



# Fredericksburg Police Department

**Brian Vorauer**  
Chief of Police

1601 East Main Street, Fredericksburg, Texas 78624  
Telephone (830) 997-7585 Fax (830) 997-9541

## Fredericksburg Police Department Employee Hiring Procedures

The Fredericksburg Police Department Employee Hiring Procedures are designed to help ensure that the most qualified people are hired for vacant positions.

Applications may be received at any time and placed on file for future hiring. When a vacancy becomes available, applicants will be notified of the vacancy and the procedures and dates of testing.

Applicants must meet the minimum standards before an application may be accepted. Applicants will be required to perform both physical and written exams. Applicants that successfully pass through these tasks will be selected to continue to an employee interview board and undergo a thorough background check. Applicants will also be required to undergo psychological testing, a polygraph exam and medical screening. Applicants successfully completing all stages will be placed on a New Employee Hiring List. This list will be kept for approximately six months or until the list is depleted.

Attached is a copy of the minimum standards for appointment and minimum physical requirements, along with the application. Thank you for your interest in the Fredericksburg Police Department.

**Equal Opportunity Employer**

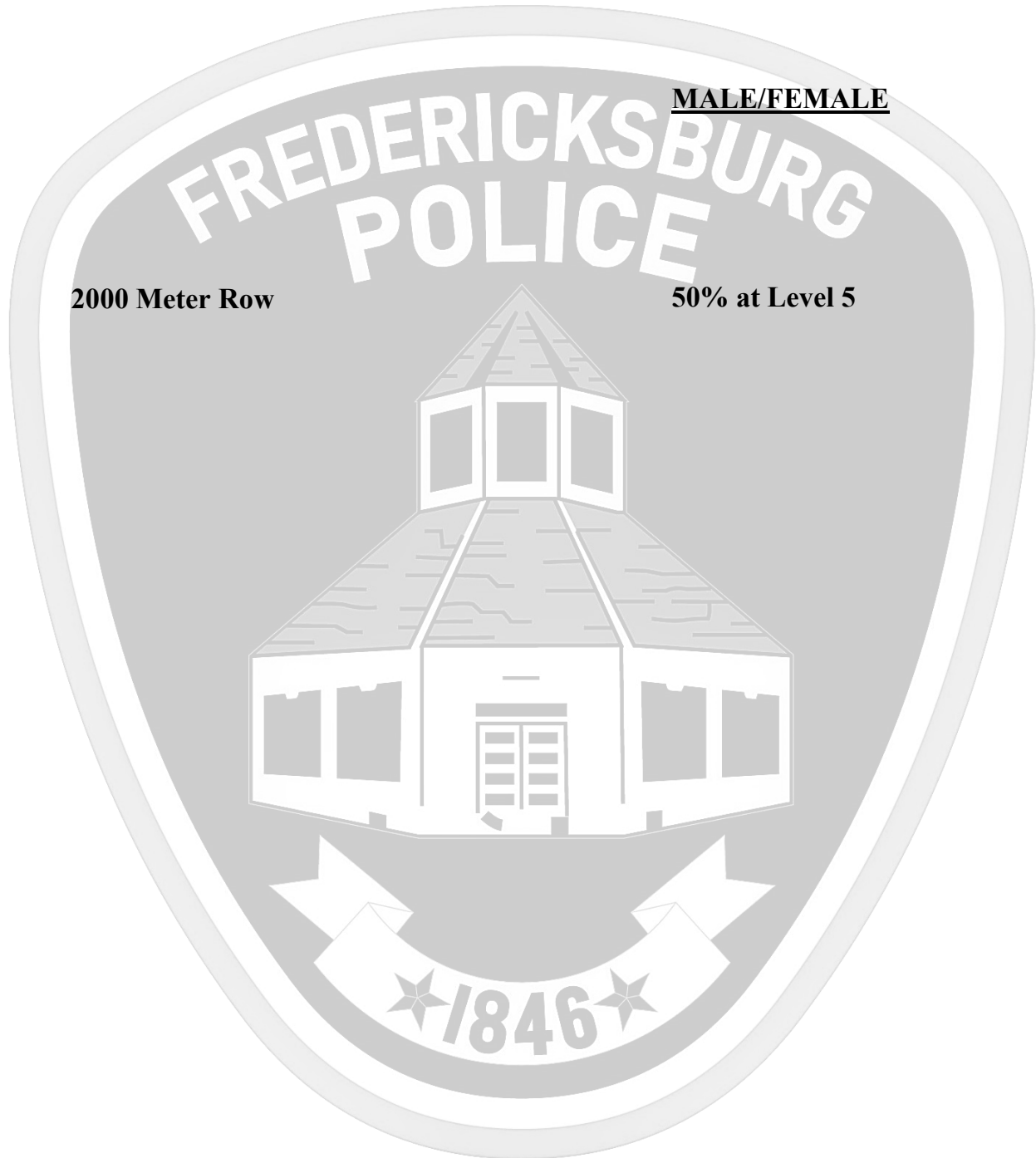
## FREDERICKSBURG POLICE DEPARTMENT

### MINIMUM STANDARDS FOR LAW ENFORCEMENT APPOINTMENT

- 1.) Must be a citizen of the United States.
- 2.) Must be at least twenty-one (21) years of age, and possess a valid Texas Drivers' License.
- 3.) Must be certified by T.C.O.L.E. or have successfully passed the T.C.O.L.E. exit examination.
- 4.) Must never have executed at any time a confession to a felony offense, such confession being admissible as evidence against you in any criminal proceeding in any State or Federal Court.
- 5.) Must not be under indictment for a felony offense.
- 6.) Must not have any felony conviction, or conviction of a crime of moral turpitude or domestic violence.
- 7.) Must not be on probation for any criminal offense.
- 8.) Must never have been convicted of an offense above the grade of Class B misdemeanor or a Class B misdemeanor within the last ten years.
- 9.) Must be of good moral character, as determined by a thorough background investigation.
- 10.) Must be a High School graduate or possess an equivalent G.E.D. certificate.
- 11.) Must pass a Physical Fitness examination administered by the Police Department.
- 12.) Must be examined and certified physically satisfactory by a licensed physician.
- 13.) Must be, when applicable, examined and certified mentally and psychologically satisfactory by a licensed psychiatrist or clinical psychologist.
- 14.) Applicant must have been discharged from military service under honorable conditions, if applicable.
- 15.) Must pass a polygraph examination.
- 16.) Must meet any other standards set by law or by T.C.O.L.E. policy.

**FREDERICKSBURG POLICE DEPARTMENT  
APPLICANT PHYSICAL FITNESS EXAM  
MINIMUM REQUIREMENTS**

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**THE CITY OF FREDERICKSBURG  
POLICE DEPARTMENT**

**APPLICATION FOR EMPLOYMENT - POLICE OFFICER POSITION**

These instructions must be followed exactly. To complete the application, type or print in black ink. Fill out the application form completely; if questions are not applicable, enter "N/A". Do not leave questions blank. Resumes may be submitted for additional information, *but not in place of a completed application*. Applications may be emailed to [broemer@fbgtx.org](mailto:broemer@fbgtx.org) or mailed/hand delivered to the Fredericksburg Police Department, Attn: Lt. Braxton Roemer, 1601 East Main Street, Fredericksburg, Texas 78624.

NAME \_\_\_\_\_ Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 (Last) (First) (Middle) (Maiden)

ADDRESS (Mailing) \_\_\_\_\_  
 (Street) (City) (State) (Zip Code)

(Permanent) \_\_\_\_\_  
 (Street) (City) (State) (Zip Code)

PHONE Cell \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

Date of Birth: _____	Driver's License: _____ (State) (Number)
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Position Applying For: \_\_\_\_\_

Salary Expected \$ \_\_\_\_\_ yearly Date Available for work \_\_\_\_\_

- Full-Time
- Part-Time
- Reserve

**Employment Related Licenses and/or Certifications**

License or Certification	Date Received	License of Certification	Date Received

MILITARY SERVICE: (active duty) Branch \_\_\_\_\_ DATES: From: \_\_\_\_\_ To: \_\_\_\_\_

Are you in the Active Reserve? \_\_\_\_\_

**EDUCATION:**

List your education to include: High School, College Undergraduate and Graduate work, Technical, and/or Vocational

Type of School	School Name and City Located	Years Attended		Number of Hrs. Completed	Graduated	Type of Degree	Field of Study
		From	to				
High School							
	College						
Technical							
	Vocational						

If you did not graduate from high School, did you receive a GED? \_\_\_\_\_  
 (yes) (no) (N/A)

**EMPLOYMENT RECORD: Please identify all law enforcement and military related employment and the last ten (10) years of all other fields of employment. Start with the most recent position and work back. Use additional sheets if necessary.**

Employer:			
Mailing Address:			
City, State, Zip Code	Telephone:		
Type of Business:	Full Time	Part Time	Seasonal
Starting Position:	Present or Last Title:		
Immediate Supervisor:	Starting Base Salary:	Yr.	Ending Base Salary: Yr.
Starting Date:	Leaving Date:		
Explain Reason for Leaving:			
Employer:			
Mailing Address:			
City, State, Zip Code	Telephone:		
Type of Business:	Full Time	Part Time	Seasonal
Starting Position:	Present or Last Title:		
Immediate Supervisor:	Starting Base Salary:	Yr.	Ending Base Salary: Yr.
Starting Date:	Leaving Date:		
Explain Reason for Leaving:			
Employer:			
Mailing Address:			
City, State, Zip Code	Telephone:		
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Immediate Supervisor:	Starting Base Salary:	Yr.	Ending Base Salary: Yr.
Starting Date:	Leaving Date:		
Explain Reason for Leaving:			

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Employer:				
Mailing Address:				
City, State, Zip Code	Telephone:			
Type of Business:	Full Time	Part Time	Seasonal	
Starting Position:	Present or Last Title:			
Immediate Supervisor:	Starting Base Salary:	Yr.	Ending Base Salary:	Yr.
Starting Date:	Leaving Date:			
Explain Reason for Leaving:				

### References

Give the name, address and telephone numbers of a minimum 6 reference to include: 3 personal and 3 professional references. Do not include current Supervisor.

1. **Personal** \_\_\_\_\_  
(Name) (Address) (Telephone)
2. **Personal** \_\_\_\_\_  
(Name) (Address) (Telephone)
3. **Personal** \_\_\_\_\_  
(Name) (Address) (Telephone)
4. **Professional** \_\_\_\_\_  
(Name) (Address) (Telephone)
5. **Professional** \_\_\_\_\_  
(Name) (Address) (Telephone)
6. **Professional** \_\_\_\_\_  
(Name) (Address) (Telephone)

May representatives of the Fredericksburg Police Department Contact:

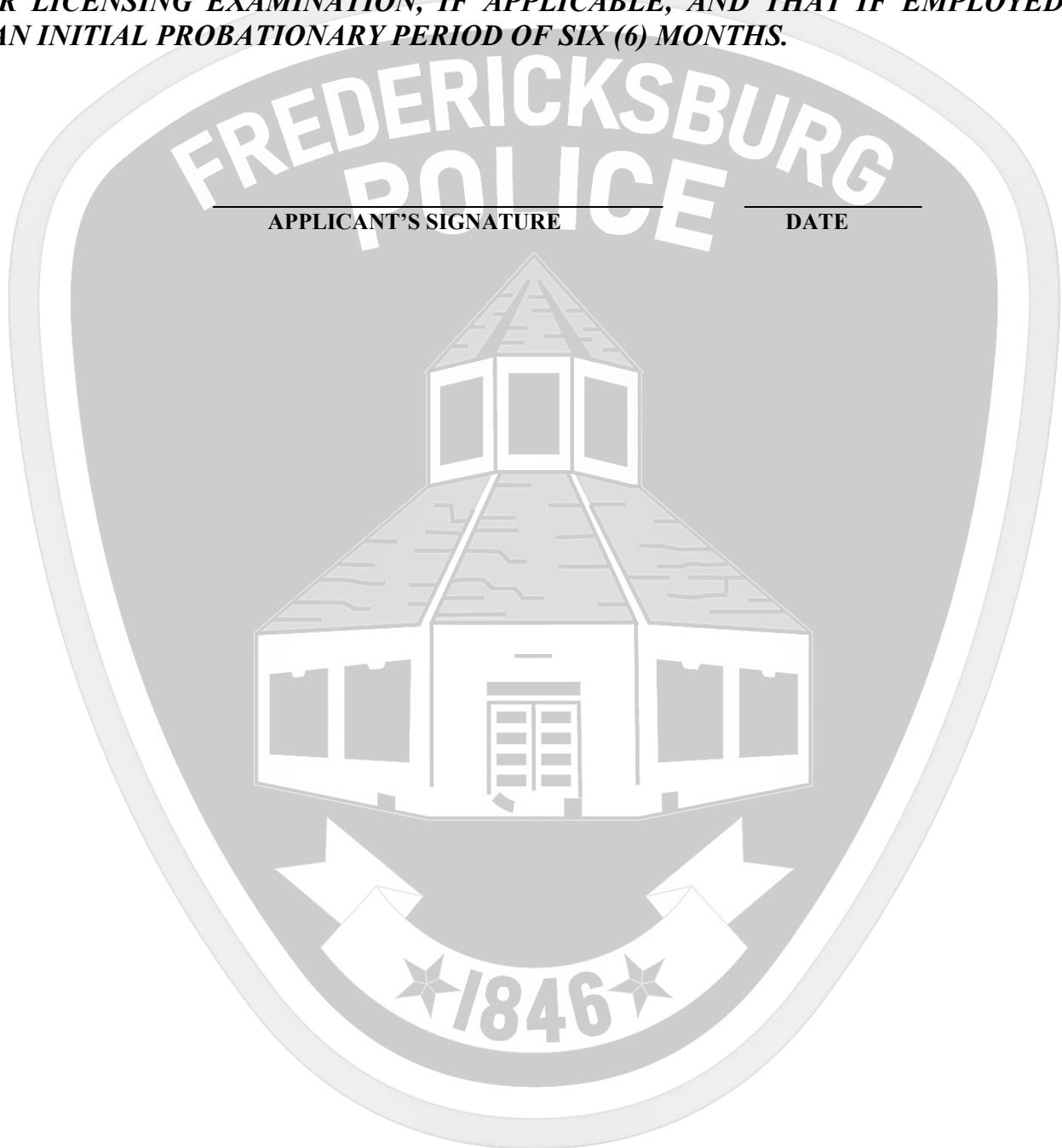
Your former employers? \_\_\_\_\_ Your present employer? \_\_\_\_\_

Do you have any relatives working for the City of Fredericksburg? \_\_\_\_\_ If "yes" list the names of these relatives and their relationship to you.

Name	Relationship

Have you ever been convicted of a felony? \_\_\_\_\_ If "yes", describe \_\_\_\_\_

***I HEREBY CERTIFY THAT THE FOREGOING STATEMENTS AS WELL AS THOSE ON ANY ATTACHEMENT(S) TO THIS FORM ARE TO THE BEST OF MY KNOWLEDGE TRUE AND CORRECT AND THAT THEY ARE ALL GIVEN OF MY OWN FREE WILL. I AGREE THAT ANY MISSTATEMENT(S) OR OMISSION(S) TO MATERIAL FACTS WILL CONSTITUTE GROUNDS FOR UNFAVORABLE CONSIDERATION OR DISMISSAL FROM EMPLOYMENT. I UNDERSTAND A CONDITION OF EMPLOYMENT WILL BE PASSING THE TEXAS PEACE OFFICER LICENSING EXAMINATION, IF APPLICABLE, AND THAT IF EMPLOYED I WILL SERVE AN INITIAL PROBATIONARY PERIOD OF SIX (6) MONTHS.***



APPLICANT'S SIGNATURE

DATE

**Additional Employment Fields (If Necessary)**

Employer:				
Mailing Address:				
City, State, Zip Code	Telephone:			
Type of Business:	Full Time	Part Time	Seasonal	
Starting Position:	Present or Last Title:			
Immediate Supervisor:	Starting Base Salary:	Yr.	Ending Base Salary:	Yr.
Starting Date:	Leaving Date:			
Explain Reason for Leaving:				

Employer:				
Mailing Address:				
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Starting Date:	Leaving Date:			
Explain Reason for Leaving:				

**Additional Comments (If Necessary)**

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