



Edgewood Police Department
P.O. Box 3610
Edgewood, NM 87015
ph. 505.281.5717
fax.505.281.3869

Ron Crow
Chief of Police

PERSONAL HISTORY STATEMENT INSTRUCTIONS

TO ALL CANDIDATES:

The attached "Personal History Statement" is an important document in the processing of your application to become a Police Officer. If this form is not completed properly and legibly, your application will not be accepted, and it will be returned to you. **It is your responsibility to read each question carefully and answer fully and truthfully.**

Cadets-You must return the completed "Personal History Statement" and other attached forms to this office in person, within five working days after your interview. If there is a problem meeting this deadline, contact the Chief of Police at (505) 281-5717 to make other arrangements.

Candidates who reside out of town or out of state must certify mail the personal history statement within (10) days after their interview.

Candidates who need more time to locate documents such as: birth Certificates, High School Diplomas, DD-214 military release forms etc., should still mail in their personal history statement and other attached forms within the time limit. We will accept the other supporting documentation at a later date, as long as you notify the Police Department in writing and make arrangements to supply them later.

Remember the handwriting, neatness, punctuation, spelling, ability to follow written direction, etc., is evaluated as part of the selection process.

NOTE: INCOMPLETE INFORMATION IN ANY AREA OF THIS PACKET WILL RESULT IN THE PROCESSING OF YOUR APPLICATION BEING HALTED. YOU WILL NOT CONTINUE IN THE SELECTION PROCESS UNTIL THE MISSING INFORMATION IS PROVIDED.

1. If your name has changed or if you have an alias, be sure to list these and indicate which name was used during what period of time.
2. Each time you give a person's name, give a complete name. Include complete addresses and zip codes. Also, give a telephone number where the person or business can be reached.
3. Print legibly. If you need additional space, use a full-size sheet of paper and leave a blank space of at least one inch at the top. Be sure to list the number of the question you are answering on the added sheet.
4. All phone numbers and zip codes must be current.
5. (Question #8) List the name of the person with whom you live and your relationship.
6. (Question #9) Start with your present address, and work your way back to past addresses.
7. (Question #12 & #13) List all traffic violations (parking, etc.), since you have been driving. Give date of occurrence, location and the name of the police agency that took the report or had knowledge of the incident.
8. (Question #19) Do not include layoffs from employment due to lack of available work. "Terminated or asked to resign for purposes of this question means fired, or asked to quit instead of being fired.
9. (Question #19) Start with your present employment and work your way back at least 10 years. If there were periods of unemployment, be as specific with dates as possible. **Include complete addresses and zip codes.**
10. (Question #57) List business and addresses of employment, home and work phone numbers, as well as home address of all your personal reference. **Include complete addresses and zip codes.**
11. A Town of Edgewood Application for employment is enclosed. Please fill it out entirely and print legibly.
12. Four forms requiring signatures are attached to this questionnaire. The only action you need to take with these forms is sign and date them. We will fill in the rest of the information. This includes the military form.
13. The following forms in your personal history statement packet **must be notarized:**
 - (A) Personal History Statement
 - (B) Release of Liability/Polygraph
 - (C) Background History/Records Release-Waiver of Liability
 - (D) Urinalysis Test Waiver
14. You are required to furnish a **Notarized** copy of your **High School Diploma** or **GED certificate** an Official copy of your **high school transcripts**, a **copy** of your state birth certificate and a notarized copy of your DD-214 form if you are a veteran.

15. It is your responsibility to make or obtain these forms. **This department will not be responsible for any other original documents you submit.**
16. Note: Refer to page 12 for further instructions on other things that needs to accompany this personal history statement.

Note: Recruitment Selection staff will make and notarize copies of original documents only as a last alternative. However, candidates should attempt to have this done elsewhere.

When you return your Personal History Statement, it will be reviewed by one of the Recruitment officers.

If you have any problems answering the questions on any of these forms or if you do not understand the directions, call or come by the Edgewood Police Department located at 18 Municipal Way, Edgewood NM 87015. You may also mail the application packet to the above address if you live out of town/state.

REMINDER: ANSWER EACH AREA OF EACH QUESTION. IF WE ASK FOR IT, WE NEED IT.

**TOWN OF EDGEWOOD
EDGEWOOD POLICE DEPARTMENT
PERSONAL HISTORY STATEMENT**

APPLICATION FOR POSISTION OF:

Police Officer____ Animal Control Officer____ Civilian Employee____

____-____-____
Social Security Number

Date

GENERAL INSTRUCTIONS

This "Personal History Statement" is an important document in the selection process. If this form is not completed properly and legibly your application cannot be processed. **Use only black ink.**

Hand print and or type an answer to every question. If the question does not apply to you, so indicate with "N/A". If space available is insufficient, use a separate sheet of paper and number each answer with the correct number of the question. Completeness is important.

Do not misstate or omit material facts. Your statements are subject to verification, and any attempts to deceive or falsify information or to omit pertinent information will be cause for your elimination from the selection process.

1. _____
Legal Name (Last) (First) (Middle)

2. _____
By what other name(s) have you been known (Maiden, Alias, and Nicknames etc.)

3. _____
Residence Address (Number, Street, Apt. #, City, State, Zip Code, Phone Number)

4. _____
Mailing Address (If different than above)

5. _____
Date of Birth Place of Birth (City, County, State)

6. Are you a U.S. Citizen by birth or a naturalized Citizen? _____
If naturalized, list city and state when naturalized. _____

7. _____
Sex: Age: Height: Weight: Color of Hair: Color of Eyes:

8. _____
Name of person whom you live with Relationship

9. In chronological order (Present to Past). List each and every place you have resided.

A. _____
MO/YR to MO/YR Address (Street, City, State and Zip Code) Phone #

Name of person lived with, relationship, and his/her current address Phone #

Name of Company/person buying/leasing/renting from and their complete address and number

B. _____
MO/YR to MO/YR Address (Street, City, State and Zip Code) Phone #

Name of person lived with, relationship, and his/her current address Phone #

Name of Company/person buying/leasing/renting from and their complete address and number

C. _____
MO/YR to MO/YR Address (Street, City, State and Zip Code) Phone #

Name of person lived with, relationship, and his/her current address Phone #

Name of Company/person buying/leasing/renting from and their complete address and number

D. _____
MO/YR to MO/YR Address (Street, City, State and Zip Code) Phone #

Name of person lived with, relationship, and his/her current address Phone #

Name of Company/person buying/leasing/renting from and their complete address and number

E. _____
MO/YR to MO/YR Address (Street, City, State and Zip Code) Phone #

Name of person lived with, relationship, and his/her current address Phone #

Name of Company/person buying/leasing/renting from and their complete address and number

F. _____

MO/YR to MO/YR Address (Street, City, State and Zip Code) Phone #

Name of person lived with, relationship, and his/her current address Phone #

10. Were you ever arrested to taken into custody or been issued a misdemeanor citation? Yes or No

11. List below all **arrests** and **misdemeanor citations**, including juvenile arrests.

Date	Violation (Actual or Charge)	Location (City, State)	Court Disposition	Police Agency

12. List ALL traffic violations including parking, warning, and dismissed citations.

Date	Violation (Actual or Charge)	Location (City, State)	Court Disposition	Police Agency

13. List ALL traffic accidents in which you were the DRIVER.

Date	Location (City, State)	Police Agency

14. Were you ever a plaintiff, defendant, petitioner, or respondent in a civil proceeding (including Bankruptcy)? Yes or No _____. List ALL civil actions in which you were a party of Summoned/subpoenaed.

Date	Action or Proceeding	As Plaintiff, Defendant, Petitioner, Respondent or Witness	Court Disposition

SUBVERSIVE AFFILIATIONS

15. Are you a member or have you ever been a member 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 _____ or No _____ if yes, attach a separate sheet with an explanation.

EMPLOYMENT

16. Were you ever terminated/fired, given the option of resigning in lieu of termination or quit before being fired? Yes ____ or No ____ (Give details below)

Employer	Address	Date	Supervisor	Reason for Discharge

17. Were you ever subject to disciplinary action in connection with any employment? Yes or No ____

Unemployed From	To	Reason
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C. Month/Year to and from	Employer Name	Employer Phone
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Position Held	Employer's Address	Reason for Leaving
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Brief Description of Duties	Immediate Supervisor
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Unemployed From	To	Reason
-----------------	----	--------

D. Month/Year to and from	Employer Name	Employer Phone
---------------------------	---------------	----------------

Position Held	Employer's Address	Reason for Leaving
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Brief Description of Duties	Immediate Supervisor
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Unemployed From	To	Reason
-----------------	----	--------

E. Month/Year to and from	Employer Name	Employer Phone
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Position Held	Employer's Address	Reason for Leaving
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Brief Description of Duties	Immediate Supervisor
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Unemployed From To Reason

SOCIAL STATUS

20. Is your present social status single, married, separated, or divorced? _____

21. Were you ever legally separated? (list date(s) and spouse(s) _____

22. List all marriages below.

Date City/State Spouse's Former and current Name Address Home #

23. Who do you currently live with? Name _____
Relationship _____

24. Does your spouse or roommate work? _____ Can they be contacted at work? Yes or No

25. List below all divorces, annulments and separations.

Type Action Date City/State Petitioner Reason

26. List below every child born to you, adopted children, stepchildren, or other dependents.

Name Date of Birth Place of Birth with whom, and where does the child currently reside

27. Are you now supporting all children and/or dependents listed above? Yes _____ or No _____
If no, explain _____

28. Have you ever been involved in a paternity suit as a petitioner or defendant? _____
If yes, explain _____

MILITARY SERVICE

29. Have you ever served in the armed forces of the United States or any other country?
Yes _____ or No _____ (If no, go to question #36)

30. Which branch(s) of service? _____

31. List periods of continuous service under each branch of armed forces.

From _____ To _____ Branch _____ Pay Grade _____ Serial Number _____

From _____ To _____ Branch _____ Pay Grade _____ Serial Number _____

From _____ To _____ Branch _____ Pay Grade _____ Serial Number _____

From _____ To _____ Branch _____ Pay Grade _____ Serial Number _____

32. What type of DISCHARGE (honorable, dishonorable, general, medical, etc.)

33. Were you ever court martialed, tried on charges, been the subject of a summary court, captain's mast, company punishment, Article 15, or any other type of military discipline?
Yes _____ or No _____
Number of times _____ Explanation _____

34. Reason for discharge from the military (for example, end of obligated service).

35. Are you currently in the National Guard, or Active Reserve? Yes _____ No _____
Branch _____ Pay Grade _____

Where are you currently stationed or where do you currently drill? _____

36. Did you register for the military draft when you turned eighteen? Yes _____ No _____

If no, explain _____

*NOTE: YOU WILL BE REQUIRED TO PROVIDE A CURRENT CREDIT REPORT

43. Are you the co-maker or co-signer on any loans? _____ If yes, explain _____

44. Have you ever been bonded? _____

Reason Date By Whom (Name and Complete Address) Phone

45. Have you ever been refused a bond? _____ If yes, explain _____

46. Do you possess:

A. Regular Driver's License? _____ Number _____ Dates _____

B. Chauffeur's License? _____ Number _____ Dates _____

C. Other _____

47. Did you ever have a license issued by another state (s)? _____

48. Was your license EVER suspended or revoked? _____ Date (s) _____

City _____ State _____ Reason _____

49. List all vehicles that you currently own.

Year	Make	Body Type	Color	License Number (State, Exp. Yr)
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50. Are all the above vehicles (s) currently covered by liability insurance? Yes ___ or No ___

Company _____

If no, indicate vehicle (s) and reason why uninsured. _____

51. List the name of your father, step-father, mother, step-mother's (maiden Name), and siblings below.

Name	Address	Phone	Relationship	Living/Deceased
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

52. Have you ever been fingerprinted? Yes _____ No _____

When _____ Where _____ Purpose _____

When _____ Where _____ Purpose _____

53. Do you have any knowledge or information, in addition to that specifically asked for in the preceding which is or may be relevant, directly or indirectly, in connection with an investigation of your eligibility or concerning your character, temperance, habits, employment, education, criminal records, etc.?

54. Do you know of anything that would disqualify you from the selection process or prevent you from the full discharge of your duties as a police cadet? Yes _____ No _____ If yes, explain _____

55. What prompts you to make an application to the Sheriff's Office? _____

56. Have you any specialized area of interest in the Sheriff's Office? _____

57. REFERENCES: List the NAMES AND COMPLETE ADDRESSES of SIX reliable people, other than relatives, past employers or supervisors, who know you well enough to provide current information about you.

1.	_____	_____	_____
	Name	Home Address	Phone # Home
	_____	_____	_____
	Occupation	Employer's Address	Phone # Work
2.	_____	_____	_____
	Name	Home Address	Phone # Home
	_____	_____	_____
	Occupation	Employer's Address	Phone # Work
3.	_____	_____	_____
	Name	Home Address	Phone # Home
	_____	_____	_____
	Occupation	Employer's Address	Phone # Work
4.	_____	_____	_____
	Name	Home Address	Phone # Home
	_____	_____	_____
	Occupation	Employer's Address	Phone # Work
5.	_____	_____	_____
	Name	Home Address	Phone # Home
	_____	_____	_____
	Occupation	Employer's Address	Phone # Work

6.

Name	Home Address	Phone # Home
Occupation	Employer's Address	Phone # Work

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS PERSONAL HISTORY STATEMENT IS CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I FURTHER UNDERSTAND THAT ANY MISREPRESENTATION, OMISSIONS, OR FALSIFICATIONS MAY BE DEEMED SUFFICIENT CAUSE FOR REJECTION FROM THE SELECTION PROCESS OR TERMINATION OF FUTURE EMPLOYMENT.

IN WITNESS WHEREOF, I HAVE EXECUTED THIS REQUEST
AT _____ ON THE DAY OF _____ 20____
(County, State)

APPLICANT'S SIGNATURE

DATE

Subscribed and sworn to before me this _____ day of _____, 20____

Notary Public in and for said County and State.

My Commission Expires _____.

**Edgewood Police Department
Recruiting/Selection Unit
Candidate Identification Information**

Date Fingerprinted: _____ Position: _____

Name: _____ D.O.B. ____/____/____
First, Middle, and Last Name

Race: _____ Sex: _____

Address: _____

City: _____ State: _____ Zip: _____

Height in Inches: _____ Weight: _____ Eye color: _____

Hair Color: _____ City and State of Birth: _____

Occupation: _____ Social Security #: _____

Identifying Characteristics: (Scars, Marks, Tattoos, Birthmarks etc.)

Left: _____ Right: _____

Left: _____ Right: _____

Left: _____ Right: _____

Father's Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Mother's Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Spouse's Name: _____ Address: _____

City: _____ State _____ Zip: _____

Brother and Sisters. If you don't know their complete address list only the city and state.

Name: _____ Address: _____

Name: _____ Address: _____

**AUTHORIZATION TO RELEASE INFORMATION TO EDGEWOOD POLICE
DEPARTMENT AND WAIVER OF LIABILITY**

To: _____

From: _____

Applicant's Name (please print)

I am an applicant for employment in a position with the Edgewood Police Department (EPD). The EPD needs to thoroughly investigate my employment background and personal history to evaluate my qualifications to hold the position for which I have applied. It is in the public's interest that all relevant information concerning my personal and employment history is disclosed to the EPD.

I hereby authorize the EPD Recruiting/Selection personnel bearing this document or a copy of this document to review and obtain copies of any information in your files pertaining to my employment and personal history.

I do hereby authorize a review of and full disclosure of all records, or any part thereof; concerning myself; by and to any duly authorized agent of the EPD.

I consent to your release of any and all public and private information that you may have concerning me and my work record; background and reputation; military service records; educational records; financial status; criminal history record, including any arrest records; any information contained in investigation files; efficiency ratings; complaints or grievances filed by or against me; the records or recollections of attorneys at law, or any counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had, an interest; attendance records; polygraph examinations; and any internal affairs investigations and discipline; including any files which are deemed to be confidential, and/or sealed.

I request that you allow employees, including supervisors and coworkers, to be interviewed by EPD Recruiting/Selection deputies regarding any aspects of my employment with you or your organization.

I hereby release you, your organization and all others from liability or damages that may result from furnishing the information requested, including your officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with such. I direct you to release such information upon request of the duly accredited representative of the EPD regardless of any agreement I may have made with you previously to the contrary.

For and in consideration of the EPD's acceptance and processing of my application for employment, I agree to indemnify and to hold the Town of Edgewood, its agents and employees harmless from any and all claims and liability associated with my application for employment or in any way connected with the decision whether or not to employ me.

I understand that should information of a serious criminal nature surface as a result of this investigation, such information may be turned over to the proper authorities.

I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access to and disclosure of records, and I waive those rights with the understanding that information furnished will be used by the EPD in conjunction with evaluating my application for employment.

I hereby acknowledge, understand and agree that all information and materials gathered by the EPD is and shall remain the sole and exclusive property of Town of Edgewood , including but not limited to all test instruments, questionnaires, inquiries, acknowledgements, credit reports, and any other document which might be found in my background file.

A photocopy or fax copy of this Authorization and Release form will be as valid as the original thereof even though the said photocopy or fax copy does not contain original writing of my signature. Should there be any question as to the validity of this Authorization and Release, you may contact me at the address listed on this form. I agree to pay any and all charges or fees concerning this request and can be billed for such charges at the address listed on this form.

I authorize any employee or representative of (Edgewood Police Department) to search N-DEx to obtain information regarding my qualifications and fitness to serve as a (employee type_____).

I understand that N-DEx is an electronic repository of information from federal, state, local, tribal, and regional criminal justice entities. This national information sharing system permits users to search and analyze data from the entire criminal justice cycle, including crime incident and investigation reports; arrest, booking, and incarceration reports; and probation and parole information.

This release is executed with full knowledge, understanding, and consent that any information discovered in N-DEx may be used for the official purpose of conducting a complete employment background investigation. I also understand that any information found in N-DEx will not be disclosed to any other person or agency unless authorized and consistent with applicable law.

I release (Town of Edgewood) from any liability or damage that may result from the use of information obtained from N-DEx. (CJIS National Data Exchange Policy and Operating Manual, Version 4.0, Sections 1.3.6; 1.3.6.3)

Applicants Name:

(Please Print)

Social Security Number:

Applicants Address:

Signature: _____ Date: ____/____/____

Subscribed and sworn to before me this _____ day of _____, 20____.

_____ My commission expires _____

(Notary Public)

AUTHORIZATION FOR RELEASE OF INFORMATION

I, _____
NAME (MUST BE PRINTED-LEGIBLY) (SS#) (DOB)

PURSUANT TO NMSA 1978, SECTION 29-10-6(A) (Repl. Pamp. 1990), OF THE NEW MEXICO ARREST RECORD INFORMATION ACT, HEREBY APPOINT:

NAME (MUST BE PRINTED) (IF NO AGENT, PRINT "SELF")

ADDRESS: _____

TO BE THE AUTHORIZED AGENT FOR ME FOR THE PURPOSE OF INSPECTING (AND /OR OBTAINING COPIES OF) ANY NEW MEXICO ARREST FINGERPRINT CARD SUPPORTED ARREST RECORD INFORMATION MAINTAINED BY THE DEPARTMENT OF PUBLIC SAFETY, INCLUDING INFORMATION CONCERNING FELONY OR MISDEMEANOR ARRESTS AND INFORMATION OBTAINED FROM RELEVANT FINGERPRINT DATABASES.

TO THE CUSTODIAN OF THE RECORDS IN QUESTION, I HEREBY DIRECT YOU TO RELEASE SUCH INFORMATION TO THE AUTHORIZED AGENT IDENTIFIED ABOVE.

I HEREBY RELEASE THE CUSTODIAN OR CUSTODIANS OF SUCH RECORDS AND THE DEPARTMENT OF PUBLIC SAFETY, INCLUDING ANY OF THEIR AGENTS, EMPLOYEES, OR REPRESENTATIVES IN ANY CAPACITY, FROM ANY AND ALL CLAIMS OF LIABILITY OR DAMAGE OF WHATEVER KIND OR NATURE, WHICH AT ANY TIME COULD RESULT TO ME, MY HEIRS, ASSIGNS, ASSOCIATES, PERSONAL REPRESENTATIVE OR REPRESENTATIVES OF ANY NATURE BECAUSE OF COMPLIANCE BY SAID CUSTODIAN OR CUSTODIANS WITH THIS "AUTHORIZATION FOR RELEASE OF INFORMATION" AND MY REQUEST CONTAINED HEREIN FOR THIS RELEASE OR BECAUSE OF ANY USE OF THESE RECORDS. THIS RELEASE IS BINDING, NOW AND IN THE FUTURE AND IS VALID AND BINDING UPON MY HEIRS, ASSIGNS, ASSOCIATES, PERSONAL REPRESENTATIVE OR REPRESENTATIVES OF ANY NATURE.

APPLICANT SIGNATURE: _____

DATE: _____

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____, 20_____

(SEAL)

(NOTARY PUBLIC)

MY COMMISSION EXPIRES: _____

**NEW MEXICO DEPARTMENT OF PUBLIC SAFETY
AUTHORIZATION FOR RELEASE OF INFORMATION**

I, _____do hereby waive any and all privilege that I may have in my personnel file, any internal affairs files or any other files, documents or other information relating to my work history with the New Mexico Department of Public Safety or any of its predecessor agencies which is in the custody or control of the Personnel Management Bureau or any other employees or former employees of the New Mexico Department of Public

Safety or any of its predecessor agencies, and I release the New Mexico Department of Public Safety any of its predecessor agencies and any employees or former employees of the New Mexico Department of Public Safety from liability and otherwise hold them harmless and allow them to disseminate said files, documents or other information to _____ Further, I hereby release the custodian or custodians of such records and the Department of Public Safety and any of its predecessor agencies, including any of their agents, employees, former employees or representatives in any capacity, from any and all claims of liability or damage of whatever kind or nature which at any time could result to me, my heirs, assigns, associates, personal representative or representative of any nature because of any use of these records or information. I waive any right of action, cause of action, or other means of redress against any person or entity which might arise from supplying files, documents or other information concerning my employment history with the New Mexico Department of Public Safety or any of its predecessor agencies to _____. This release is binding, now and in the future, on my heirs, assigns, associates, personal representative or representative of any nature.

SIGNED: _____ DATE: _____
WITNESSED BY: _____

OR

_____ SUBSCRIBED AND SWORN to before me at _____, this
_____ day of _____ 20_____.

NOTARY PUBLIC

MY COMMISSION EXPIRES:
