



MCALLEN FIRE DEPARTMENT

Firefighter Application

Return Preliminary Application to:
Rosie Pedraza
Civil Service Dept
P.O. Box 220
McAllen, TX 78505-0220
Phone: (956) 681-1407



**CITY OF MCALLEN
MCALLEN FIRE DEPARTMENT
APPLICATION FOR FIRE FIGHTER**

McAllen Fire Department is governed by
Texas Local Government Code 143 (Civil Service Law and 174 Collective Bargaining)

INSTRUCTIONS: You are hereby informed that the correctness of all statements made herein will be investigated. Answer all questions completely. If a question is not applicable, write “NA”. Write “Unknown” only if you do not know the answer and cannot obtain the answer from personal records. Attach extra sheets for extra details on any question(s) for which you do not have sufficient room.

Print or Type all information

DATE OF APPLICATION _____

NAME: _____
(LAST) (FIRST) (MIDDLE)

SOCIAL SECURITY NUMBER: _____ DATE OF BIRTH _____

PRESENT ADDRESS: _____
STREET & NUMBER CITY STATE ZIP

MAILING ADDRESS: _____
STREET & NUMBER CITY STATE ZIP

PERMANENT ADDRESS: _____
STREET & NUMBER CITY STATE ZIP

HOME TELEPHONE NO: _____ WORK TELEPHONE NO: _____

CELL TELEPHONE NO: _____ EMAIL ADDRESS: _____

TEXAS DRIVER'S LICENSE NUMBER: _____

OUT OF STATE DRIVER'S LICENSE NUMBER: _____ STATE: _____

(CIRCLE ONE)

- | | | |
|---|-----|----|
| 1.) ARE YOU BETWEEN THE AGE OF 18 AND 35? | YES | NO |
| 2.) ARE YOU A U.S. CITIZEN? | YES | NO |
| ARE YOU A PERMANENT LEGAL RESIDENT ALIEN? | YES | NO |
| 3.) ARE YOU PRESENTLY ON PROBATION FOR A CRIMINAL OFFENSE? | YES | NO |
| 4.) HAVE YOU EVER BEEN ARRESTED OR CONVICTED OF A FELONY OFFENSE? | YES | NO |
| 5.) HAVE YOU EVER EXECUTED AT ANY TIME A CONFESSION TO A FELONY OFFENSE WHERE SUCH A CONFESSION WAS ADMISSIBLE AS EVIDENCE AGAINST A PERSON IN ANY CRIMINAL PROCEEDING IN ANY STATE OR FEDERAL COURT? | YES | NO |
| 6.) HAVE YOU BEEN ARRESTED OR CONVICTED OF DRIVING WHILE INTOXICATED OR DRIVING UNDER THE INFLUENCE OF DRUGS WITHIN THE LAST THREE YEARS? | YES | NO |
| 7.) CAN YOU READ AND WRITE ENGLISH? | YES | NO |
| 8.) DO YOU HAVE A HIGH SCHOOL DIPLOMA? | YES | NO |
| DO YOU HAVE A G.E.D.? | YES | NO |
| 9.) HAVE YOU EVER HAD A FIREFIGHTER'S CERTIFICATE ISSUED BY THE TEXAS COMMISSION ON FIRE PROTECTION REVOKED? | YES | NO |
| 10.) HAVE YOU EVER HAD A CERTIFICATE ISSUED BY THE TEXAS DEPARTMENT OF STATE HEALTH SERVICES REVOKED? | YES | NO |

11.) LIST ALL TRAFFIC VIOLATIONS YOU HAVE BEEN CONVICTED OF WITHIN THE LAST THREE (3) YEARS.

TYPE OF VIOLATION	DATE
1. _____	_____
2. _____	_____
3. _____	_____

MILITARY SERVICE

Have you ever been a member of any branch of the U.S. Armed Forces?

yes [] no [] If yes, Branch of Service: _____

Induction date: _____ Discharge date: _____
Type of Discharge: _____

While in the military service, were you ever arrested for an offense which resulted in a trial by Deck Court or Summary, Special or General Court Martial? If yes, give date, place, law enforcing authority or type of Court or Court Martial; charge and action taken for each incident.

Charge: _____ Date: _____
Results: _____

Charge: _____ Date: _____
Results: _____

Awards: (Type and date awarded)

I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION ON THIS APPLICATION SHALL BE SUFFICIENT CAUSE FOR THE CIVIL SERVICE COMMISSION TO REMOVE MY NAME FROM THE ELIGIBILITY LIST.

(SIGNATURE OF APPLICANT)

(DATE)

CHECKLIST OF DOCUMENTS
THAT MUST ACCOMPANY YOUR FIRE DEPARTMENT
APPLICATION

IF SUBMITTING YOUR APPLICATION IN PERSON, YOU MUST PROVIDE ALL COPIES OF DOCUMENTS LISTED BELOW.
IF MAILING APPLICATION, YOU MUST SUBMIT COPIES OF DOCUMENTS LISTED BELOW. ORIGINAL WILL BE REQUIRED FOR VERIFICATION LATER IN THE PROCESS.

1. Valid Driver's License Class _____ Expiration Date: _____ Verified by: _____

2. Birth Certificate (**Hospital birth certificates are not acceptable**)

OR

Certificate of Naturalization

OR

Permanent Resident Alien Card # _____

Verified by: _____

3. Social Security Card (If a card is not available, must present a letter of Renewal from the Social Security Administration Office.)

Verified by: _____

4. High School Diploma/GED Certificate **OR** official transcript. Unofficial copies are not acceptable. If the school will not issue an official Transcript to the student, the school must mail the transcript direct to the City of McAllen Civil Service Office.

Verified by: _____

5. Selective Service Number: _____ Date of Birth _____ Date of Registration _____

Selective Service Card (even if you have never been in the military.) Verified by: _____

If a Selective Service Card is not available, call (847) 688-2576 or <http://www.sss.gov> to request a new card.

AN ADDITIONAL FIVE (5) POINTS SHALL BE ADDED TO THE EXAMINATION GRADE OF AN APPLICANT WHO SERVED IN THE UNITED STATES ARMED FORCES, RECEIVED AN HONORABLE DISCHARGE AND MADE A PASSING GRADE ON THE EXAMINATION.

IF MAILING APPLICATION MUST SUBMIT COPIES OF DOCUMENTS LISTED ABOVE. ORIGINAL DOCUMENTS MUST BE PRESENTED AT THE TEST SITE FOR VERIFICATION OR BROUGHT BY OUR OFFICE IF IN THE CITY PRIOR TO THE TEST DATE.

IF SUBMITTING APPLICATION IN PERSON, MUST PROVIDE ALL COPIES LISTED ABOVE AND ALL ORIGINAL DOCUMENTS WILL BE VERIFIED AT A LATER DATE.

6. Copy of Court Order relating to Alimony/Child Support. Verified by: _____
