



# SONORA POLICE DEPARTMENT

609 South Water Avenue  
Sonora, Texas 76950



## APPLICATION FOR EMPLOYMENT

The Sonora Police Department considers applicants for all positions without regard to race, color, religion, creed, gender national origin, age, disability, martial or veteran status, or any other legally protected status.

Position(s) Applied For:	Date of Application: ____/____/____
Name: Last, First Middle	Social Security Number      Date of Birth (mm/dd/yyyy) ____-____-____      ____/____/____
Physical Address: Number Street City, State, and Zip Code	Mailing Address: Number Street City, State, and Zip Code
Home Telephone Number: (____) ____-____	Cell Phone: (____) ____-____
E-Mail Address:	
Driver's License: _____ State: _____	

Best Time to contact you at home/cell phone is \_\_\_\_\_: \_\_\_\_\_  AM  PM

Have you ever submitted an application with us before?  Yes  No  
If Yes, give date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Are you currently employed?  Yes  No

May we contact your present employer?  Yes  No

Are you prevented from lawfully becoming employed in this Country because of Visa or Immigration Status?  Yes  No  
*(Proof of citizenship or Immigration status will be required upon employment)*

Are you available to work:  Full-Time  Part-Time  Temporary

Can you travel if the job requires it?  Yes  No

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

Are you a licensed  **Texas Peace Officer**  Animal Control Officer  Yes  No If No, are you currently enrolled in an Academy Program, Associate or Bachelor Degree Program, which will enable you to be licensed in the near future?  Yes  No. If Yes, what is the name of the institution you are enrolled in and what is your graduation date? Name of Academy \_\_\_\_\_/\_\_\_\_/\_\_\_\_ Projected graduation date? \_\_\_\_/\_\_\_\_/\_\_\_\_ And licensure date? \_\_\_\_/\_\_\_\_/\_\_\_\_ **PID#:** \_\_\_\_\_

## Education/Training

	Name and Address of School	Course of Study	Year Completed Or Hours Earned	Diploma Degree or Certification
Elementary School Completed				
High School				
Undergraduate College				
Graduate Professional				
Technical Vocational, or Training (Law Enforcement Academy)				

Describe any specialized training, continuing education, apprenticeships, and skills.

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List any other qualifications or specialized skills

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## Employment Experience

Start with your **present** job. Include any job related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.

<b>Employer</b>	<b>Dates</b> From	<b>Employed</b> To	<b>Work Performed</b>
<b>Address</b>	____/____/____	____/____/____	
<b>Telephone Number(s)</b> (____)____-____			
<b>Job Title</b>	<b>Hourly Rate</b> Starting	<b>Salary</b> Final	
<b>Reason for Leaving</b>			

2.

<b>Employer</b>	<b>Dates</b> From	<b>Employed</b> To	<b>Work Performed</b>
<b>Address</b>	____/____/____	____/____/____	
<b>Telephone Number(s)</b> (____)____-____			
<b>Job Title</b>	<b>Hourly Rate</b> Starting	<b>Salary</b> Final	
<b>Reason for Leaving</b>			

3.

<b>Employer</b>	<b>Dates</b> From	<b>Employed</b> To	<b>Work Performed</b>
<b>Address</b>	____/____/____	____/____/____	
<b>Telephone Number(s)</b> (____)____-____			
<b>Job Title</b>	<b>Hourly Rate</b> Starting	<b>Salary</b> Final	
<b>Reason for Leaving</b>			

**If you need additional space, please duplicate this page and attach the additional pages to the application.**



# Personal Inquiry Waiver/Covenant not to Sue/Waiver Release Information

State of Texas § Personal Inquiry Waiver / Covenant not to Sue  
County of Sutton § Waiver to Release Certain Information

I, \_\_\_\_\_, Applicant, hereby request and authorize, as a condition of employment, the Sonora Police Department/City of Sonora to conduct a "background" inquiry.

I further request and authorize you, the receiver of this instrument to furnish said Department with any and all information said Department may request concerning my character, background and/or criminal records (including those that may be maintained in various computerized systems) and information concerning my general reputation.

This instrument is specifically intended to include any and all information of a confidential or privileged nature as well as photocopies of any relative documents or copies of any relative data held electronically, if requested.

I hereby intentionally and voluntarily waive all confidentiality or privileged information rights concerning the foregoing and further, I released you, your organization and the Sonora Police Department/City of Sonora by this covenant, from any liability that may be connected with requesting, releasing, disseminating, or use of any such information, or the results or inquires, in determining my eligibility for employment as an employee of the Sonora Police Department/City of Sonora, Texas.

I hereby acknowledge that a facsimile (FAX) or (by any other method) a copy of this instrument may be used in the "background" inquiry process and further, that such FAX or copy is as valid as the original notarized copy.

\_\_\_\_\_  
Applicant's Signature of AGREEMENT

\_\_\_\_\_/\_\_\_\_\_/19\_\_\_\_ - \_\_\_\_ - \_\_\_\_  
Applicant Driver's License Number Applicant's DOB Applicant's SS Number

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, \_\_\_\_\_, herein referred to as "Applicant", personally appeared before me and stated the reasons for executing this instrument is for the same expressed reason stated herein.

\_\_\_\_\_  
Notary Public EST. 1974 (SEAL)

My commission expires \_\_\_\_/\_\_\_\_/20\_\_\_\_



State of Texas

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County of Sutton

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I, \_\_\_\_\_, certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active from the date of submission to the posted due date. All applications received after the posted due date will be considered for the next application process, OR for a period of time not to exceed one year from the date of submission. After submitting this application, I understand that it is my responsibility to notify the Sonora Police Department of any changes of information in the original application.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

X \_\_\_\_\_  
(Signature of Applicant)

Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_

ACKNOWLEDGEMENT

I, \_\_\_\_\_, do hereby acknowledge that the foregoing instrument was executed by me for the purpose expressed herein, and I acknowledge that I voluntarily executed the same, and that the contents thereof are true and correct.

X \_\_\_\_\_  
(Signature of Applicant before Notary)

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, \_\_\_\_\_, herein referred to as "Applicant", personally appeared me and stated the reasons for executing this instrument is for the same expressed reasons stated herein.

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

(SEAL)

My commission expires \_\_\_\_/\_\_\_\_/20\_\_\_\_

## Instructions:

1. Read all questions carefully and answer honestly.
2. Complete the applications by filling in ALL blanks, if the information requested is not applicable to you, place N/A in the space provided.
3. Make sure that all required documents are signed and notarized appropriately.  
(**REMEMBER NOTARIZED** documents must be signed in the presence of the **Notary**.)
4. If you have any further questions, please call: (325) 387-3888

