

Dear Applicant,

We appreciate your interest in seeking employment with Harris County Precinct 7.

It is our intent to create a very comfortable working environment where each employee can be creative and innovative while in the performance of your assigned duties; however as with any new administration comes changes, not simply for the sake of change, but to improve our service to the community and to maintain accountability.

It is imperative that you are aware of these changes before you complete this application. It is our hope that you will be willing to comply with the new changes and continue with the application process. If you find that the following changes are not in your best interest, **Please do not continue.**

1. **Supervisors** (Sergeants and above) will be assigned a take home vehicle. Other personnel will pick up vehicles from your assigned duty area before going on duty and will return the vehicles prior to going off duty.
2. **All sworn personnel** are required to make a daily **Roll Call** prior to going on duty.
3. **Sworn personnel** assigned to the Civil Division are required to wear a **Coat and Tie** while serving civil papers when not in uniform.
4. **All reserve personnel** will be required to work a minimum of 3 assignments, a total of **(24 hours)** per month, and attend a monthly meeting.

**MAY WALKER, CONSTABLE**  
*HARRIS COUNTY PRECINCT SEVEN*  
*5290 Griggs Road*  
*Houston, Texas 77021*  
*713-643-6118*

Personnel Division

In the event I am selected by Harris County Constable's Office, Precinct Seven, for appointment, I understand that:

1. I will be placed on probation for (6) six months.
2. I further understand that under **SECTION 23.01 OF THE COUNTY PERSONNEL MANUAL**, I CAN BE TERMINATED FOR ANY REASON AND AT ANY TIME WITHOUT NOTICE. THERE IS NO EMPLOYMENT TENURE IN COUNTY GOVERNMENT AS A MATTER OF LAW. EMPLOYEES MAY RESIGN AT ANY TIME WITHOUT NOTICE. FURTHER, THE TEXAS PAYDAY ACT DOES NOT APPLY TO HARRIS COUNTY.

\_\_\_\_\_  
APPLICANT'S PRINTED NAME

\_\_\_\_\_  
APPLICANT'S SIGNATURE

DATE: \_\_\_\_\_ NOTARIZED BY: \_\_\_\_\_  
NOTARY PUBLIC, THE STATE OF TEXAS

HARRIS COUNTY CONSTABLE DEPARTMENT  
PRECINCT SEVEN  
MAY WALKER, CONSTABLE  
5290 Griggs Road  
Houston, Texas 77021  
713-643-6118

**CONFIDENTIAL INFORMATION AGREEMENT AND ACKNOWLEDGEMENT**

To the applicant:

As part of the application process, a thorough investigation will be conducted to determine your qualifications for employment with the Harris County Constable Department, Precinct Seven. Determination of your eligibility for employment will, in large measure, be contingent upon information obtained by the Harris County Constable's Department, Precinct Seven from confidential interviews with persons and entities with whom you have associated and/or worked. The investigative background file developed in the course of the application process is the exclusive property of the Harris County Constable's Department, Precinct Seven, and all information gathered and received about you will remain confidential. The Harris County Constable's Department Precinct Seven is under no obligation to release information to you that would disclose the basis for you having been found ineligible for employment. By signing the following **Confidential Information Agreement and Acknowledgement**, you are acknowledging and agreeing to the foregoing and expressing your full understanding of same.

I, the undersigned, have read and fully understand the foregoing paragraph setting forth and explaining all the information gathered and received about me in the course of the application process, is and will remain confidential and the Harris County Constable's Department, Precinct Seven is under no obligation to release to me information that would disclose the basis for my having been found ineligible for employment with the Harris County Constable's Department, Precinct Seven.

I further acknowledge and agree that if I am offered employment with the Harris County Constable Department, Precinct Seven, my assignment within the Harris County Constable Department, Precinct Seven will be at the discretion of my supervisors and fully contingent upon the personnel needs of the Harris County Department, Precinct Seven, without regards to shift time and/or days off.

\_\_\_\_\_  
APPLICANT'S PRINTED NAME

\_\_\_\_\_  
APPLICANT'S SIGNATURE

DATE: \_\_\_\_\_ NOTARIZED BY: \_\_\_\_\_  
NOTARY PUBLIC, THE STATE OF TEXAS

## **Instructions for Applicants**

### **Please read this carefully**

You must meet the minimum requirements for the position for which you are applying. If you do not meet any one of these requirements, please do not complete this application not do not apply. If you do meet all of the requirements, complete this application and submit it, in person, with all of the required documentation to 5290 Griggs Road, Houston, Texas 77021. Attn: Chief Goree Anderson or Mr. Lionel Aaron.

Failure to comply with any of the instructions for completing this application or failure to submit required documents, or submitting any false or misleading information, may cause your application to not be considered and the application immediately terminated.

## **Minimum Requirements**

### **General Age Requirements:**

For Non-Deputy positions, you must have reached your 18<sup>th</sup> birthday, prior to, or by the date of your appointment.

For Deputy positions, you must have reached your 21<sup>st</sup> birthday prior to, or by the date of your appointment.

### **Physical Condition:**

For Non-Deputy positions, applicants must be of sound health and free from any hearing defects.

For Deputy positions, you must have eyesight, which is correctable to 20/20, and you must have no hearing defects.

All applicants must know and submit their blood type prior to the date of appointment.

### **Background Investigation**

A thorough background investigation will be conducted on all applicants. Evidence of a good moral character and reputation is mandatory. Disclosure of any one or more of the following may be grounds for rejection of the application:

1. Conviction for any felony offense.
2. Conviction for any misdemeanor offense, other than a minor traffic infraction.

3. Conviction of driving while intoxicated or under the influence of drugs within the previous ten-year period.
4. Being on probation for any criminal offense.
5. Conviction of any offense of moral turpitude.
6. Being under indictment for, or awaiting trial for any criminal offense.
7. Having an unfavorable or unacceptable record of traffic convictions or collisions.
8. Having any history of drug or alcohol abuse.
9. Any revocation of your peace officer's license by T.C.L.E.O.S.E.
10. Any history of poor credit or failing to meet your financial responsibilities.
11. Any military discharge under less than honorable conditions.
12. Any admission or confession to any felony offense, such as admission or confession being admissible as evidence against or in any criminal procedure in any State or Federal court.
13. Membership or association with any subversive or extremist organization.
14. Any false statement of fact, fraud, or deception on your application.

**Testing:**

All applicants must successfully pass any testing requirements for the position being sought if requested.

**Polygraph:**

All applicants must agree to submit to a polygraph examination if requested.

**Assignment:**

Applicants must be willing to accept any position or assignment within the Constable's Office and must agree to accept assignment or reassignment to any shift, and be able to work on weekends and holidays.

**Instructions for completing this application:**

Read the Minimum Requirements sections carefully, if you do not meet any one of the minimum requirements, do not complete this application.

If you meet the entire minimum requirements for the position for which you are applying, you may complete the attached application.

The information requested in this application must be completed fully and correctly. All blanks must be filled in or you must indicate that it does not apply to you by printing "N/A" on the blank line. Do not leave any lines blank.

The information that you submit in this application must be printed legibly and in black ink.

Answer all questions. If you need to add additional information, you may attach additional sheets as necessary.

Incomplete applications will not be accepted.

**REQUIRED DOCUMENTS** which **MUST** be submitted with your completed application: (Originals or certified copies will be accepted)

- One (1) of the following documents** :
- a. **High School Diploma**
  - b. **G.E.D.**
  - c. **College Diploma or transcript of College hours earned for degree**

**Form DD-214:** Certificate of Release of Discharge from Active Duty

If you are veteran of the military services, you must submit Page 4 of Form DD-214 if one was issued to you and if your discharge was under honorable conditions. If you received a medical discharge, or are now receiving Disability Compensation you must provide documentary evidence of your disability.

**Training Certificate:**

Along with your application, submit copies of all law enforcement training certificates that you have received.

**T.C.L.E.O.S.E.:**

Applicants who need information regarding certification requirements by T.C.L.E.O.S.E. should write or contact T.C.L.E.O.S.E directly at the following:

**Texas Commission on Law Enforcement Officers Standards and  
Education  
1033 La Posada, Ste. 240  
Austin, Texas 78752**

**Original Documents:**

1. Valid Texas Driver's License
2. Social Security Card
3. Birth Certificate (and citizenship papers if born outside of the U.S.)
4. Certificate of Law Enforcement Academy hours completed
5. T.C.L.E.O.S.E License
6. T.C.L.E.O.S.E Test Results
7. Receipt from Credit Report Agency
8. Proof of Automobile Liability Insurance

**Photograph(s):** One (1) color photograph, full view (head to foot)

## **INSTRUCTIONS FOR SUBMITTING THE COMPLETED APPLICATION WITH ALL REQUIRED DOCUMENTS**

**After you have completed filling out the application and you have all of the required documents and photographs, follow these instructions:**

1. Upon completing the application in its entirety, bring the completed notarized application and all copies of required documents, to 5290 Griggs Road, Houston, Texas 77021. Do not submit an incomplete application. All incomplete applications, including those applications that are not notarized, will be rejected.
2. All applications, and documents submitted, will become the property of Harris County Constables Office, Precinct 7.
3. All applications will be processed and the applicants will be notified.

### **BACKGROUND INVESTIGATION AND NOTIFICATION**

Once your application has been accepted, and you have met all of the minimum requirements, a background investigation will be completed. This averages from two to four weeks from the date that the application is accepted. In some cases, this time period may be shorter and in others it may be longer. **All applicants who are accepted will meet with the interview and selection board.**

You are instructed that **you are not to call to inquire of the status of your application** after it is submitted, and while the background investigation is being conducted. You will be contacted by telephone or by U.S. Mail of the status of your application.

**If your application is accepted, and you are notified, you will be given another appointment to present yourself for final processing, interview board, orientation and firearm(s) qualification.**

**Harris County Constable's Department Precinct #7 is an equal opportunity employer. No member of the Harris County Constable's Precinct #7 or any Department Head may fail or refuse to hire or may discharge any individual, or otherwise discriminate against any individual with respect to compensation, terms, conditions, or privileges of employment, because of such individual race, color, religion, sex, national origin, age, disability; or to limit, segregate, or classify employees or applicants for employment in any way that would deprive or tend to deprive any individual's status as an employee, because of such individual's race, color, religion, sex, national origin, age, or disability.**

**REVISED: November 11, 2010**

**MAY WALKER, CONSTABLE**  
**Harris County Constable**  
**Precinct Seven**  
**5290 Griggs Road**  
**Houston, Texas 77021**  
**713-643-6118**

**Personnel Division**

**CONFIDENTIALITY AGREEMENT**

**In the event that I am not selected by the Harris County Constable's Office, Precinct Seven for appointment, I understand that:**

1. I may never be informed or told on what ground I was not selected.
2. The background investigation pertaining to my application is confidential, and that any information obtained during the course of that investigation will not be disclosed to me in any form.

I certify that I have read this agreement, and fully understand and agree to abide by the terms of this agreement.

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

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

\_\_\_\_\_  
Date Signed

APPLICATION FOR EMPLOYMENT

Applicant's Last Name and First Initial: \_\_\_\_\_

Date application was received: \_\_\_\_\_

Position sought: DEPUTY{ } RESERVE{ } DISPATCHER{ } CLERICAL{ }

Clerical Skills: Typing \_\_\_\_\_ WPM/Shorthand \_\_\_\_\_ Computer \_\_\_\_\_

Vehicle: Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ License Plate \_\_\_\_\_

Please read these instructions carefully: You must complete this application completely, in black ink, and it must be legibly printed in your own handwriting. Do not use a typewriter or computer to complete this application. Be advised that any application forms which do not reflect current, correct addresses and telephone numbers for past employers and personal references, etc. may be rejected. If you need additional space for your answers, you may attach additional sheets of paper, and reference the question or section number.

Personal History Statement:

A. APPLICANT INFORMATION

Applicant's Blood Type \_\_\_\_\_

1. \_\_\_\_\_  
Last Name First Name Middle Name

2. \_\_\_\_\_  
Street No. Street Name Apt. No.

3. \_\_\_\_\_  
City State Zip Code

4. \_\_\_\_\_  
Home Telephone Work Telephone Pager Number Cell Phone

5. \_\_\_\_\_ 6. \_\_\_\_\_  
Date of Birth Age Social Security Number

7. \_\_\_\_\_  
Place of Birth City State County

8. Are you a United States Citizen? YES  NO  Naturalized: YES  NO

9. \_\_\_\_\_  
Driver's License No. State Class Expiration Date

10. Height: \_\_\_\_ft. \_\_\_\_in. 11. Weight: \_\_\_\_\_ lbs.

E-mail Address \_\_\_\_\_

12. Hair Color: \_\_\_\_\_ 13. Eye Color: \_\_\_\_\_
14. Describe any scars, tattoos, or other distinguishing marks: \_\_\_\_\_
15. With whom do you reside? Please provide name(s) and relationship(s): \_\_\_\_\_
16. Are you in any way related to any employee of HCCO Precinct Seven? YES  NO
17. Have you ever worked for or been appointed to HCCO Precinct Seven? YES  NO
- a. If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_
18. Do you know personally anyone who is currently employed or appointed by HCCO Precinct Seven? YES  NO
- a. If yes, please provide name(s) and indicate relationship: \_\_\_\_\_  
\_\_\_\_\_

**B. RESIDENCES**

List all addresses where you have resided during the past ten (10) years, beginning with your present address. List dates by the month and year of residence. You may attach extra pages, if necessary.

Date From:	Date To:	Address	City/State	Zip Code
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**C. MILITARY SERVICE**

19. Have you ever served in the United States Armed Forces: YES [ ] NO [ ]
20. Give dates of service: From: \_\_\_\_\_ To: \_\_\_\_\_
21. Branch of Service: \_\_\_\_\_

22. Military Service Number: \_\_\_\_\_
23. Name and location of last duty assignment: \_\_\_\_\_
24. Describe general duties while serving in the Armed Forces: \_\_\_\_\_
25. Type of discharge from service: \_\_\_\_\_ Date of discharge: \_\_\_\_\_
26. If you received other than an honorable discharge, explain: \_\_\_\_\_
27. Have you ever received discipline while in the military service (include Courts Martial, Captain's Mast, Company Punishment, etc.)? YES [ ] NO [ ]
28. If the answer to Question 27 is Yes, explain fully: \_\_\_\_\_
- \_\_\_\_\_

**D. EDUCATIONAL BACKGROUND**

29. State the highest level of formal education that you have completed: \_\_\_\_\_
30. Please provide the name(s), location(s), and dates of attendance of all high schools that you have attended.
- \_\_\_\_\_
- \_\_\_\_\_
31. Please provide the name(s), location(s), and dates of attendance of all colleges or universities that you attended.
- \_\_\_\_\_
- \_\_\_\_\_

**E. VEHICLE OPERATIONS**

32. Have you ever had your driver's license suspended or revoked? YES  NO
- a. If yes, please explain the circumstances surrounding your suspension or revocation, providing the date, location and reason. \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

33. Have you ever been involved in a motor vehicle accident? YES  NO

a.. If yes, please explain fully, providing the date, location and brief description of the accident(s)

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34. Do you have motor vehicle insurance? YES  NO

a. If yes, provide the name of your insurance carrier, policy number, and the name, address and telephone number of your agent. \_\_\_\_\_

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**F. MARITAL AND FAMILY INFORMATION**

35. Check your marital status: Married  Single  Divorced  Separated  Widowed  Engaged

a. If married, please provide your spouse's full name and/or maiden name, address, work and home phone numbers. \_\_\_\_\_

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36. Provide the full names and dates of birth of all children that are related to you or your spouse. (Include natural children, step-children, adopted or foster children).

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37. Provide the full name(s) of all other dependents, their relationship to you and their address and phone number: \_\_\_\_\_

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38. List the full name(s) of the following persons, including their address and telephone numbers; if deceased, please indicate.

Mother: \_\_\_\_\_  
Father: \_\_\_\_\_  
Sister: \_\_\_\_\_  
Sister: \_\_\_\_\_  
Brother: \_\_\_\_\_  
Brother: \_\_\_\_\_

**G. FINANCIAL INFORMATION**

39. Provide the names and addresses of any individuals, companies or others that you are indebted to and the extent of your indebtedness. Include rent, mortgages, vehicle loans, credit accounts, loans, child support payments, and any other debts and/or payments.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

40. What is your current annual wage or salary? \_\_\_\_\_ per \_\_\_\_\_

41. Do you have any income from any other sources? YES  NO  If YES, provide the source and amount of that income: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

42. Do you have a bank account(s)? YES  NO  If YES, provide the type of the account(s) and the name of the bank where the account(s) are located.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

43. Provide the names and addresses of any individuals or companies with whom you have any delinquent accounts. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**H. MEMBERSHIPS/ORGANIZATIONS**

44. Have you ever been a member of any subversive or criminal organization? YES  NO  If YES, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

45. Have you ever been a member of or participated in any type of gang activity? YES  NO  If YES, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

46. List all professional, social, or philanthropic organizations of which you are or have been a member. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I. PERSONAL DECLARATIONS**

47. Do you consume alcoholic beverages? YES  NO  If YES, please explain the frequency and extent of your consumption. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

48. Do you currently or have you ever used any controlled substances other than those to which you have been prescribed by a physician? YES  NO  If YES, please explain fully: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

49. Have you ever been arrested? YES  NO  If YES, please explain fully:

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50. Have you ever been administered a polygraph examination? YES  NO  If, YES, please explain the conditions warranting said polygraph and the dates and locations.

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51. Have you ever sold or furnished drugs or narcotics to anyone? YES  NO  If YES, explain fully.

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52. Have you ever purchased or obtained any illegal drugs or narcotics from anyone? YES  NO  If YES, explain fully.

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53. Have you ever stolen anything? YES  NO  If YES, explain fully the circumstances surrounding the incident(s), and provide the dates, times, and locations.

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54. Have you ever made application for employment or appointment with this or any other law enforcement or related agency? YES  NO  If YES, please explain. Attach addition information.

**Name of Agency**

**Date Applied**

**Application Status**

Name of Agency	Date Applied	Application Status
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

55. Have you ever been fired, terminated or asked to resign for a job? YES  NO  If YES, fully explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

56. Is there anything that occurred in your past that may jeopardize the integrity of this department? YES  NO  If YES, explain fully.

\_\_\_\_\_

57. Please state in your own words why you are seeking employment or an appointment to this agency.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**J. EMPLOYMENT INFORMATION**

Provide a full listing of your employment history, beginning with your present or most recent job first. List all employment, including part-time, temporary, or seasonal employment; please include all periods of employment. Attach extra pages if necessary.

Dates Employed: FROM: \_\_\_\_\_ TO: \_\_\_\_\_  
Name of Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Work Number: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_  
Title & Duties: \_\_\_\_\_  
Salary/Wages: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Dates Employed: FROM: \_\_\_\_\_ TO: \_\_\_\_\_  
Name of Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Work Number: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_  
Title & Duties: \_\_\_\_\_  
Salary/Wages: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Dates Employed: FROM: \_\_\_\_\_ TO: \_\_\_\_\_  
Name of Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Work Number: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_  
Title & Duties: \_\_\_\_\_  
Salary/Wages: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Dates Employed: FROM: \_\_\_\_\_ TO: \_\_\_\_\_  
Name of Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Work Number: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_  
Title & Duties: \_\_\_\_\_  
Salary/Wages: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Dates Employed: FROM: \_\_\_\_\_ TO: \_\_\_\_\_  
Name of Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Work Number: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_  
Title & Duties: \_\_\_\_\_  
Salary/Wages: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

**K. PREVIOUS LAW ENFORCEMENT EXPERIENCE**

LAW ENFORCEMENT HISTORY

AGENCY: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_

CHIEF: \_\_\_\_\_ PHONE NO.: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

AGENCY: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_

CHIEF: \_\_\_\_\_ PHONE NO.: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

AGENCY: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_

CHIEF: \_\_\_\_\_ PHONE NO.: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

AGENCY: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_

CHIEF: \_\_\_\_\_ PHONE NO.: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**L. PERSONAL REFERENCES**

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_ City,State, Zip \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Occupation/ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_ City,State, Zip \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Occupation/ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_ City,State, Zip \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Occupation/ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_ City,State, Zip \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Occupation/ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_ City,State, Zip \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Occupation/ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_ City,State, Zip \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Occupation/ Relationship: \_\_\_\_\_

AFFIDAVIT:

Read but **do not sign THIS FORM**. This form is an affidavit in which you are attesting the information that you have provided elsewhere in this application for employment or appointment is correct. After you have fully completed the application, and attached any or all-extra pages, you must take the application and this form to a licensed Texas Notary Public and have your signature duly notarized. Then, after you have made an appointment, you may personally deliver the completed and notarized application, along with all other required documentation, to the Personnel Division at 5290 Griggs Rd., Houston, Texas 77021.

SWORN AFFIDAVIT OF APPLICANT

I hereby swear or affirm that I have personally completed the foregoing application; and that I am aware of the contents and that the answers to the questions and the statements that I have made therein are true and correct. I am also aware that any willful misrepresentation of fact or that any falsification of any answer or statement made herein will subject me to rejection and/or dismissal from this department, and further that I may be subject to criminal prosecution under Article 37.02 and/or Article 37.10 of the Texas Penal Code.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Printed full name of applicant

\_\_\_\_\_  
Date Signed

SUBSCRIBED AND SWORN to before me, the undersigned authority, on this the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public in and for the State of Texas  
My Commission expires: \_\_\_\_\_

RELEASE AUTHORIZATION

NOTARIZED AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I, \_\_\_\_\_, do hereby authorize a review and full disclosure of any and all records, medical, files, photographs and notes or other historical records concerning myself, the undersigned and identified individual, to any duty authorized agent of the Harris County Constable's Office, Precinct Seven, Houston, Texas, whether the said records, medical records, files, photographs and notes or other historical record are of a public, private or confidential nature.

The intent of this authorization is give my consent for a full and complete disclosure of the records of educational institutions, financial or credit institutions, including records of loans, records of commercial and/or retail credit agencies (including credit reports and/or ratings); and other financial statements and statements wherever filed, medical and psychiatric or psychological treatment and/ or consultation, including hospitals, clinics, private practitioners, and the U.S. Veteran's Administration, employment and pre-employment records, including background reports, efficiency ratings or evaluations, complaints or grievances filed by or against me and the records and recollections of Attorneys at Law or of other counsel whether representing me or another person in any other case, either criminal or civil, in which I presently have or have had an interest. It is my further intent to waive any attorney/client privilege that I may have now or in the past.

I understand that any information obtained by a personal history background which is developed directly or indirectly, in whole or in part, upon this Release Authorization, will be considered in determining my suitability for employment or appointment by the Harris County Constable Office, Precinct Seven, or by Harris County, Texas. I also certify that the person(s) who may furnish such information concerning me shall not be held accountable for giving or providing such information. I hereby explicitly release said person(s), organizations or any other entity from any and all liability which may be incurred as a result of furnishing such information.

I also agree to pay for any and all charges and fees concerning this request and can be billed for such charges at the below listed address.

A photocopy of this Release Form will be valid as if it were the original thereof, even though said photocopy does not contain an original writing of my signature.

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

\_\_\_\_\_  
Social Security Number and Date of Birth

\_\_\_\_\_  
Printed full name of applicant

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date signed

\_\_\_\_\_  
City State Zip Code

SUBSCRIBED AND SWORN to before me, the undersigned authority, on this the \_\_\_\_day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Notary Public in and for the State of Texas  
My Commission expires: \_\_\_\_\_