

Tarkington Volunteer Fire Department

**Post Office Box 1614
Cleveland, Texas 77327
(281) 592-7800**

Instructions:

1. Please read each question and all instructions carefully while completing the application.
2. If a question does not apply to you, please enter N/A in the space.
3. If there is not enough space to answer a question, please attach extra sheets to the application. On the top of each extra page please write the section number and the question number.
4. Applications not properly completed will not be accepted. You will be judged in part on the neatness and completeness of this application.
5. Use black ink if hand written or typed.
6. You are not required to answer any questions that are or may be contrary to applicable laws.
7. If you have any questions, please contact us at the phone numbers above or visit our web site: www.tarkingtonvfd.com

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Section 1: Automatic Disqualifiers

Read all of the automatic disqualifiers before completing your application. Any of the following will disqualify the applicant from further consideration during any state of the process. *Important: If you are not sure if any of the automatic disqualifiers pertain to you; you are required to submit a detailed letter explaining the circumstances in question.*

Application Disqualifiers:

Failure to comply with any of the following will disqualify the applicant from further consideration during any stage of the process:

1. Failure to submit any subsequent required documentation or information.

Criminal Disqualifiers:

Any of the following will disqualify the applicant from further consideration during any state of the process.

1. Having a conviction for, or being under indictment for, or currently charged with any felony offense (not eligible to apply).
2. Having any conviction for any Class A or Class B misdemeanor offense, or currently being under indictment for, or currently charged with any Class A or B misdemeanor offenses (within the past 5 years).
3. Being under indictment or charged with any Class A or Class B misdemeanor offense prior to date of submitting your application that is still pending.
4. Having a conviction for driving under the influence (DWI / DUI) (within the past 5 years). Or being under indictment for, or currently charged with driving under the influence (DWI / DUI) prior to the date of submitting your application that is still pending. Or having more than one conviction for driving under the influence (DWI / DUI).
5. Currently serving community supervision/ probation for any offense.

For the purposes of the above requirements, a person is considered convicted of an offense when an ADJUDICATION OF GUILT is entered against said person by a court of competent jurisdiction, or a PLEA OF GUILTY is entered, including situations where:

1. The sentence is subsequently probated and the person is discharged from probation.
2. Deferred adjudication is granted.

Driving Disqualifiers:

Having excessive record of traffic convictions or negligent traffic collisions. This is defined as:

1. Involvement as a driver in three or more motor vehicle accidents (within the past 3 years) where the applicant's actions contributed to the accident in any way, whether or not citations were issued.
2. Convictions for more than two moving violations within the past 3 years.
3. A driver's license suspension within the past 3 years for:
 - DWI
 - Failure to carry liability insurance
 - For any reason that would indicate poor driving behavior.

Military Disqualifiers:

Having been discharged from military service with a DISHONORABLE discharge or a General Discharge indicating:

1. Bad conduct
2. Any other characterization indicating bad character

Drug Use Disqualifiers:

1. Illegal use of Marijuana in the past 3 years.
2. Illegal use of any controlled substance or illegal drug, other than Marijuana, within the past 3 years.
3. Having a police record of illegal drug usage or having illegally furnished any illegal or dangerous drug to another within the past 3 years.

General Disqualifiers:

1. Being a member of any organization that advocates the overthrow of a governmental agency by force of violence.
2. Currently, have belonged to, or been closely associated with any organization which advocates or engages in unlawful conduct directed at individuals or groups based upon the individual's or group's race, sex, religion, national origin, age, skin color, sexual preference, disability, or conduct otherwise commonly known as "Hate Crimes".
3. Making any false statement of fact, being deceptive by statement or omission in this application, or by any means in any part of the hiring process will result in disqualification and may be grounds for future dismissal.

Section 2: Release of Personal Information

I do hereby authorize a review and full disclosure of all records concerning me to any duly authorized agent of the Tarkington Volunteer Fire Department, whether the said records are of a public, private or confidential in nature. The intent of this authorization is to give my consent to full and complete disclosure of the records of educational institutions, medical records, polygraph records, employment and pre employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me and the records and recollections of Attorneys at Law, or of other counsel, whether representing myself or another person in any case either criminal or civil, in which I presently have or have had interest. I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly (in whole or in part), upon this release authorization will be considered in determining my suitability for service by the Tarkington Volunteer Fire Department. I do hereby release said person(s) who provide information about me, whether supplied by a government organization or individual, from any and all liability, which may be incurred as a result of furnishing such information. A photocopy or fax copy of this release form will be valid as an original thereof, even though the said photocopy or fax does not contain an original writing of my signature.

| | |
|------------------------|-----------------------|
| Signature | Print Name |
| Address | City, State, Zip |
| Phone Number | Date of Birth |
| Social Security Number | Driver license Number |

State of _____; County of _____
 before me, the undersigned Notary Public of the State of _____, on this day personally appeared _____,
 (Check one) ___ known to me; ___ proven to me on the oath of _____;
 or proved to me through _____ (description of identity card or other document) to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that s/he executed the same for the purposes and consideration expressed and in capacity expressed therein.
 SUBSCRIBED AND SWORN TO before the undersigned authority this _____ day of _____, 20_____, _____
 Notary Public

Section 3: Personal History Statement

1. Name: _____ Date: _____

Other Names Used Previously: _____

2. Address: _____

How long there? _____ years _____ months

E-mail: _____

Previous Address: _____

How long there? _____ years _____ months

If less than seven years at the two prior addresses, please list the last seven years of residency:

3. Home Phone: (____) ____ - _____ 4. Work Phone: (____) ____ - _____

Cell Phone: (____) ____ - _____

5. Driver's License # _____ 6. Sex: Male Female

7. Are you over 18 Yrs of Age: Yes No 8. SS#: _____

9. Are you allowed to work in the United States: Yes No

10. Are you currently employed and where? _____

11. If you are a student, what institution are you attending?

12. When would you be able to start working? _____

13. Educational Background (circle last year completed)

High School: 1 2 3 4 College: 1 2 3 4 5 6

Other: _____

Last Institution Attended: _____

Section 5: References

1. May we contact your former employer? Yes No
2. Beginning with your present or most recent job, list all employment for the last seven years, including part time, temporary, or seasonal:

From: _____ To: _____ Employer: _____
Address: _____
Phone: (____) _____ Job Title: _____
Supervisor: _____ Reason for Leaving: _____
Duties: _____

From: _____ To: _____ Employer: _____
Address: _____
Phone: (____) _____ Job Title: _____
Supervisor: _____ Reason for Leaving: _____
Duties: _____

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Address: _____
Phone: (____) _____ Job Title: _____
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Phone: (____) _____ Job Title: _____
Supervisor: _____ Reason for Leaving: _____
Duties: _____

From: _____ To: _____ Employer: _____
Address: _____
Phone: (____) _____ Job Title: _____
Supervisor: _____ Reason for Leaving: _____
Duties: _____

From: _____ To: _____ Employer: _____
Address: _____
Phone: (____) _____ Job Title: _____
Supervisor: _____ Reason for Leaving: _____
Duties: _____

Section 5: (continued)

3. Please list seven individuals who have knowledge of you and your personal qualifications. Make sure all contact numbers are current, to speed up the process.

Name: _____ Phone: (____) _____
Address: _____

Occupation: _____ Years Known: _____

Name: _____ Phone: (____) _____
Address: _____

Occupation: _____ Years Known: _____

Name: _____ Phone: (____) _____
Address: _____

Occupation: _____ Years Known: _____

Name: _____ Phone: (____) _____
Address: _____

Occupation: _____ Years Known: _____

Name: _____ Phone: (____) _____
Address: _____

Occupation: _____ Years Known: _____

Name: _____ Phone: (____) _____
Address: _____

Occupation: _____ Years Known: _____

Name: _____ Phone: (____) _____
Address: _____

Occupation: _____ Years Known: _____

Section 6: Driving History

1. Have you had any motor vehicle accidents in the past 3 years? Yes No
If yes, please explain:_____

2. Has your driver's license ever been suspended or revoked? Yes No
If yes, please explain:_____

3. Has your auto insurance ever been canceled? Yes No
If yes, please explain:_____

4. How long have you been driving? _____

5. With what company do you carry auto insurance? _____

6. Have you ever taken a defensive driving course? Yes No

7. Would you be willing to learn to drive and operate large fire trucks? Yes No

8. List all vehicles registered to you.

9. List all traffic citations (except parking violations) during the last seven years.

10. Have you ever failed to appear in court for traffic or parking citations or ever had a warrant issued for your arrest because of a traffic or parking violation?

Section 7: Legal

1. Are you now or have you ever been involved as a plaintiff, defendant, petitioner, or responded in any civil action including dissolution of marriage? If so, please describe the facts regarding the case number, dates and court of jurisdiction:

2. Have you ever filed or been the subject of a restraining order? If so, please provide the details.

3. Have you ever been arrested for or convicted of any offense as a juvenile or adult?

4. Have you ever been placed on court probation as a juvenile or adult? If so, please provide the details.

5. Are you now a member of any organization, movement or group who engages in civil disobedience?

Section 10: Required Documentation

Please attach the following documents to the application:

Copy of High School Diploma or G.E.D. Certificate (for non-High School members)

Copy of College transcripts and/or diploma, if applicable towards fire service

Copy of Texas Emergency Care Attendant, Emergency Medical Technician, or higher

Copy of Certification(s)

Medical release form signed by applicant's physician (not needed until after interview)

Photocopy of your Driver's License

You may return this application in person to:

22353 Hwy 321

Cleveland, TX 77327

Or mail it to:

PO Box 1614

Cleveland, Texas 77327

A member of the department will contact you after reviewing your application.

Thank you for your interest in Tarkington VFD.

Criminal History Background

The Tarkington Volunteer Fire Department conducts Criminal Background & Driving Record Checks on all Public Safety Personnel. Please fill in the required information, answer the questions, and return this form to the fire department. This information is required for the Criminal History Investigation. This fire department is an equal opportunity employer.

Full Name: _____

Date of Birth: _____ Sex Male Female
Driver's License # _____ State: _____ Class: _____

1. Have you ever been arrested? Yes No

If yes, Explain _____

Use back if necessary.

2. Have you ever been convicted of a Class A Misdemeanor, Felony or Sex Offense, including Indecent Exposure. Yes No

3. Have you been convicted of a Class B Misdemeanor within the last 10 years. Yes No

4. Have you received 3 Written Citations (tickets) with in the last 12 months. Yes No

5. In the past three years have you had more than 3 traffic accidents in which you were at fault? Yes No

I understand that this information is provided only for the purpose of conducting a Criminal Background & Driving Record Check and I authorize the Liberty County Sheriff's Office to conduct the check on my behalf. I understand that falsifying information on this form or during any part of the application process may result in rejection of my application.

Applicants Signature

Date

Witness

Date