

ROCKWALL COUNTY SHERIFF'S POSSE

950 Townsend Drive Rockwall, TX. 75087

The following information is needed to complete your application for the Rockwall County Sheriff's Posse:

Please complete the application thoroughly, furnishing all zip codes and telephone numbers where requested. Your completed application must be hand delivered to the Rockwall County Sheriff's Office dispatch window, or to a Posse meeting on the 1st Tuesday of each month, or to any Posse member. For further information contact Jim Wardlaw at 972-771-8602 or 972-365-6239. If you wish to discontinue processing this application, please notify us immediately.

REQUIREMENTS FOR MEMBERSHIP IN THE ROCKWALL COUNTY SHERIFF'S POSSE (NON-CERTIFIED OFFICERS):

1. Application completed.
2. Criminal history check processed by Sheriff's Office (Fingerprints taken by the Sheriff's Office)
3. References (at least three required--Telephone numbers must be included)
4. Membership Committee Review (Applicant will be notified by the Committee for meeting date and time)
5. Horse Committee Review (Applicant will be notified by the Committee for meeting date and time)
6. Applicant will be notified of final results.
7. If accepted for membership, Sheriff's Posse ID card will be made by Rockwall County

SHERIFF'S POSSE, ROCKWALL COUNTY

****PRINT ALL INFORMATION IN BLACK INK OR USE TYPEWRITER****

Date _____ Social Security No _____ Age _____

Full Name _____ Telephone _____

Full Address _____ Business Address _____

Date of Birth: _____ Height: _____ Weight: _____ Color Hair: _____ Eye Color: _____

Place of Birth: City _____ State _____

Marital Status (circle status) Married Widowed Single Divorced Separated

(Give Spouse's Name) _____

Are you a citizen of the U.S.A.? _____ How long have you lived in Rockwall County? _____

Give addresses for the past 5 years, give length of time at each location:

Have you any physical/crippling defects? _____ If so, Describe:

Have you ever been involved in a Criminal or Civil Suit? _____

Have you ever been arrested for anything OTHER than traffic violations? _____ This includes any other City, Town or State. If so, give date, location, charges and disposition:

Have you ever worked for Rockwall County _____ If so, when? _____

What Position? _____ Reason for leaving? _____

Do you have any relatives working for Rockwall County? _____

Name and Department? _____

Military Service: Branch _____ Type of service _____ Highest Rank _____

Record Service From _____ to _____ Discharge attained _____

EDUCATION

Name of Grade School _____ Yrs Attended _____ Graduate? _____ Year _____

Name of High School _____ Yrs Attended _____ Graduate? _____ Year _____

Name of College _____ Yrs Attended _____ Graduate? _____ Year _____

Summarize any additional education or experience you have which qualifies you for the position for which you are applying.

IF YOU ARE A CERTIFIED RESERVE OFFICER, A COPY OF YOUR CERTIFICATION MUST BE ATTACHED
ALL QUESTIONS MUST BE ANSWERED, IF ADDITIONAL SPACE NEEDED ATTACH ANOTHER SHEET.

List in order the last two places of employment within the last five years:
Company Name and Address, Type of work, Dates of Employment
(List present position first, etc.)

1. _____

2. _____

PERSONAL REFERENCES

(At least three references)

List complete address including Zip, Phone Numbers, Business and Residence , Occupation- Do not list relatives.

1.

2.

3.

NOTE: Answer all statements fully. ANY FALSE STATEMENT WILL DISQUALIFY YOU!

I certify that all answers and statements are true and correct to the best of my knowledge and I furthermore understand that ANY FALSE ANSWERS OR STATEMENTS WILL DISQUALIFY ME from membership in the Rockwall County Sheriff's Posse.

Signature:

Date Signed:

ROCKWALL COUNTY SHERIFF'S POSSE
INFORMATION AND EVALUATION DATA

ROCKWALL, TEXAS 75087

RIDER

Rider's Name _____ Date _____
Rider's Address _____ City _____ State _____
Telephone Numbers (Res) _____ (Bus) _____
Badge# _____ SS# _____ Driver's Lic.# _____
Age _____ Height _____ Weight _____

HORSE

Horse's Name _____
Color _____ Markings _____
Height _____ Weight _____ Age _____ Sex _____
Condition _____ Disposition _____
Conformation _____
Ability to: Stand Still _____ Walk _____ Trot _____ Lope _____ Backup _____ Sidepass _____
Negative E.I.A (Coggans Test) Yes _____ No _____
Health Certificate _____
Picture of Horse and Rider _____
Approved _____ Further Evaluation at Later Date _____
Disapproved _____
Comments: _____

Horse Committee/ Inspectors – Signatures:

1. _____
2. _____
3. _____

Approved _____
Disapproved _____
Further Evaluation at Later Date _____

THE STATE OF TEXAS)

COUNTY OF DALLAS)

KNOW ALL MEN BY THESE PRESENTS:

THAT I, THE UNDERSIGNED _____, a private person for and in consideration of the privilege of participating as a voluntary member of the Sheriff's Posse for the County of /Rockwall, Texas, and recognizing that said volunteer posse activity could involve certain inherent risks, do hereby agree to assume any and all risks attendant to such posse activity, and do hereby release the County of Rockwall, it's Sheriff and Sheriff's Department, agents and employees, in both their public and private capacities, from any and all liability, claims, suits, demands or causes of action which may arise from such participation or activity as a volunteer member of the Posse.

IT IS FURTHER AGREED that the execution of this release shall not constitute a waiver by the County of Rockwall of the defense of government immunity, where applicable, or to any defenses recognized by the Courts of this State.

SIGNED the ____ day of _____, 20____

Signature: _____

Adress: _____

Telephone: _____

Cell Phone #: _____

WITNESS: _____

Date: _____

NOTIFICATION AND RELEASE

In connection with my application for appointment to the **Rockwall County Sheriff's Posse**. I understand a background investigation will be performed. This may include a criminal record check in specified counties and or jurisdictions and other public records, if any requested in the investigation. I understand that such report could contain criminal records from federal, state and other agencies that maintain such record as well as other public record information. *In addition, I agree that my current and previous employers may be contacted regarding my job performance, as provided in Chapter 103 Texas Labor Code, and to verify my dates of employment. With my approval, I understand that the **Rockwall County Sheriff's Posse** can, if they choose to do so contact my current and previous employers.*

I authorize, without reservation or company selected by Rockwall County Sheriff's Posse to do this background to furnish the above-mentioned information. This may include information regarding my job performance and tenure with current and former employers.

I have the right to make a request to the individual or company that performs this background, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including the source of information and the recipients of any reports o me which said individual or company had previously furnished within the two year period preceding my request. I also hereby authorize **Rockwall County Sheriff's Posse** to obtain all information as a result of the background investigation from individual or company selected to conduct this background. All information obtained will be used solely for the purpose of evaluating a candidate's qualifications for membership in the **Rockwall County Sheriff's Posse**.

Rockwall County Sheriff's Posse

Prospective organization

Name of Person Requesting Background

Applicant (Print full Name)

Current Street Address – City, State & Zip

Previous Home Address – City, State & Zip

All Previous Names (Example – Maiden Name)

Date of Birth

Driver License # and State

Social Security Number

Signature: _____

Date: _____