



# TEXAS A&M FOREST SERVICE



## Additional Duty Law Enforcement Officer Application

Date: \_\_\_\_\_

Name (First M Last): \_\_\_\_\_ Go By: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: Texas ZIP Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ TAMFS Office Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ TAMFS Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ TX Driver License# \_\_\_\_\_

Please answer all of the following questions:

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| 1. Have you been employed by TAMFS for at least one year?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Are you currently licensed by TCOLE as a Peace Officer?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Are you a US citizen?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Are you at least 21 years of age?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Do you have a high school diploma or GED?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Do you have a valid Texas driver license?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Have you ever committed a felony or Class A misdemeanor?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8. Do you have a conviction for a Class B misdemeanor within the last 10 years?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9. The peace officer training will require you to attend daily classes, to include some evenings and Saturdays, for almost five months. Can you do this? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10. Can you maintain your Comp Time balance under 160 hours?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 11. Have you ever bought, sold, or used any illegal drugs?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 12. Can you pass a physical and psychological examination?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Current position with Texas A&M Forest Service: \_\_\_\_\_

Office Location: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Department: \_\_\_\_\_

I certify that the information provided above is true and complete to the best of my knowledge.

\_\_\_\_\_  
Applicant Name

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

By signing this application, I approve and endorse this applicant becoming an ADLEO.

\_\_\_\_\_  
Supervisor Name

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
ACRFC/RF/Program Leader Name

\_\_\_\_\_  
ACRFC/RF/Program Leader Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head Name

\_\_\_\_\_  
Department Head Signature

\_\_\_\_\_  
Date