

# **El Paso County Commissioners Court**

Dear Applicant,

Thank you for your interest in applying to serve as a member of the El Paso County Sheriff's Civil Service Commission. This packet provides the necessary information for you to familiarize yourself with the responsibilities of this commission and the necessary documents to begin the application process.

We appreciate your willingness to be involved in guiding the future of this commission and its function of ensuring the health and vitality of our community.

As a member of this commission, you will be expected to participate in the meetings and other tasks as deemed necessary to fulfill your post. You should participate actively in meetings and seeking as much information needed to help the commission come to its decisions. Please be aware of the various duties, responsibilities and the time commitment that will be required of you.

After submitting this application, it will be reviewed and if it meets the qualifications needed to fill the vacancy, your information will be submitted for approval by the El Paso Commissioners Court.

If you have any further questions, please feel free contact the County Administration office at (915) 546-2215. Again, thank you for your leadership and commitment.



**El Paso County** 

Sheriff's Civil Service Commission

### Board Overview

The El Paso County Sheriff's Office values the trust the public has given us and will honestly and ethically carry out our responsibilities. We will adhere to the Constitutions of the United States and the State of Texas in pursuit of community service. We will investigate and respond appropriately to all allegations of impropriety.

### Board Duties

The commission shall adopt, publish, and enforce rules regarding:

- 1. the definition of a county employee;
- 2. selection and classification of county employees;
- 3. competitive examinations;
- 4. promotions, seniority, and tenure;
- 5. layoffs and dismissals;
- 6. disciplinary actions;
- 7. grievance procedures; and
- 8. other matters relating to the selection of county employees and the procedural and substantive rights, advancement, benefits, and working conditions of county employees.
  - a. The commission may adopt or use as a guide any civil service law or rule of the United States, this state, or a political subdivision in this state to the extent that the law or rule promotes the purposes of this subchapter and serves the needs of the county.
  - b. The commission may not adopt or enforce a rule requiring a county employee to retire because of age. The commission may adopt a rule requiring a county employee, on reaching an age set by the commission, to submit annually to the commission an affidavit from a physician stating that the employee is physically and mentally capable of continuing employment.

## **Board Member Qualifications**

To serve as a member of the board, a person must be:

- 1. at least 25 years old; and
- 2. have resided in the county for the three years immediately preceding the date on which the person's term will begin.

#### Seats

The Board is a three-member body. The Sheriff, District Attorney and Commissioner's Court each make one appointment to the Sheriff's Department Civil Service Commission. The Sheriff appoints the Chair. Each term is for a 2-year term.

## Meeting

The board meets on the 1<sup>st</sup> Monday of every quarter at 1:30 p.m. at the Sheriff's Headquarters, Sheriff's Conference Room, 3850 Justice Road, El Paso, Texas 79938



# Sheriff's Civil Service Commission

Name:	Voting Precinct:				
Home Address:					
	STREET	СІТҮ	STATE	ZIP	
Phone number:	Ce	ll Phone number:			
E-mail address:					
PURSUANT TO TEXAS GOVE. (CHECK ONE): [] MAY BE R. TEXAS OPEN RECORDS ACT. PUBLIC ACCESS.	ELEASED / 🛛 SHALI	L NOT BE RELEASED	TO THE PUBLIC	CUPON REQUEST	UNDER THE
Place of Employment:					
Business Address:					
- 1 1 ( )	STREET		STATE		
Telephone: ( )		- Fax Number: (	)		
Professional Background:					
Educational Background:					

Three (3) personal or professional references not related to you:

NAME	PHONE #	YEARS KNOWN	
NAME	PHONE #	YEARS KNOWN	
NAME Previous volunteer organ	PHONE #	YEARS KNOWN	
Are you at least 25 years of Length of Residency in El Do you have property in E Are your property taxes cu	f age?(Yes)(No) Paso County:(Years/! l Paso County under your name? _ urrently paid?(Yes)	) Months) (Yes)(No) (No) If not, please give a bri	ef explanation:
Are you an elected office	r, county employee, county affilia	te, or employed as a lobbyist?	(Yes)(No)
If so, please specify			
the County's Code of Ethics,	so County Uniform Rules and Procedur Open Meetings Act, and Public Informa and if being considered for reappointme if necessary.	ition Act <u>upon accepting a board appo</u>	p <u>intment</u> . Additionally, if after the
Signature:		Date:	
		nd Investigation authorization form ministration Department at: 302, El Paso, TX 79901	n

Phone: (915) 546-2215 Fax: (915) 546-2217 Email: <u>countychiefadmin@epcounty.com</u>



BACKGROUND INVESTIGATION AUTHORIZATION FORM

## **RELEASE OF CONFIDENTIAL INFORMATION**

#### Dear Applicant:

The County of El Paso conducts background investigations on applicants in various departments. This effort is part of the selection process and requires your authorization. By signing this document, you acknowledge that you are voluntarily granting permission to the County of El Paso to conduct a background check and you authorize relevant parties to release confidential information. The information will remain confidential and will not be disclosed.

I,\_\_\_\_\_\_further hereby authorize the County of El Paso Human Resources Department to obtain all confidential records and information pertaining to a complete background investigation. This may include items such as (but not limited to): personal references, work references, Police Records, Sheriff Records, Driving Record, and any open record request.

Full Legal Name	Maiden Name (If Applicable)
Street Address	City/State/Zip Code
Social Security Number	Driver's License Number/State
Date of Birth	 Email

List the cities and states in which you have lived in the past 10 years.

1	4
2	5
3	6

Signature of Applicant