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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 deputy sheriff. 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.**

You must return the completed "Personal History Statement" and other attached forms to this office in person, within five working days after being notified of your BPAD results. If there is a problem meeting this deadline, contact one of the recruitment officers at (505) 986-2402 to make other arrangements.

Candidates who reside out of town or out of state must mail the personal history statement within (10) days of receiving their BPAD results.

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 recruitment office 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, given 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 addresses of all your personal references. **Include complete addresses and zip codes.**
11. A County of Santa Fe Application for employment is enclosed. Please fill it out entirely and print legibly or type.
12. Four forms requiring signatures are attached to this questionnaire. The only action you need to take with these forms is to 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 submitted notarized:** *(This can be done in the recruitment office if necessary)*

- (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**,
 - your original **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. Birth certificates will be returned upon completion of the selection process. 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 need 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 Santa Fe County Sheriff's Office's recruiting office located at 35 Camino Justicia, Santa Fe, NM 87507, (505) 986-2402. 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.

**COUNTY OF SANTA FE
SANTA FE COUNTY SHERIFF'S OFFICE
PERSONAL HISTORY STATEMENT**

APPLICATION FOR POSITION OF:

LATERAL DEPUTY DEPUTY CADET TRANSPORT OFFICER RESERVE DEPUTY
(check on of the above)

_____-_____-_____
Social Security Number

_____/_____/_____
Date (MM/DD/YYYY)

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 attempt 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) (Full Middle Name)

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) City State Zip Code

5. _____ - _____
Date of Birth (Month - Day - Year) Place of Birth: City County State

6. Are you a U.S. Citizen by birth or a naturalized Citizen? No Yes: by birth naturalized
If naturalized, list city and state where naturalized. _____

7. _____ - _____
Sex: Age: Height (Ft-in): Weight(lbs): Color of Hair: Color of Eyes:

8. a. _____
b. _____
c. _____
d. _____
e. _____
f. _____
g. _____
h. _____
i. _____
j. _____

Name(s) of person(s) with whom you currently live Relationship

9. **In chronological order** (Present to Past) List each and every place you have resided in the **Last Twenty Years**. All time periods **must** be accounted for.

1. Mo/YYYY to Mo/YYYY						
/ to /						
() -						
Address (Str #, Apt #)	City,	State,	Zip,	County	Phone #	
() -						
Name of Person Lived With		Relationship		And His/Her Current Phone Number		
Name of Company/Person Buying/Leasing/Renting From						
2. Mo/YYYY to Mo/YYYY						
/ to /						
() -						
Address (Str #, Apt #)	City,	State,	Zip,	County	Phone #	
() -						
Name of Person Lived With		Relationship		And His/Her Current Phone Number		
Name of Company/Person Buying/Leasing/Renting From						
3. Mo/YYYY to Mo/YYYY						
/ to /						
() -						
Address (Str #, Apt #)	City,	State,	Zip,	County	Phone #	
() -						
Name of Person Lived With		Relationship		And His/Her Current Phone Number		
Name of Company/Person Buying/Leasing/Renting From						
4. Mo/YYYY to Mo/YYYY						
/ to /						
() -						
Address (Str #, Apt #)	City,	State,	Zip,	County	Phone #	
() -						
Name of Person Lived With		Relationship		And His/Her Current Phone Number		
Name of Company/Person Buying/Leasing/Renting From						
5. Mo/YYYY to Mo/YYYY						
/ to /						
() -						
Address (Str #, Apt #)	City,	State,	Zip,	County	Phone #	
() -						
Name of Person Lived With		Relationship		And His/Her Current Phone Number		
Name of Company/Person Buying/Leasing/Renting From						

Check if Additional pages are submitted

Use the residence Continuation page or make copies of this page if additional information is to be submitted. You may submit additional information on a blank sheet of paper, but you **MUST** supply all the above required information for each additional entry. Number your entries.

**ARREST, SUMMONS, ETC.
(ANSWER ALL QUESTIONS)**

10. Were you EVER arrested or taken into custody or been issues a misdemeanor citation?
Yes or No

11. List below all arrests, including juvenile arrests, and any misdemeanor citations you have been issued.

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

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

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

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

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

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

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

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

Check if Additional pages are submitted

Make copies of this page if additional information is to be submitted.
You may submit additional information on a blank sheet of paper, but you **MUST** supply all the above required information for each additional entry. Number your entries.

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	Supervisor	Complete Address	Date	Reason for Discharge

17. Were you ever subject to disciplinary action in connection with any employment?

Yes or No (Give details below)

18. Have you ever previously submitted an application to the Santa Fe County Sheriff's Office or any other law enforcement or corrections agency?

Yes or No If yes, give details below.

Date Applied	Organization	Complete Address	Phone #	Application Status
/ /				() -
/ /				() -
/ /				() -
/ /				() -

19. Were you ever rejected for employment by a law enforcement agency or corrections agency?

Yes or No If yes, give details below.

Date Applied	Organization	Complete Address	Phone #	Application Status
/ /				() -
/ /				() -
/ /				() -
/ /				() -

**SANTA FE COUNTY SHERIFF'S OFFICE
RECRUITING/SELECTION UNIT
CANDIDATE IDENTIFICATION INFORMATION**

Date Fingerprinted: _____ / _____ / _____
(DD/MM.YYYY)

Position: LATERAL DEPUTY DEPUTY CADET TRANSPORT OFFICER RESERVE DEPUTY
(check on of the above)

Name: _____ D.O.B: _____
(First Middle Last Name) (Month - Day - Year)

Race: _____ Sex: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Height (Ft-in): _____ - _____ Weight: _____ Eye Color: _____

Hair Color: _____ City, 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 Code: _____

Mother's Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Spouse's Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____

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

- Brother Sister Name: _____
Address: _____

**RELEASE/WAIVER OF LIABILITY
ACKNOWLEDGEMENT OF CONFIDENTIALITY**

To: _____

From: _____
Applicant's Name (Please Print)

I am an applicant for a position with the Santa Fe County Sheriff's Office. The department 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 Santa Fe County Sheriff's Office.

I hereby authorize the Santa Fe County Sheriff's Office Recruiting/Selection personnel bearing this document to obtain any information in your files pertaining to my employment records and I hereby direct you to release such information upon request to the bearer.

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 Recruiting/Selection Section, Whether said records are of public, private or confidential nature.

The intent of this authorization is to give my full consent for full and complete disclosure. I reiterate and emphasize that the intent of this authorization is to provide full and free access to my background and history of my personal life, for the specific purpose of pursuing a background investigation that may provide pertinent data for the Santa Fe County Sheriff's Office to consider in determining my suitability for employment with the department. It is my specific intent to provide access to personnel information, however, personal or confidential it may appear to be.

I consent to your release of any and all public and private information that you may have concerning me; my work record; my background and reputation; my military service records; my educational records; my financial status; my 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 Santa Fe County Sheriff's Office 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 its 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 Santa Fe County Sheriff's Office regardless of any agreement I may have made with you previously to the contrary. The law enforcement organization requesting the information pursuant to the release will discontinue processing my application if you refuse to disclose the information requested.

_____Applicants Initials

Page 1 of 2

RELEASE/WAIVER OF LIABILITY

Page 2

For and consideration of the Santa Fe County Sheriff's Office's acceptance and processing of my application for employment, I agree to indemnify and to hold the County of Santa Fe, 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 with the Santa Fe County Sheriff's Office.

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 and to disclosure of records, and I waive those rights with the understanding that information furnished will be used by the Santa Fe County Sheriff's Office in conjunction with employment procedures.

I further understand that information furnished will remain confidential and will be for the use of the Santa Fe County Sheriff's Office personnel, and will not be released to me now or in the future.

I hereby acknowledge understanding and agree that all information and materials gathered by the Santa Fe County Sheriff's Office, either from me or from other sources is and shall remain the sole and exclusive property of the Sheriff's Office, 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.

I further understand and agree that any and all information obtained as part of this investigation of my application is considered confidential, that it will be used by Santa Fe County Sheriff's Office personnel, and will not be released to anyone outside the Santa Fe County Sheriff's Office. The Santa Fe County Sheriff's Office reserves the right to restrict release of any and all material based on the nature and confidentiality of such material.

A photocopy of FAX copy of this release form will be valid as the original thereof, even though the said photocopy of FAX copy does not contain original writing of my signature. Should there be any question as to the validity of this 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 agree to hold harmless the County of Santa Fe, The Santa Fe County Sheriff's Office and the person to whom this request is presented and his agents and employees, from and against all claims, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying or attempting to comply with this request. I acknowledge that the burden of providing my qualifications for such employment is at all times upon me.

Applicants Name: _____
(Please Print)

Social Security Number: _____

Applicants Address: _____

Signature: _____ Date: ____/____/____
(Applicant)

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

(Notary Public) My commission expires _____