

# **City of San Angelo**

Human Resources Department  
72 W. College Avenue, Suite 201  
San Angelo, TX 76903  
(325) 657-4221 Fax (325) 657-4530

March 6, 2023

Dear Applicant:

This brochure outlines the requirements for entrance into the San Angelo Police Department. Additional information can be obtained by contacting our website at [www.sanangelopolice.org](http://www.sanangelopolice.org) or [www.cosatx.us](http://www.cosatx.us) under Human Resources and Fire and Police Department Applications.

According to Civil Service Law, every applicant for a Police Rookie position must take a Civil Service Examination. Salary amounts are subject to change each year. **The next examination has not been scheduled yet.** Applications currently on file will be notified via first class mail of the examination date.

An optional study guide and practice test for the Peace Officer Civil Service entrance exam can be obtained online at <https://www.applytoserve.com/study> for a small fee at your expense. Neither the study guide nor practice test is necessary to take or pass the Peace Officer Civil Service entrance exam. These tools are completely optional.

Please complete the application and return it along with the original documents listed on the Application Checklist to the Human Resources Department. The Human Resources Department will make copies of the documents and return the originals back to you. If you have any questions, contact the Human Resources Department (325) 657-4221 or email [hr@cosatx.us](mailto:hr@cosatx.us) or [christine.russell@cosatx.us](mailto:christine.russell@cosatx.us).

Your application must be complete and returned with all necessary documents. Incomplete applications will not satisfy eligibility requirements.

Once your application has been submitted, it is your responsibility to keep the application up-to-date. Report any changes to the Human Resources Department in writing.

Thank you for your interest in employment with the City of San Angelo.

Sincerely,



Veronica Sanchez  
Civil Service Director

Revised 03.06.2023

## FOLLOW THE INSTRUCTIONS FOR SUBMITTING AN APPLICATION

1. Complete the application.
2. All documents (if applicable) must be submitted with your application.
3. You **MUST** submit originals. The Human Resources Department will make copies of your original documents.

### APPLICATION CHECKLIST

(Arrange documents in the following order)

- \_\_\_\_\_ 1. Application signed and dated by applicant
- \_\_\_\_\_ 2. Completed Screening Questionnaire
- \_\_\_\_\_ 3. Driver's License
- \_\_\_\_\_ 4. Social Security Card
- \_\_\_\_\_ 5. Birth Certificate (must have seal from the Bureau of Vital Statistics) or Naturalization Certificate

### EDUCATION:

- \_\_\_\_\_ 6. High School Diploma **or**
- \_\_\_\_\_ 7. High School equivalency certificate (GED)
- \_\_\_\_\_ 8. High School Transcript
- \_\_\_\_\_ 9. GED Transcript
- \_\_\_\_\_ 10. College Diploma(s)
- \_\_\_\_\_ 11. College Transcript(s) - must submit official transcripts for all colleges/universities attended. All official transcripts will be retained
- \_\_\_\_\_ 12. Any Technical School Certificates/Licenses

### MILITARY: List all periods of service.

- \_\_\_\_\_ 13. Individuals with military service **MUST** provide a copy of their discharge papers (DD 214 Form) for each period of service indicating **HONORABLE** to be eligible for Veteran's points.
- \_\_\_\_\_ 14. Applicants currently in the reserves/national guard **MUST** submit a letter from their Commanding Officer indicating good standing to be eligible for Veteran's points.

### IMPORTANT MINIMUM QUALIFICATIONS

In order to meet the necessary minimum qualifications set out by the Texas Commission of Law Enforcement Officers Standards and Education, all applicants must meet the following minimum qualifications:

1. Applicants must have a high school diploma, or a GED, or 12 semester hours credit from an accredited college or university, or an honorable discharge from the armed forces after 24 months of active duty service;
2. Have not been and not currently on court-ordered community supervision or probation for any criminal offense above the grade of Class B misdemeanor or a Class B misdemeanor within the last 10 years;
3. Not currently under indictment for any criminal offense;
4. Have not ever been convicted of an offense above the grade of a Class B misdemeanor, or a Class B misdemeanor within the last 10 years;
5. Have never been convicted of any family violence offense and not prohibited by state or federal law from operating a motor vehicle or possessing firearms or ammunition;
6. Have no illegal drug use in the previous 2 years; and
7. Be a U.S. Citizen.

## **PREFACE**

In 1947, the Texas Legislature passed a law allowing each city the opportunity to vote “for” or “against” civil service for fire and police. The citizens of San Angelo elected the civil service system for fire and police in 1948 and in the fall of 1948, the Civil Service Commission was established in San Angelo.

The Civil Service Commission has established rules and procedures governing its operation in compliance with the state law, which is found in the Texas Local Government Code Chapter 143.

The commission shall provide for open, competitive and free entrance examinations to provide eligibility lists for beginning positions in the fire and police departments. The examinations are open to each person who makes a proper application and meets the requirements prescribed by this chapter.

As you embark on your quest to become a police officer, we wish you success, remembering that many individuals have preceded you and are yet to follow you and that each individual has an equal chance to succeed.

**THE CIVIL SERVICE COMMISSION  
HUMAN RESOURCES DEPARTMENT  
72 W. COLLEGE AVENUE, SUITE 201  
SAN ANGELO, TEXAS 76903  
(325) 657-4221**

**SAN ANGELO POLICE COMMUNITY SERVICES  
301 W. BEAUREGARD AVENUE, SUITE 205  
SAN ANGELO, TEXAS 76903  
(325) 657-4331**

## BASIC REQUIREMENTS TO BE MET

The police service of the City of San Angelo is under the State's Civil Service Statutes for Municipal Government (Texas Local Government Code Chapter 143). Each applicant must meet certain requirements to become a police officer.

The City of San Angelo has a non-discriminatory policy which states:

*The City will not discriminate in its Human Resources selection, or hiring, training, or promotions with regards to race, color, religion, sex, or national origin as defined in Title VII of the Civil Rights Act of 1964, as amended.*

### DO YOU MEET THE MINIMUM REQUIREMENTS OUTLINED BELOW?

**AGE:** Generally, twenty-one (21) is the minimum age and forty-five (45) is the maximum age for applicants. However, state and federal law provide an exception to the minimum age. A person who is 45 years of age or older may not be certified for a beginning position in a police department. An applicant younger than twenty-one should contact the Human Resources Department at (325) 657-4221 for more information regarding age limits.

**EDUCATION:** All applicants must have a high school diploma or a GED certificate. Applicants must be able to intelligently read and write the English language. This requirement must be met before the applicant can take the exam.

**CHARACTER & BACKGROUND:** All applicants must be of good moral character with temperate habits. Applicants with a felony conviction will not be accepted under the state laws nor will applicants who were former civil service employees dismissed for misconduct or disciplinary reasons. Applicants with illegal drug use in the previous 2 years will not be eligible to apply.

**PHYSICAL EXAMINATION:** The city's Human Resources Department will make appointments for physical examinations of the candidates beginning at the top of the roster. A candidate who does not pass the physical examination will be dropped from the roster.

**PHYSICAL CONDITION:** All applicants must pass a rigid physical examination before employment. The candidate must have adequate strength for rescue drag and demonstrate good cardiovascular endurance. The candidate must be able to lift 93 lbs.

**EYESIGHT:** Eyesight must be correctable to 20/30 in each eye binocularly. The maximum uncorrected visual acuity is 20/200. Must be able to successfully pass the Ishihara color-blind test.

**HEIGHT:** There is no height requirement; however, there is a maximum and minimum weight to height ratio based upon insurance actuarial tables since obese applicants could be rejected under the physical exam.

### WITH MINIMUM REQUIREMENTS MET, WHAT DO YOU DO TO APPLY?

**APPLICATION:** Complete the application and return it to the Human Resources Department. If you make an application before an examination is announced, the Human Resources Department will notify you by mail (at the address on the application) when and where the examination will be held.

When you submit your application, you should have the following items attached:

1. The application form must be completed and signed.
2. Additional application sheets should be attached to explain items on the form where you do not have enough space. Under employment, you must include all your employment for the last ten years.
3. Your high school diploma or GED certificate.
4. Your high school transcript or GED transcript.
5. Your college degree(s).
6. Your college transcript(s).
7. Your technical school certificate(s).
8. A certified copy of your birth certificate or naturalization certificate. Birth certificate must have a seal from the Bureau of Vital Statistics.  
NOTE: The copy from the hospital with footprints on the back WILL NOT SUFFICE.
9. MILITARY SERVICE – DD FORM 214 – A copy of honorable discharge papers. Applicants currently in the reserves are to attach a letter from their commanding officer indicating good standing. *This information will determine if you are eligible for veterans' points.*
10. Your driver's license.
11. Your social security card.

Incomplete applications will not satisfy eligibility requirements.

Applications once filed remain the property of the City and are not returned under any circumstances. You **MUST** submit original documents and the Human Resources staff will make copies.

**\*\* Notice \*\***

**WRITTEN EXAMINATION:** The written examination tests applicants in reading comprehension and writing skills related to police work. Each applicant's grade on the written examination is to be based on a maximum grade of 100% determined entirely by the correctness of answers to the questions. Minimum passing grade is 70% and each applicant must pass the examination in order to be placed on the eligibility list. The grade that goes on the eligibility list is computed by the applicant's written examination grade being added to any veterans' preference points earned. Your exam will be graded within a week of the exam and you will be notified by mail.

**CREDIT CHECK:** Each applicant will have his/her credit checked by a background investigator. If you have any problems with your credit, it is suggested that you talk with the credit bureau and try to correct the problem.

**BACKGROUND INVESTIGATION:** Each candidate will have a complete background check by the police department's background investigators. Your background will include a driver's license check, criminal history, and inquiries to people who know you and your character, such as references, neighbors, etc.

**CRIMINAL RECORD:** Candidate must not have been convicted of a misdemeanor offense above the grade of a Class C Misdemeanor within the last ten years.

**DRIVING RECORD:** During the last three years, an individual must not have: 1) a DWI conviction; 2) more than three moving violations; or 3) more than two moving violations and one chargeable accident.

**POLYGRAPH EXAMINATION:** A polygraph examination will be administered to all police recruit finalists to verify application and background information.

**ORAL INTERVIEW:** After successfully passing the written examination, credit check, background investigation, and polygraph, an oral interview will be held before a board consisting of the police chief, police department officers, and the civil service director.

**PSYCHOLOGICAL EVALUATION:** All applicants for beginning positions who have successfully passed all phases will undergo a psychological and an emotional health examination.

**HIRING PROCEDURES**

**ELIGIBILITY ROSTER:** After successfully completing the written examination, you become a candidate and your name is placed on the Police Officer Recruit Eligibility Roster. The candidate's placement on this roster is determined by the total points accumulated from the written examination and veteran's preference points. Five (5) extra points are given to veterans of the armed forces with an **HONORABLE** discharge; or active reserves indicating good standing from their commanding officer. The candidate with most points is listed first on the eligibility roster and so-forth in descending order of total points. This eligibility roster is good for one (1) year unless all the candidates are hired before the end of the year. If at any point you fail the credit check, background investigation, or oral examination, you will be dropped from the roster and notified.

**HIRE DATE:** As the Police Chief needs new Human Resources, the Chief selects the candidate to be hired from the eligibility roster. Normally, the individual with the highest score is selected first. A candidate may be "bypassed" by the chief. If a candidate is "bypassed" three times, he/she will be dropped from the roster. When a candidate is selected he/she will be notified by the Civil Service Director to report for duty on a specified date.

\*\*\*\*\*

**EQUAL OPPORTUNITY EMPLOYER**

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**ANYONE WHO DOES NOT PASS PART OF THIS ENTRY PROCESS MAY APPLY AGAIN WHEN THE NEXT EXAMINATION IS ANNOUNCED. HOWEVER, THOSE WHO WISH TO TRY AGAIN MUST BEGIN WITH FILING ANOTHER APPLICATION.**





# Employment Application

## ***San Angelo Police Department***

*An Equal Opportunity Employer*  
Visit us on the Web at [www.cosatx.us](http://www.cosatx.us)

72 W. College Avenue, Suite 201, San Angelo TX 76903 Phone: (325) 657-4221

Instructions: PLEASE PRINT AND USE BLACK INK ONLY. Complete ALL necessary information. You may be asked to provide additional information on another form. **If a section does not apply, indicate "Not Applicable"**. Be sure to sign and date the application.

### PERSONAL DATA

Name: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  

Last
First
Middle
Social Security Number

Address: \_\_\_\_\_  

Number & Street
City
State
Zip

Phone: (a/c) \_\_\_\_\_ Message Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Where is your present legal residence? County \_\_\_\_\_ State \_\_\_\_\_

For how long? \_\_\_\_\_ If your legal residence has been elsewhere within the past two years, give the county, state, and date of each residence \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age at time of application \_\_\_\_\_

### GENERAL INFORMATION

Driver's License: State \_\_\_\_\_ Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Type of Driver's License:

- Class A  Class B  Class C  Class M  Class A Commercial  Class B Commercial  Class C Commercial
- CDL Endorsements \_\_\_\_\_

Have you ever been convicted of a MISDEMEANOR or FELONY and/or placed on probation, fined or given a suspended sentence such as deferred adjudication in court? List all cases other than minor traffic violations. PLEASE NOTE: Your record does not constitute an automatic disqualification of employment. FAILURE TO ADMIT CONVICTIONS WILL RESULT IN DISQUALIFICATION OF YOUR APPLICATION.

(Check one)  Yes  No If Yes, please provide the following:

Date: \_\_\_/\_\_\_/\_\_\_ Charge: \_\_\_\_\_ City/State: \_\_\_\_\_

Disposition: \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_ Charge: \_\_\_\_\_ City/State: \_\_\_\_\_

Disposition: \_\_\_\_\_

Have you ever been denied bond? \_\_\_\_ Yes \_\_\_\_ No

Have you ever been employed by the City of San Angelo?  Yes  No If yes, please indicate:

Title of Position: \_\_\_\_\_ Department: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ Reason for Separation: \_\_\_\_\_

Do you have any relatives, by blood or by marriage, working for or holding elected office for the City of San Angelo?

Yes  No If yes, please indicate:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Department: \_\_\_\_\_ Position: \_\_\_\_\_

May your current employer be contacted by the City?  Yes  No  Not currently employed

Are you legally eligible for employment in the United States?  Yes  No

How were you referred to our agency? \_\_\_\_\_

**MILITARY BACKGROUND**

Have you ever served in the U.S. Military?  Yes  No. If yes, please list all periods of service. \* Individuals with military service MUST provide a copy of their discharge papers (DD 214 Form) for each period of service indicating HONORABLE to be eligible for Veteran's points. Applicants currently in the reserves/national guard MUST submit a letter from their Commanding Officer indicating good standing to be eligible for Veteran's points.

Active  Yes  No Branch \_\_\_\_\_ Anticipated date of release \_\_\_\_\_

\*Reserve  Yes  No \*National Guard  Yes  No \* Veteran  Yes  No

Type of discharge \_\_\_\_\_ Highest rank \_\_\_\_\_

Date Entered \_\_\_\_\_ Date Discharged \_\_\_\_\_

**EDUCATION AND TRAINING**

Circle Highest Grade Completed: 1 2 3 4 5 6 7 8 9 10 11 12

Check one:  High School Diploma  GED

Type of School	Name & Location of School	Semester Hours Completed	Graduated		Expected Graduation Date	Type of Diploma or Degree	Major/Minor Field of Study
			Yes	No			
College or University							
Technical, Vocational, or Business School							

Do you hold a Texas Peace Officers License through T.C.O.L.E.?  Yes  No If "Yes",

Indicate the highest license level that you hold:  Basic  Intermediate  Advanced  Master

Is your peace officer license current?  Yes  No If no, explain: \_\_\_\_\_



If you hold a license, certificate or other specialized certification that is required/related to position for which you are applying, complete the following:

License/Certification/PID#	Date Issued	Issued by (authority)	Location of Issuing Authority (city/state)

**EMPLOYMENT HISTORY**

In the space provided below, give your employment history beginning with your present or most recent employer. List each position held (even those with the same employer), including military, part-time, summer, volunteer work, and any periods of unemployment. Please attach additional copies of this form if necessary.

<b>Employer:</b> _____ <b>Address/City/State:</b> _____ <b>Phone:</b> _____ <b>Job Title:</b> _____ <b>Supervisor:</b> _____ <b>Title:</b> _____ <b>Reason for Leaving:</b> _____	<b>Start Date</b>	<b>End Date</b>
	<b>Starting Salary</b>	<b>Final Salary</b>
<b>Briefly Describe the Nature and Duties of Your Position</b>		

<b>Employer:</b> _____ <b>Address/City/State:</b> _____ <b>Phone:</b> _____ <b>Job Title:</b> _____ <b>Supervisor:</b> _____ <b>Title:</b> _____ <b>Reason for Leaving:</b> _____	<b>Start Date</b>	<b>End Date</b>
	<b>Starting Salary</b>	<b>Final Salary</b>
<b>Briefly Describe the Nature and Duties of Your Position</b>		

<b>Employer:</b> _____	<b>Start Date</b>	<b>End Date</b>
<b>Address/City/State:</b> _____		
<b>Phone:</b> _____ <b>Job Title:</b> _____	<b>Starting Salary</b>	<b>Final Salary</b>
<b>Supervisor:</b> _____ <b>Title:</b> _____		
<b>Reason for Leaving:</b> _____		
<b>Briefly Describe the Nature and Duties of Your Position</b>		

I, the undersigned, certify that I have read and fully understand this application in its entirety and that the information provided is true and complete to the best of my knowledge. I understand that should any statement I have made proves false, misleading, or erroneous, may result in the rejection of my application or discharge from the City of San Angelo. In submitting this application, I authorize the City of San Angelo to verify all data needed to support this application and to obtain references from my present and past employers. I further understand that this application becomes the property of the City of San Angelo and will not be returned.

I also understand that I will have the right to terminate my employment with the City of San Angelo at any time without notice and for any reason. I understand that the City of San Angelo has the same right according to established personnel policies. If required for the position, I also understand that as a condition of employment I will be subject to one or more of the following: driving record check, criminal history investigation, credit check, medical examination and/or a pre-employment drug-alcohol screening test. An employment offer received from the City is contingent upon favorable information received.

All individuals hired must satisfy the requirements of the Immigration Reform & Control Act of 1986. Proof of citizenship status and employment eligibility must be provided by all new hires.

Signature of Applicant: \_\_\_\_\_ Date of Application: \_\_\_\_\_

**APPLICATION RETURN PROCESS:**

You may return your application as follows:

1. Return to Human Resources, 72 W. College, Suite 201, San Angelo, TX 76903
2. Mail to Human Resources, 72 W. College, Suite 201, San Angelo, TX 76903
3. **Applications must be received by the deadline date.**

For Administrative Services Use Only				
<b>Notes:</b>				
<b>Date of App</b>	<b>Time of App</b>	<b>Application received by</b>	<b>Application Complete</b>	<b>PHS</b>
<b>Oral Interview</b>	<b>WTRC</b>	<b>EHC</b>	<b>Hire Date</b>	<b>Rev. 2/15/2018</b>

***This application questionnaire will be used to determine your eligibility for the position of Police Recruit. Deliberate misstatements or falsifications of required information are grounds for rejection.***

Answer all questions completely. If a question does not apply to you, enter "N/A" in the field provided. Additional pages will be provided if needed.

Name: (Last, First, Middle) \_\_\_\_\_

List all other names used (maiden, adoption, nickname, etc.): \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Are you a US citizen? Yes  No

**Have you ever been arrested** (regardless of conviction) by any law enforcement agency?

Yes  No

**Note: This includes juvenile as well as adult instances of arrest.**

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

Offense: \_\_\_\_\_

Agency: \_\_\_\_\_

Disposition: \_\_\_\_\_

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

Offense: \_\_\_\_\_

Agency: \_\_\_\_\_

Disposition: \_\_\_\_\_

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

Offense: \_\_\_\_\_

Agency: \_\_\_\_\_

Disposition: \_\_\_\_\_

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

Offense: \_\_\_\_\_

Agency: \_\_\_\_\_

Disposition: \_\_\_\_\_

**Have you ever committed a criminal offense, whether or not this act was detected?** ( i.e. burglary, criminal trespass, criminal mischief, assault, forgery, theft, theft from employer, family violence, prostitution, sexual assault, bribery, retaliation, perjury, impersonating a public servant, indecency with a child, incest, kidnapping, possession of child pornography, manufacture or delivery of a controlled substance) **Note: *This includes juvenile as well as adult criminal offenses,*** Yes  No

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

Offense: \_\_\_\_\_

Victim: \_\_\_\_\_

Explain: \_\_\_\_\_

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

Offense: \_\_\_\_\_

Victim: \_\_\_\_\_

Explain: \_\_\_\_\_

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

Offense: \_\_\_\_\_

Victim: \_\_\_\_\_

Explain: \_\_\_\_\_

List **ALL** traffic citations you have received in the last three years (3) years:

Date (mm/yy): \_\_\_\_\_

Type of Violation: \_\_\_\_\_

Issuing Agency: \_\_\_\_\_

Disposition: \_\_\_\_\_

Date (mm/yy): \_\_\_\_\_

Type of Violation: \_\_\_\_\_

Issuing Agency: \_\_\_\_\_

Disposition: \_\_\_\_\_

Date (mm/yy): \_\_\_\_\_

Type of Violation: \_\_\_\_\_

Issuing Agency: \_\_\_\_\_

Disposition: \_\_\_\_\_

Have you ever been convicted of a no insurance violation or had your license suspended? Yes  No

Offense: \_\_\_\_\_

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

List **ALL** accidents in which you have been involved in as a driver in the last three (3) years: *(whether reported or not)*

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

Investigating Agency: \_\_\_\_\_

Location: \_\_\_\_\_

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

Investigating Agency: \_\_\_\_\_

Location: \_\_\_\_\_

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

Investigating Agency: \_\_\_\_\_

Location: \_\_\_\_\_

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

Investigating Agency: \_\_\_\_\_

Location: \_\_\_\_\_

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

Investigating Agency: \_\_\_\_\_

Location: \_\_\_\_\_

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

Investigating Agency: \_\_\_\_\_

Location: \_\_\_\_\_

Do you habitually use intoxicating beverages? Yes  No

**Have you ever committed any of the below criminal offenses, whether or not this act was detected?**

<b>Offense</b>			<b>Date of Offense</b>
Criminal Negligent Homicide	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Kidnapping	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Indecent Exposure	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Indecency with a Child	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Incest	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Bribery	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Tampering with a Witness	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Retaliation	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Perjury	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Tampering/Fabricating Physical Evidence	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Tampering with a Governmental Record	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Impersonating Public Servant	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Permitting/Facilitating Escape	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Implements for Escape	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Abuse of Official Capacity	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Official Oppression	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Violation of Civil Rights of a Prisoner	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Misuse of Official Information	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Theft by Public Servant of Government Property over which he exercises control in his/her official capacity	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Abuse of Corpse	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Prostitution	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Promotion of Prostitution	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Aggravated Promotion of Prostitution	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Sexual Performance by a Child	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Possession of Child Pornography	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Gambling Promotion	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
Possession of Gambling Devices, Equipment, or Paraphernalia	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____

List any controlled substance that you have ever used, tried or experimented with. Drug use covers all words used to describe the ingestion, inhalation, or injection of any drug into a person's system.

Drug/Substance		Number of Times	Date Last Used
Marijuana	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
Hashish	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
Methamphetamine	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
Amphetamines	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
Cocaine/Crack	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
LSD	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
"XTC"	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
PCP	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
Peyote	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
Mushrooms	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
Quaaludes	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
Barbiturates	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
Tranquilizers	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
Heroin	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
Steroids	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
Any Designer Drug	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
K-2	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
Synthetic Marijuana	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____
Bath Salts	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	_____

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

\_\_\_\_\_  
Date

**For Official Use Only**

Approved  Disqualified