



Kevin Pagan, Chairman
Lee Jinks, Vice-Chairman
Ruben Garza, Commissioner

Rosie Pedraza, Civil Service Director

September 14, 2023

Dear Interested Applicant:

The City of McAllen will be administering a Civil Service Examination for Entry Level Police Officer on **Friday, December 8, 2023. Attached is the minimum requirements.**

The examination is scheduled for:	Date:	Friday, December 8, 2023
	Time:	9:00 a.m.
	Registration:	7:30 a.m.
	Location:	McAllen Convention Center
	Address:	701 Convention Center Blvd. McAllen, Texas 78501

Applicants must meet all minimum requirements and submit a completed application with COPIES of all required documentation.

Deadline to submit a completed application is Wednesday, November 29, 2023.

We request your presence **at least 45 minutes** prior to the exam. **No person will be allowed in the test area after 9:00 a.m. No further test date notice will be given other than this letter; the submission of your completed application will be your confirmation to take exam.**

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 highest number of correct answers on the exam (the person with the higher exam grade will be placed higher even though the final total score is a tie). If a tie still remains, then the order of ranking shall be determined by giving the highest positions among those sharing an identical total score and an identical exam grade in the order in which the applications signed up for the examination (i.e. those signing up earlier will be given a higher ranking).

Please bring proper picture identification (i.e. valid driver's license). If you have any questions, please do not hesitate to call the Civil Service Department at (956) 681-1407.

Sincerely,
Rosie Pedraza
Civil Service Director

PERSONAL HISTORY STATEMENT

Preliminary Application



McAllen Police Department Training Unit

Return Preliminary Application to:
Rosie Pedraza
Civil Service Director
P.O. Box 220
1300 Houston Ave
McAllen, TX 78505-0220
Phone: (956) 681-1407

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

TYPE or WRITE CAREFULLY.

PERSONAL BACKGROUND

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EDUCATIONAL HISTORY

NAME & TYPE OF SCHOOL LOCATION (CITY & STATE)	DATES ATTENDED FROM	TO	DEGREE AND/OR CREDIT HRS. EARNED
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CRIMINAL RECORD

LIST ALL ARRESTS, DETENTIONS (INCLUDE FELONIES, MISDEMEANORS, EXCEPT TRAFFIC VIOLATIONS).

Charge	Agency	Date	Disposition
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever been placed on Court-ordered community supervision or probation for any criminal offense? If yes, list dates, Court rendering judgement, and arrest information. _____

Have you ever committed a serious crime? If yes, explain. _____

Have you ever shoplifted anything? If yes, explain. _____

Have you ever committed an assault involving family violence? If yes, explain. _____

Have you ever stolen money, equipment, or merchandise from an employer? If yes, explain. _____

Have you ever used illegal drugs? _____ Drugs used? _____

Number of times you used drugs? _____ Type of drugs used? _____

Have you ever sold or furnished any controlled substance or illegal drug? If yes, explain. _____

Which substance did you furnish, sell or buy? _____ When was the last time you sold, Furnished, or bought any controlled substance or illegal drug? _____

Have you ever abused any prescribed medication within the past five years? _____ Type: _____
How did you abuse the medication? _____

Have you ever been involved in the manufacturing of an illegal drug? _____ Type: _____
Describe your involvement. _____

LIST ALL TRAFFIC CITATIONS YOU HAVE RECEIVED (LIFETIME).

CITY/STATE	MONTH/YEAR	CHARGE	DISPOSITION
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Has your driver's license ever been suspended? If yes, give date and explain reason(s) for suspension. _____

Have you ever been classified as a high risk for vehicle insurance? _____

How many vehicle accidents have you been involved in as a driver? _____ Hit and run accidents? _____

MARITAL AND FAMILY HISTORY

CIRCLE YOUR CURRENT STATUS:

SINGLE ENGAGED MARRIED SEPARATED DIVORCED WIDOWED

How many times have you married? _____ Have you ever been married to more than one person at a time? _____

List any alimony or child support payments (Include name to whom paid, frequency and whether payment is current or in arrear). _____

* Furnish copy of Court Order, Location of the Court: _____
Cause No.: _____

EMPLOYMENT HISTORY

LIST YOUR PRESENT OR MOST RECENT JOB:

Employer _____ From _____ To _____

Address _____

Phone number _____ Job Title _____

Supervisor _____ Co-worker _____

Salary/Hourly rate: _____ Did you receive job performance evaluations? _____ Were you ever reprimanded? _____

Reason for leaving _____ Eligible for re-hire? _____

How many jobs have you held in the last three years (Include part-time and seasonal jobs)? _____

How long have you been unemployed? _____ Source of income: _____

Have you worked for the City of McAllen before? If yes, when and where? _____

Have you ever applied with the McAllen Police Department? _____ Position: _____

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

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: _____

Copy of Court Order relating to Alimony/Child Support

Verified
by: _____

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, YOU MUST SUBMIT COPIES OF DOCUMENTS LISTED ABOVE. ORIGINAL DOCUMENTS MUST BE PRESENTED LATER IN THE PROCESS.

IF SUBMITTING APPLICATION IN PERSON, YOU MUST PROVIDE ALL COPIES OF DOCUMENTS LISTED ABOVE, WE WILL NOT MAKE COPIES. ORIGINALS MUST BE PRESENTED LATER IN THE PROCESS.

I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OF OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION. I HEREBY GRANT AUTHORIZATION TO THE CITY OF McALLEN POLICE DEPARTMENT TO CONTACT ANY PERSON OR ORGANIZATION FOR INFORMATION AND/OR DOCUMENTS TO VERIFY THE VALIDITY OF ANY PREVIOUS STATEMENT REGARDING MY PREVIOUS EMPLOYMENT, CHARACTER, PHYSICAL CONDITION, AND CONDUCT. IN CONSIDERATION OF PROCESSING MY APPLICATION AND INFORMATION FURNISHED BY MY FORMER EMPLOYERS OR OTHER PERSON DESIGNATED HEREIN, I HEREBY RELEASE AND HOLD HARMLESS FROM ANY AND ALL LIABILITY OF WHATSOEVER NATURE ANY AND ALL OF SUCH PERSONS OR ENTITIES SO FURNISHING OR PROCESSING ANY INFORMATION ABOUT ME.

Applicant Signature

Date _____

Witness

Date _____