



City of Saginaw

JOB OPPORTUNITY ANNOUNCEMENT POLICE OFFICERS

333 West McLeroy
P.O. Box 79070
Saginaw, Texas 76179
817-232-4640
Fax 817-232-4644
www.ci.saginaw.tx.us

OPEN DATE: October 11, 2016

CLOSING DATE: Changed: Open Until Filled

BEGINNING SALARY: \$ 48,000 Annual

MINIMUM REQUIREMENTS:

CITIZENSHIP: Must be a United States Citizen by birth or naturalization.

EDUCATION: High School or Equivalent

DRIVING: Must have a valid Texas Driver's License and maintain a good driving record

CERTIFICATION: Basic TCOLE Certification-Must be completed the prior to employment

Essential job functions per job description included in application packet.

All applications must be returned with the following:

1. Application Supplement
2. A copy of valid driver's license
3. A copy of social security card
4. A copy of birth certificate
5. A copy of high school diploma or GED
6. A copy of Basic TCOLE Certificate
7. A copy of military service record, if applicable
8. Email address
9. TCOLE PID #

Failure to comply with this request could disqualify you.

**NON-TOBACCO USERS PREFERRED
NO SMOKING INSIDE ANY CITY BUILDINGS OR VEHICLES**

City of Saginaw Personnel Office
333 West McLeroy Blvd., Saginaw, Texas 76179
Phone: 817-230-0330 Email: applications@ci.saginaw.tx.us

Application packets available:

In person: City of Saginaw, Personnel Office, 333 W. McLeroy Blvd., Saginaw, TX 76179

Online: www.ci.saginaw.tx.us

Equal Opportunity Employment

Note: The Immigration Reform and Control Act of 1986 require the City of Saginaw to hire only U. S. Citizens and lawfully authorized alien workers. Employability verification will be required of prospective employees.

EMPLOYEE BENEFITS

SALARY:	Salary ranges are designed to be competitive with municipalities and industries
RETIREMENT:	Texas Municipal Retirement System (6% of Employee's total salary and City doubles at 12%)
LONGEVITY:	\$6.00 per month of service after the first year. Paid in lump sum check on the first Friday in December of each year.
SERVICE AWARDS:	Service pin awarded 5 years of service, a diamond added for each additional 5 years
VACATION:	40 hours after 6 months, 40 hours at 1 year 1-5 years 2 weeks 5-15 years 3 weeks 15-25 4 weeks 25 plus years 5 weeks
HOLIDAYS:	New Year's Day, Good Friday, Memorial Day, July 4th, Labor Day, Thanksgiving and following Friday, Christmas Eve and Christmas Day, and 2 Floating Holiday
INSURANCE:	Medical and Dental (Employee portion paid by City, dependent coverage optional and City will pay maximum of \$365.00 per month) Life 50,000/100,000
OTHER:	Mandatory payroll direct deposit to checking or savings account AFLAC (Optional) Deferred Compensation Plan (Optional) Sick Leave after six months employment Disability Plan after 1 year of employment

PATROL OFFICER HIRING PROCESS

The hiring process for City of Saginaw Patrol Officer will consist of the following: Application and Personal History Statement submission and review, background investigation, oral interview board. Conditional job offer is subject to applicant successfully completing physical examination, physical assessment, psychological evaluation and drug screen. **We reserve the right not to employ any applicant.**

**CITY OF SAGINAW
JOB DESCRIPTION**

Job Title: Police Officer
Department: Police
Full Time Position

Effective: 02-01-2001
State Employment Commission Code: 9221
Worker's Compensation Number: 7720

Job Summary:

Work is performed under the supervision of the Police Sergeant and Police Captain. Performs duties pertinent to the function to which the Officer is assigned. Must exercise sound judgement within limits prescribed by laws, rules, regulations, and department policies with guidance from their supervisor. Work is subject to review through activity reports and periodic observation of operation. Performs related work as required.

Essential Job Functions:

Patrols public streets enforcing traffic and criminal law and gathers criminal intelligence for submission to the Detective. Detects violations. Makes violator contacts and places violator in custody or issues citation or warning. Investigates circumstances and causes of accidents. Directs traffic. Prepares reports on activities and submits to supervising officer. Books and cares for prisoners (i.e. photograph, print, feed, monitor). Assists Public Services Department in flood controls during extreme rains. Assists Fire Department in controlling hazardous material incidents. Assists Animal Control Officer in the capture and control of various domestic and wild animals. Maintains equipment in proper working order (i.e. flashlights, vehicles, weapons, and communication equipment). Utilizes communication equipment (mobile/handheld). Secures crime and accident scenes. Investigates crime scenes (i.e. search). Assists in locating missing persons. Provides assistance and information to the public. Reports traffic hazards to proper agency (i.e. traffic lights out, stop signs missing, etc.). Searches prisoners and logs property. Uses physical force when necessary to restrain and to arrest. Job includes carrying, climbing, crawling, kneeling, pulling, sitting, squatting, stooping, lifting, pushing, holding, twisting body and neck and running. Must be able to lift, aim and fire weapon accurately. Must be able to work in an out-of-door environment subject to extreme temperatures, inclement weather, and intermittent exposure to dust, fumes, and loud noise. Subject to long periods of sitting and driving patrol vehicles. Eyesight corrected to 20/40 in each eye, with normal color vision. Ability to work various shifts, weekends, and holidays.

Required Education, Degrees, Certificates, and/or License:

High School Diploma or General Equivalency Diploma. Basic TCLOE Certificate, Valid Texas Driver's License.

Experience, Training, Knowledge and Skills Required:

Must have working knowledge of police methods, state traffic and criminal laws and regulations, departmental procedures, safety rules and regulations, court systems and procedures. Must have skill in firearms, radar and radio equipment and defensive tactics. Must be able to operate motor vehicle, in both emergency and routine situations. Must have the ability to meet and deal effectively with the general public; to acquire skills in investigative and interrogative techniques. Must be able to make decisions and determine logical courses of action; to obtain cooperation of violators; to understand and execute written and oral instructions; to communicate effectively; and to react calmly, quickly and accurately in emergency situations. Maintain physical standards necessary to do the job. Must exhibit emotional stability to perform job duties under stressful situations.



EMPLOYMENT APPLICATION

City of Saginaw Texas

333 West McLeroy Blvd.
P.O. Box 79070
Saginaw, Texas 76179
Phone: 817-232-4640
Fax: 817-232-4644
www.SaginawTx.org
info@ci.saginaw.tx.us

Email Address : _____ TCOLE PID#: _____

INSTRUCTIONS: Read carefully and print all information. Completion of this form is voluntary. Failure on your part to furnish all or part of the information requested may result in denial of your application. Employment is subject to applicants' satisfying the City's requirements as to morals, character, reference and physical examination. This application must be renewed after three months and becomes the property of the City of Saginaw. The City of Saginaw does not discriminate on the basis of race, color, national origin, sex, religion, age, or disabled status in employment or the provision of services.

Position Applied for: _____ Date: _____

Name: _____
(Last) (First) (Middle)

Address: _____
(Street) (City) (State) (Zip Code)

Telephone: (____) _____ Social Security Number: _____

Driver's License Number: _____ Type: _____ State Issued: _____ Expiration: _____

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No

Have you ever been employed with us before? Yes No

If Yes, give date: _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No

Proof of citizenship or immigration status will be required upon employment.

Are you available to work: Full Time Part Time Shift Work Temporary

Are you currently on "lay-off" status and subject to recall? Yes No

Are you currently a member of a military unit? Yes No

Have you been convicted of a felony within the last 7 years? Yes No

Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain:

Education

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Additional Information

Other Qualifications:

Summarize special job-related skills and qualifications acquired from employment or other experience.

Describe any job-related training received in the United States military.

Specialized Skills

- CRT Fax
 PC Excel
 Calculator PBX System
 Typewriter Word

Check Skills / Equipment Operated

Production/Mobile Machinery (list): Other (list):

_____	_____
_____	_____
_____	_____

State any additional information you feel may be helpful to us in considering your application.

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.	Employer		Dates Employed		Work Performed
	Address		From	To	
	Telephone Number(s)		Hourly Rate/Salary		
	Job Title	Supervisor	Starting	Final	
	Reason for Leaving				
2.	Employer		Dates Employed		Work Performed
	Address		From	To	
	Telephone Number(s)		Hourly Rate/Salary		
	Job Title	Supervisor	Starting	Final	
	Reason for Leaving				
3.	Employer		Dates Employed		Work Performed
	Address		From	To	
	Telephone Number(s)		Hourly Rate/Salary		
	Job Title	Supervisor	Starting	Final	
	Reason for Leaving				
4.	Employer		Dates Employed		Work Performed
	Address		From	To	
	Telephone Number(s)		Hourly Rate/Salary		
	Job Title	Supervisor	Starting	Final	
	Reason for Leaving				

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

Professional References (No Relatives)

1.	()
(Name)	Phone Number
(Address)	
2.	()
(Name)	Phone Number
(Address)	
3.	()
(Name)	Phone Number
(Address)	

Are you related to any member of the City Council or any current City of Saginaw employee?

_____ Yes _____ No

If "Yes." Name of Relative: _____ Relationship: _____ Dept. _____

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached. _____ Yes _____ No

EMPLOYMENT AT-WILL STATEMENT

In consideration of my employment, I agree to conform to the rules and regulations of the City of Saginaw, and my employment and compensation can be terminated with or without cause, and with without notice, at any time, at the option of the City or myself.

APPLICANT'S CERTIFICATION

I have reviewed the principle job duties and the minimum qualifications for the position for which I have applied. I am aware that this application will be subject to public disclosure unless an exception under the Texas Open Records Act is applicable.

The information on this application is accurate to the best of my knowledge and is subject to verification by the City of Saginaw if so requested. I understand that the information provided by me herein may be used for the purpose of investigating my eligibility and my previous employers may be contacted. I agree that the City of Saginaw will not be liable for any damage which may result from the release of such information, and that any misrepresentation or deliberate omission in my application may be justification for refusal of, or termination of, employment with the City of Saginaw.

My signature below indicates that I have read and fully understand the foregoing statements.

Applicant Signature

Date

SAGINAW PD



Application Supplement

**Saginaw Police Department
Supplemental Work and Personal History Form**

INSTRUCTIONS: Answer all questions. Omitted questions will be grounds for disqualification of your application. Falsification of information is grounds for disqualification of your application or immediate termination of employment. All certification statements agreed to on the general City of Saginaw application apply to information given here.

APPLICANT IDENTIFICATION

LAST NAME _____ FIRST _____ MIDDLE _____

Are You a United States Citizen? Yes [] No []

Date of Birth ___/___/___ Place of Birth _____ Social Security Number _____/_____/_____

DRIVING HISTORY

Drivers License _____
Number State of Issue Classification Expiration Date

Have you ever had your license suspended or revoked? [] YES [] NO

How many traffic citations have you received in the past three years? _____

WORK HISTORY

Have you had any prior law enforcement related experience? [] YES [] NO

If so, give location, type of experience, number of years, duty, training, rank, awards, and citations. Describe positions you have held that required supervisory ability, the exercise of authority and leadership:

Have you ever been fired, discharged, dismissed or asked to resign from any employment? [] YES [] NO

If yes, give the employer(s) name(s), date(s), and reason(s):

Have you ever received any disciplinary action (written or oral reprimands, suspensions, employee counseling, etc..) for any reason connected with your employment? [] YES [] NO

If yes, give the employer(s)'s name(s), date(s), reason and final disposition:

Have you ever been denied employment (any position) with this or any other law enforcement agency?[] YES [] NO
If "yes," give the name of the agency, date and reason for rejection:

LEGAL HISTORY

Have you ever been convicted of any misdemeanor or felony (excluding minor traffic offenses)? [] YES [] NO
Have you ever been placed on deferred adjudication for any offense? [] YES [] NO
Have you ever been placed on probation? [] YES [] NO
Have you ever been arrested by any law enforcement agency (including traffic offenses)? [] YES [] NO
Have you ever been detained (other than a traffic ticket) by any law enforcement agency? [] YES [] NO
Have you ever been summoned into court for a criminal offense? [] YES [] NO
Have you ever had the police called, to respond to your residence or another location where you were involved in any type of police related matter? (Exclude incidents related to your actions in the performance of your duties as a police officer.) [] YES [] NO

If the answer to any of the above questions is “yes”, please explain each and every incident (list juvenile and adult incidents):

PERSONAL DECLARATIONS

Have you ever *used* illegal drugs (to include marijuana) or a drug not prescribed to you by a physician? Yes [] No []
Have you ever *furnished* drugs or narcotics (to include marijuana) to anyone? Yes [] No []
Have you ever *sold* drugs or narcotics (to include marijuana) to anyone? Yes [] No []
Have you ever tested positive for a controlled substance during a drug screening? Yes [] No []
Have you ever refused a required test for drugs or alcohol screening? Yes [] No []

If the answer to any of the above questions is “yes”, explain in detail, include dates, number of times and types of drugs:

APPLICANT’S CERTIFICATION

I understand that all information submitted and considered is subject to verification. I understand and hereby authorize and give permission for the City of Saginaw to conduct verification and/or investigations of my credit history, criminal history, driving record, character, employment history, reputation, and any other job-related investigation as are necessary to determine my qualifications for employment

I understand that if I am offered employment with the City of Saginaw, I will be required to take a post-offer physical exam which will include drug testing. Any offer of employment that I may receive will be conditioned upon the results of the post-offer exam. In addition, positive results of the post-offer drug test will disqualify me from employment.

I certify that all statements and answers to all questions in this application are true, complete and correct and are made in good faith. I understand that falsification of any answers I have given will have serious consequences, including disqualification for employment and/or termination of employment.

DATE _____ SIGNATURE _____

(Name of Law Enforcement Agency)

AUTHORITY TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

I hereby authorize the **Saginaw Police Department** and its authorized representatives bearing this release, or a copy thereof, within one year of its date, to obtain any information in your files pertaining to my employment, military, credit, education or medical records, including not limited to academic, achievement, attendance, athletic, personal history, and disciplinary records, medical records, and credit records.

I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for official use. Consent is granted to all parties to furnish such information, as described above, to third parties in the course of fulfilling its official responsibilities. I hereby release you, as custodian of such records, and any school, college, university, or other educational institution, hospital, or other repository of medical records, credit bureau, lending institution, consumer reporting agency, or retail business establishment 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 attempt to comply with it.

I am furnishing my Social Security Account Number on a voluntary basis with the understanding such is not required by any law or regulation. I have been advised that all parties will utilize this number only to facilitate the location of employment, military, credit, and educational records concerning me in connection with this application. Should there be any question as to the validity of this release, you may contact me as indicated below:

Applicant's Printed Full Name: _____

Address: _____

Telephone Number: _____

Applicant's Notarized Signature: _____

Sworn to and signed before me, on this the _____ day of _____, _____,
in and for _____ county, in the state of _____ .

Signature of Notary Public: _____

NOTARY SEAL

Printed Name of Notary Public: _____

My Commission Expires: _____

SAGINAW POLICE DEPARTMENT

505 W. McLeroy Blvd.
Saginaw, Texas 76179
Phone (817) 232-0311
Fax (817) 847-5918

CONFIDENTIAL INFORMATION AGREEMENT FORM

A thorough investigation will be conducted to determine your qualifications for employment with the Saginaw Police Department. To a great extent, your employment will depend on information obtained in confidential interviews with persons with whom you have been associated. Therefore, such information is confidential and the department cannot reveal the reason of rejection for those applicants who are not accepted. If the reasons for your non-acceptance are of a temporary nature whereby you could be accepted at a later date, you will be notified.

I have read and fully understand the above statement.

Signature of Applicant

Date

THE STATE OF TEXAS

COUNTY OF TARRANT

BEFORE ME, the undersigned authority, a Notary Public in and for said County and State, on this day personally appeared _____,
Known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he executed the same for the purpose and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE THIS THE ____ DAY OF _____
20____.

Notary Public In and for
Tarrant County, Texas.