_\_\_\_\_ Purpose \_\_\_\_\_

When \_\_\_\_\_ Where \_\_\_\_\_ Purpose \_\_\_\_\_

When \_\_\_\_\_ Where \_\_\_\_\_ Purpose \_\_\_\_\_

48. Are you currently under investigation (administrative or criminal) or charged with any violations or crimes for any reason at this time?

YES \_\_\_\_\_ NO \_\_\_\_\_ (If Yes, attach a separate sheet with a full explanation of the investigation, reason(s), name and location of organization conducting investigation, and a contact phone number)

49. Do you know of anything else that would or may disqualify you from the selection process or prevent you from the full discharge of your duties as a new hire?

YES \_\_\_\_\_ NO \_\_\_\_\_ (If Yes, attach a separate sheet with a full explanation of the reason(s) why)

50. On a separate sheet of paper in 100 words or more and handwritten (printed) comment or explain why you feel you are qualified for this position and want to work for this organization.

***I have reviewed this completed personal history statement and I believe it to be true and correct to the best of my knowledge and recollection.***

I understand that **KNOWINGLY** withholding information, making false statements, or the failure to disclose information vital to this background investigation and the position I am applying for will be a basis for rejection of my application, the termination of my background investigation, or the termination of my employment with this organization.

I understand that after I have turned in this Personal History Statement to the organization I **MUST** inform the background investigator or his/her superior **IMMEDIATELY**, or within ten (10) days of any changes or updates of information contained in this statement or the Personal Integrity Questionnaire. Any change or updated information **MUST** be made both orally and in writing at any time during the selection process or after, if any, conditional or other offer of employment is made. Failure to do so could be the basis for rejection of my application, the termination of my background investigation, or the termination of my employment with this organization.

This form **MUST** be signed in the presence of a notary

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

NOTARY SEAL

My commission Expires \_\_\_\_\_ 20\_\_\_\_