

# CIVIL SERVICE WRITTEN EXAMINATION FOR ENTRY-LEVEL POLICE OFFICER POSITION

# **COVER SHEET**

# **INSTRUCTIONS:**

# PLEASE READ <u>ALL</u> INSTRUCTIONS AND DOCUMENTS IN THIS PACKET CAREFULLY!

Your application must be thoroughly completed and submitted by the deadline.

Please note: Written Exam is scheduled for Wednesday, December 17, 2025.

Visit: https://iosolutions.com/ios-web-store/ and search NCJOSI^2 to view available study guides at applicant's cost.

# **Application Submittal Deadline:**

Friday, November 28, 2025

\*Applications will NOT be accepted after this date - No exceptions!

Upon successfully submitting your application, you will receive a confirmation email prior to the examination date that will confirm your examination eligibility.







# ENTRY LEVEL POLICE EXAMINATION APPLICATION INSTRUCTIONS

Your application must be thoroughly completed. Application and all required documents must be submitted by **Friday, November 28, 2025 - no exceptions**. Applications must be submitted to the Human Resources Department, located at 1300 West Houston Avenue, McAllen, Texas 78501.

#### **MINIMUM REQUIREMENTS:**

- I. To be eligible to take the Civil Service Written Examination for Entry-Level Position Police Officer with the City of McAllen Police Department, applicants shall:
- (1) Be a citizen of the United States;
- (2) Must be at least 21 years of age by completion of Police Academy;
- (3) Be a high school graduate or have passed general educational development (GED) test indicating high school graduation level;
- (4) Have a valid Driver License and satisfactory driving record (a valid Texas Driver License and satisfactory driving record is required prior to employment as an Entry-Level Police Officer) and must not be prohibited by state or federal law from operating a motor vehicle;
- (5) Have completed and submitted the enclosed documentation to the City of McAllen Human Resources Department/Civil Service Division by the deadline. No applications will be accepted after the deadline;
- (6) Must be able to intelligently read and write the English language;
- (7) Must possess 20/20 vision in each eye. Uncorrected vision cannot exceed 20/400 in each eye. Must be free of color blindness, night blindness and any other visual deficiencies or limitations;
- (8) Must possess hearing with less than a 30-decibel loss. Uncorrected hearing cannot exceed a 60-decibel loss in each ear;
- (9) Must complete a background investigation, pre-employment polygraph examination, and investigation of local, state and federal records as required;
- (10) Not currently under indictment for any criminal offense;
- (11) Have not been convicted (or placed on community supervision/probation) of an offense above the grade of a Class B misdemeanor or a Class B misdemeanor within the last ten years, or for any Class C misdemeanor involving the duties and responsibilities of a police officer;
- (12) Never have been convicted of any family violence offense;
- (13) Not prohibited by state or federal law from possessing firearms or ammunition; and
- (14) Must not have had a license, issued by TCOLE, previously revoked.
- II. An applicant may not be certified as eligible for Entry-Level position with the McAllen Police Department unless the applicant meets all legal requirements necessary to become eligible for future licensing by the Texas Commission on Law Enforcement (TCOLE). For more information, visit: <a href="https://www.tcole.texas.gov/">https://www.tcole.texas.gov/</a>.



Kevin Pagan, Chairman Jesse Barba, Vice-Chairman Ruben Garza, Commissioner

Christina Flores, Civil Service Director

October 31, 2025

#### ENTRANCE EXAMINATION NOTICE FOR POLICE OFFICER

The City of McAllen will be administering a Civil Service Examination for Entry Level Police Officer on Wednesday, December 17, 2025. Pursuant to Chapter 143.024 of the Government Code, the following notice is being posted. The examination will be based on the person's general knowledge and aptitude and will inquire into the applicant's general education and mental ability.

The examination is scheduled for: Date: Wednesday, December 17, 2025

Time: 9:00 a.m. Registration: 7:30 a.m.

Location: McAllen Convention Center (Ballroom)

Address: 700 Convention Center Blvd

McAllen, Texas 78501

The deadline to submit your application is Friday, November 28, 2025 by 5:00 p.m. To download application visit: https://www.mcallen.net/advisory-boards/civil-service

In order to be placed on the Entrance Eligibility List, an applicant must pass the examination. The ranking of the applicants on the entrance eligibility list shall be based upon the highest total score resulting from a passing grade on the written examination plus any military service or credit as required by Chapter 143, if applicable. In the event of ties in final total scores, the applicant's rank on the eligibility list shall be determined by the order in which the applicants signed up for the examination (i.e. those signing up earlier will be given a higher ranking). The eligibility list created as a result of the examination will be in effect for one year after the date of the examination or until all eligible candidates have been passed over.

If you have any questions, please do not hesitate to call the Human Resources Department, Civil Service Division at (956) 681-1045.

Submit Applications to: Christina Flores Director of Human Resources/Civil Service Director 1300 Houston Ave McAllen, TX 78501



# **POLICE OFFICER BENEFITS**



# **PAY SCALE**

ENTRY LEVEL OFFICER				RATE		
POLICE PROBATIONARY I (0-6 MO)			\$22.0336/HR			
POLICE PROBATIONARY II (7-11 MO)			\$24.3874/HR			
YEARS OF Service	POLICE Officer III	SERG	EANT	LIEUTENANT	ASST CHIEF	
YEAR 1	\$32.3538/HR					
YEARS 2-3	\$33.3569/HR	\$40.13	27/HR			
YEARS 4-5	\$34.6731/HR	\$41.44	88/HR	\$46.1394/HR	\$133,490.4512	
YEARS 6-7	\$34.7512/HR	\$41.5139/HR		\$46.1394/HR	\$133,490.4512	
YEARS 8-9	\$35.8327/HR	\$42.53	02/HR	\$47.7552/HR	\$135,739.9624	
YEARS 10-11	\$36.1324/HR	\$42.90	82/HR	\$47.7552/HR	\$135,739.9624	
YEARS 12-13	\$36.8229/HR	\$43.59	87/HR	\$48.6543/HR	\$138,612.8320	
YEARS 14-15	\$37.5266/HR	\$44.30	23/HR	\$48.6543/HR	\$138,612.8320	
YEARS 16 -17	\$38.5299/HR	\$45.30	57/HR	\$49.5534/HR	\$140,428.7024	
YEARS 18 - 19	\$38.5960/HR	\$45.37	08/HR	\$49.5534/HR	\$140,428.702 <mark>4</mark>	
YEARS 20-21	\$40.2368/HR	\$46.99	95/HR	\$50.8825/HR	\$142,244.5728	
YEARS 22+	\$40.3020/HR	\$47.07	78/HR	\$50.9476/HR	\$142,244.5728	

# **CERTIFICATION PAY**

TYPE	MONTHLY RATE		
INTERMEDIATE POLICE OFFICER	\$50		
ADVANCED POLICE OFFICER	\$100		
MASTER POLICE OFFICER	\$200		

## **EDUCATION PAY**

TYPE	MONTHLY RATE
ASSOCIATE DEGREE	\$75
BACHELOR'S DEGREE	\$150
MASTER'S DEGREE	\$200
DOCTORATE DEGREE	\$250

# **ASSIGNMENT PAY**

ТҮРЕ	ANNUAL RATE
LEVEL ONE	\$1,375
LEVEL TWO	\$2,375
LEVEL THREE	\$5,000

# **UNIFORM ALLOWANCE**

Employees earn \$38.46 per pay period depending on assignment.

# SHIFT DIFFERENTIAL PAY

Employees earn additional \$1.00 per hour depending on assigned work shift.

# **VACATION LEAVE**

Vacations accrue for eligible Employees according to the following schedule:

CONTINUOUS YEARS OF SERVICE	PAID VACATION DAYS		
0-14 YEARS	15 DAYS		
15-19 YEARS	18 DAYS		
20+ YEARS	20 DAYS		

# **SICK LEAVE**

Sick leave accruals shall be covered by applicable provisions of the Texas Local Government Code, Chapter 143.

## **TUITION REIMBURSEMENT**

The City provides eligible Employees tuition reimburesment for programs from accredited institutions of higher education for courses of study that are relevant to city government services or the Employee's current/future position and job opportunities.

# RETIREMENT

Employees are required to participate in Texas Municipal Retirement System at a 7% contribution rate per pay period. The City contributes 2-to-1 matching funds. Employees vest at 10 years and are eligible to retire the account at 20 years of service at any age or 10 years of service at age 60.

This document is a very general description of the benefits to which Employees of the City of McAllen may be entitled. Please understand that this general explanation is not intended to, and does not provide all the details of these benefits. Therefore, this does not change or otherwise interpret the terms of the official plan documents. To the extent that any of the information above is inconsistent with the official plan documents, the provisions of the official documents will govern in all cases. The City of McAllen is not responsible or liable for any misstatements or inaccuracies found in this general description of our benefit programs.

# BENEFIT PLANS

## **MEDICAL**

The City sponsors a self-funded EPO plan through United Healthcare. There is a \$50 monthly surcharge that applies to spouses that have employer sponsored coverage available. Health plan members have option of no cost primary care, urgent care and extended ancillary care through our preferred clinic, Frontier.

#### **BI-WEEKLY PREMIUMS**

TIER	PREMIUM	
EMPLOYEE ONLY	\$30.00	
EMPLOYEE PLUS SPOUSE	\$169.00	
EMPLOYEE PLUS CHILD	\$140.00	
EMPLOYEE PLUS FAMILY	\$182.00	

### DENTAL

Eligible Employees can enroll in the City's Dental Plan with Delta Dental. The Plan covers 100% Preventative Services, 80% Basic Services and 50% Major Services up to the maximum allowance annually. Basic and Major Services have a \$50 deductible.

#### **BI-WEEKLY PREMIUMS**

EMPLOYEE ONLY	EMPLOYEE PLUS FAMILY		
\$9.95	\$32.88		

# **VISION**

Eligible Employees can enroll in the City's Vision Plan with Davis Vision. The plan covers your exam (with \$10 exam copay) and glasses or contacts (with \$10 materials copay up to the maximum allowances). Additional discounts are available for upgrades and extras.

#### **BI-WEEKLY PREMIUMS**

EMPLOYEE ONLY	EMPLOYEE PLUS FAMILY		
\$5.20	\$13.02		

# FLEXIBLE SPENDING ACCOUNT

Eligible Employees can participate in the Flexible Spending Account program that allows you to pay for eligible healthcare expenses (including dental/vision) with pre-tax contributions on a front loaded debit card. You choose the amount to set aside from your paycheck and must re-elect this benefit each year to continue. The 2025-26 plan year maximum contribution is \$3,300. This money is use-it or lose-it within the plan year; however, the plan has a \$660 rollover allowance and includes a 90 day run-out to file expenses for the previous plan year.

### LIFE

Eligible Employees receive life insurance benefits of 2x annual salary (up to \$100,000) at no cost to them through Lincoln Financial. Additional voluntary life insurance is available at cost for the Employee, their spouse, and children. Premiums varu.

# **DISABILITY**

Eligible Employees enrolled in disability through Lincoln Financial with non-job related illness or injury receive up to 60% of their salary if they are unable to perform their essential job functions. Short Term Disability offers up to 13 weeks of benefits after a 7 or 14 day waiting period, while Long Term Disability offers up to 2 or 5 years of benefits, or up to age 65 after a 90 day waiting period. Premiums vary based on plan choice and salary.

# PREPAID LEGAL & ID PROTECTION

Eligible Employees can enroll in prepaid legal and identify theft coverage through ARAG for \$10.20 per pay period. This legal plan provides access to over 14,000 attorneys nationwide to assist with personal legal needs like creating wills, estate planning, marriage/divorce, buying a home, and much more. Legal services are available online, over-the-phone or in-person. ARAG identity theft benefits include robust monitoring and complete identity restoration should you become a victim of identity theft.

### **ANCILLARY BENEFITS**

Eligible Employees can elect coverage for themselves and dependents at cost from one or more of our Colonial Life ancillary products that include: Accident, Cancer, Critical Illness, Medical Bridge and Whole Life policies. These policies provide direct payment to the participant and premiums vary.

## **HEARING BENEFITS**

The City's Health, Dental and Vision plans each have some hearing discount provisions available for enrollees. Additionally, the City has a discount partnership with Start Hearing that is available to Employees and their families with no enrollment needed.

# **EMPLOYEE ASSISTANCE PLAN**

The City offers no cost Employee Assistance Plan services through Optum that are confidential to eligible Employees and their household. Individuals receive free, confidential counseling, referrals, legal assistance, and financial services. The EAP also has a robust program to help our Employees handle eldercare concerns for their aging parents.

# **PET INSURANCE**

The City offers access to low cost pet insurance available for a variety of pet types through a direct pay program.

# PERSONAL HISTORY STATEMENT Preliminary Application



# McAllen Police Department Training Unit

Return Preliminary Application to:
Christina Flores
Civil Service Director
P.O. Box 220
1300 Houston Ave
McAllen, TX 78505-0220
Phone: (956) 681-1045

REV. 01/2024

# McALLEN POLICE DEPARTMENT PERSONAL HISTORY STATEMENT-PRELIMINARY APPLICATION

# YOU ARE HEREBY INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED.

**INSTRUCTIONS:** Answer all questions completely. If a question is not applicable write "N/A". 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 or questions for which you do not have sufficient room.

	T	YPE or WRITE	CAREFULLY.		
Position applied for: <b>C</b>	City of McAllen Police Of	<u>ficer</u>			
		PERS	ONAL BACK	GROUND	
Full Name:	(First)	(Mid	dle)	(Last)	
Social Security #:		`	,	` ,	tate
Height:	_ Weight:	Eyes:	Hair:	Scars:	
Other distinguishing	features:				
Present Address:	(Number & Stro	eet) (C	City)	(State)	(Zip)
Permanent Address:_ (Number & Street)	(City)	(State)	(Zip)		
Telephone: Home	( )	Work	()	Cell (	)
Nickname:		name by	which you prefe	r to be addressed	
Date of Birth:	Place of Birth:	(City)	(State)	(Country)	U.S. Citizenship: yes [] no []
		MILI	TARY SERVIC	E	
Have you ever been a	n member of any branch	of the U.S. Arm	ned Forces: yes [	] no [ ] If yes, Bran	ch of Service:
Induction date:	Discharge date:	Ty	pe of Discharge:_		
					ck Court or Summary, Special or Martial; charge and action taken
Charge:Results:		Da	ite:		
Charge:Results:		Da	ıte:		

## EDUCATIONAL HISTORY

NAME & TYPE OF SCHO LOCATION (CITY & STA		DATES AT	ΓENDED ΤΟ	DEGREE AND/OR CREDIT HRS. EARNED	
20011101 (01110101112)					
			_		
	CRIM	INAL RECOI	RD		
LIST <u>ALL</u> ARRESTS, DETENTION				PT TRAFFIC VIOLATIONS).	
Charge	Agency		Date	Disposition	
	_				
	_				
Have you ever been placed on Court-orendering judgement, and arrest inform		rvision or prob	ation for any cri	minal offense? If yes, list dates, Court	
Have you ever committed a serious cr					
Have you ever shoplifted anything? I	f yes, explain				
Have you ever committed an assault in	nvolving family violence	e? If yes, expla	nin		
Have you ever stolen money, equipme	ent or merchandise from	an employer?	If wes explain		
	ont, or merchandisc from	un employer.			
Have you ever used illegal drugs?	Drugs used?				
	Type of drugs usontrolled substance or il	legal drug? If			
Which substance did you furnish, sell or buy?				When was the last time you sold,	
Have you ever abused any prescribed How did you abuse the medication?	medication within the pa	ast five years?_	Type:_		
Have you ever been involved in the m	anufacturing of an illega	ıl drug?	Type:		

· <del></del>		VE RECEIVED (LIFETIME	5).		
CITY/STATE	MONTH/YEAR	CHARGE		DISPOSITION	
Has your driver's lic	ense ever been suspended	? If yes, give date and expl	ain reason(s	) for suspension	
Have you ever been	classified as a high risk fo	r vehicle insurance?		_	
How many vehicle a	accidents have you been in	volved in as a driver?		Hit and run accidents?_	
		MARITAL AND FAMILY	Y HISTOR	Y	
CIRCLE YOUR CU	RRENT STATUS:				
SINGLE	ENGAGED MA	ARRIED SEPARA	ATED	DIVORCED	WIDOWED
How many times hav	ve you married?	Have you ever been married	l to more the	an one person at a time?	
J		Ž			
		EMPLOYMENT HIS	STORY		
LIST YOUR PRESE	ENT OR MOST RECENT	JOB:			
			From	To	
		Co-worker			
		eive job performance evalua			
		3 1			
		years (Include part-time and			
		Source of in			
-	-	ore? If yes, when and where			
Have you ever application	ed with the McAllen Polic	e Department?Po	sition:		

# CHECKLIST OF DOCUMENTS THAT MUST ACCOMPANY YOUR APPLICATION (ATTACH COPIES)

Email:	
Driver's License Class: Expiration Date:	Verified by:
Birth Certificate (Hospital birth certificates not acceptable)	Verified by:
Certificate of Naturalization (Unlawful to copy) #	Verified by:
Social Security Card (If a card is not available, must present a letter of renewal from the Social Security Administration Office.)	Verified by:
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, have them mail the transcript direct to our office.)	Verified by:
Military Discharge Papers (DD214) or Selective Service Card (If a Selective Service Card is not available, call 847-688-2576 or 847-688-6888 to receive your number and request a new card). Until receipt of your card, provide your number in the space below.	Verified by:
Selective Service Number:Date of registration:	
AN ADDITIONAL FIVE (5) POINTS SHALL BE ADDED TO THE EXAMINATION GRADE OF ARMED FORCES, RECEIVED AN HONORABLE DISCHARGE AND MADE A PASSING GRADE OF MAILING APPLICATION, YOU MUST SUBMIT COPIES OF DOCUMENTS LISTED ABOUT THE PROCESS.  IF SUBMITTING APPLICATION IN PERSON, YOU MUST PROVIDE ALL COPIES OF DOCUMENTS DISCHARGE OF DOCUMENTS LISTED ABOUT THE PROCESS.	ADE ON THE EXAMINATION.  VE. ORIGINAL DOCUMENTS MUST BE PRESENTED LATER
I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND C AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OF C CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECT AUTHORIZATION TO THE CITY OF McALLEN POLICE DEPARAMIZATION FOR INFORMATION AND/OR DOCUMENTS TO STATEMENT REGARDING MY PREVIOUS EMPLOYMENT, C CONDUCT. IN CONSIDERATION OF PROCESSING MY APPLICAT FORMER EMPLOYERS OR OTHER PERSON DESIGNATED HEREIN FROM ANY AND ALL LIABILITY OF WHATSOEVER NATURE AND SO FURNISHING OR PROCESSING ANY INFORMATION ABOUT MI	OMISSION AS TO A MATERIAL FACT WILITION OF MY APPLICATION. I HEREBY GRANT ARTMENT TO CONTACT ANY PERSON OF VERIFY THE VALIDITY OF ANY PREVIOUS CHARACTER, PHYSICAL CONDITION, ANITION AND INFORMATION FURNISHED BY MYN, I HEREBY RELEASE AND HOLD HARMLESS Y AND ALL OF SUCH PERSONS OR ENTITIES E.
Applicant Signature  Date	