

Personal History Statement INSTRUCTIONS FOR DISPATCHER



Backgrounds Unit

320 N. Flower Street, 4th floor Santa Ana, CA 92703

> 714-834-5311 Backgrounds@ocsheriff.gov www.ocsheriff.gov



The following instructions are to assist you in accurately completing your Personal History Statement.

1. When filling out the <u>Personal History Statement</u> (PHS), read and follow all of the provided instructions that are provided in the PHS. Part of your background investigation includes your ability to follow directions. Make sure the PHS is accurate and completely filled out. When you print it out, you will sign the first and last page, also initial every page on the bottom right hand corner.

The Personal History Statement can be found on the Orange County Sheriff's Department website at <u>www.ocsheriff.gov</u>. In the top left corner, click on <u>Join OCSD</u>. Click on <u>Personal History Statements</u> for New Applicants link. Click on <u>Dispatcher Personal History Statement 1A link</u>. It is highly recommended that you save a copy of this form to your computer. The form cannot be electronically transmitted. <u>Personal History Statement must be typed and printed single sided. Please use</u> <u>Microsoft Word ONLY</u>.

Waiver must be <u>NOTARIZED.</u> (Authorization to Release Information Form)

*Can be notarized at AAA, USPS, Bank, Federal Credit Union and/or Post Office.

-Section 2 (Relatives and References)

When choosing your **personal** references you can use supervisors and/or co-workers. However, these same people can \underline{NOT} be used again in your employment references. A personal reference can only be used once in the PHS.

All maiden names are to be placed inside parenthesis (maiden name).

-Section 3 (Education)

If you received a GED or an Equivalency Exam, the original transcript/certificate has to be received in an unopened and sealed envelope.

-Section 4 (Residence)

Make sure you list every person you have lived with at each residence. Their first and last names are required.

-<u>Section 5 (*Experience and Employment*</u>) Include supervisor/co-workers home address, phone number, and email address on last page of personal history statement.

Make sure you include every job you have worked at, even if the company is no longer in business or open. Note on the application that the business is now closed. If a specific store is no longer open, but the business is still in operation (e.g. Best Buy), then provide the address for the Human Resource (HR) Department. Note on the application that the address provided is for the HR department.

Supervisor/co-workers names and addresses need to be accurate. Make every attempt **not** to use the business address for your supervisors and co-workers' addresses. A lot of times businesses refuse to forward mail to their employees. Every effort needs to be made to provide accurate home addresses.

If a supervisor/co-worker refuses to provide their home address, then find out if the employee can receive mail at work. If the company will not forward the mail to the employee, then **as a last resort** you may use their e-mail address.

Document the dates you worked as close to the exact date as possible. If you are uncertain of the specific date you began and ended working, then at least provide the month and year. (You may want to contact the HR department so you can provide the most accurate information). If additional space is needed you can <u>re-open</u> the PHS application and use pages 11 through 14, as needed or use a word document. Place these additional pages in the correct chronological order with the remaining employment information. (The PHS instructions tell you to use page 30 for all additional information, however, it is preferred that you use the structured forms to complete the employment section).

1. The list of documents needed for the background interview.

You have to provide all original documents and one (1) set of copies for the following documents:

Birth Certificate / Naturalization Papers / Resident Card Automobile Insurance Dissolution of Marriage Bankruptcy documents to include the discharge documents High School Diploma College Diploma Selective Service / Draft Registration DD-214 Military Form(s) Most recent performance evaluations Proof of legal name change

You have to provide two (2) copies of your driver's license and social security card. The driver's license and social security card go on the same page. The driver's license should be placed above the social security card on the copies.

 Birth Certificate (Original) / Naturalization Papers/Resident Card If you were not born in the United States, you have to provide your original and copy of the Naturalization Certificate

The following are **NOT** accepted forms of citizenship: Passports Hospital Birth Certificates (with footprints on it) Certified Abstracts

- 2. California Driver's License
- 3. Social Security Card

If you have to request a new card make sure you request one before your interview and bring in proof of the request.

4. Proof of Current Automobile Insurance

Make sure your insurance card/policy is current and <u>has your name on it listing you as an insured or</u> <u>authorized driver</u>. Note: Most insurance cards don't have authorized drivers listed on it. Therefore, you would need to provide the policy.

5. Dissolution of Marriage Verification (Child Custody Paperwork, if applicable)

We do NOT need Marriage Certificates.

6. Complete Bankruptcy Paperwork

Include discharge documents.

7. High School and College Diploma(s)

All high school and college transcripts have to be received in an **<u>unopened</u>** and <u>sealed</u> envelope.

8. Selective Service/Draft Registration

MALES ONLY (<u>www.sss.gov</u>) click on "Check a Registration." This on-line print out is all that is needed.

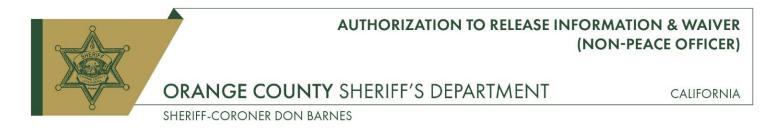
9. Veteran's Discharge and **all** DD-214 Form(s)

To obtain Military (active, discharged, retired) records, go on-line to <u>http://www.archives.gov/veterans/military-service-records/</u>, then click on "Launch the eVetRecs System." Click the appropriate responses. You have to print the request form out, sign it, and then fax it to the appropriate number. Request that the records be mailed to your Background Investigator at the following address: OCSD Backgrounds, 320 N Flower St 4th Floor, Santa Ana, CA 92703. Please make sure you print the "Signature Verification" page and bring it with you the day of your Background Appointment.

- 10. Your two most recent Performance Evaluations
- 11. California Department of Consumer's Affair License(s)
- 12. Proof of Legal Name Change (does not apply towards marriages/divorces)

The entire interview process may take up to four (4) hours.

You are to park above the third floor of the parking structure. Parking is not validated.



To Whom It May Concern:

As a candidate for a position with the Orange County Sheriffs' Department ("OCSD"), I am required to furnish information for use in determining my qualifications.

I hereby authorize and direct you, your organization, its custodian of records, and/or persons in your employ to furnish and release to any authorized representative of OCSD bearing this release, or any copy thereof, any and all information you have concerning me, including but not limited to: information pertaining to my employment, performance evaluations, attendance records, academic transcripts, degrees conferred, background investigations, local criminal history information, internal affairs investigations, disciplinary actions, polygraph results, eligibility for rehire, educational records, and/or any other information that you possess about me, including any and all files otherwise deemed confidential or privileged.

I hereby release, discharge, and exonerate you, your organization, its officers, agents, and assigns, from any liability or damages, whether in law or equity, for furnishing records in compliance with this authorization and request to release information. Truthful responses are protected, even if unsolicited, by the absolute privilege of California Civil Code §47. I also hereby waive any and all right and/or opportunity to review, inspect, and/or obtain OCSD's background investigation report and/or any confidential information provided during the background investigation. This release shall be binding on my legal representatives, heirs, and assigns.

This authorization to release my records is valid for one year from the date of signature.

I have had adequate time to review all the terms above, and I understand their meaning and purpose.

THIS RELEASE WILL EXPIRE ONE YEAR AFTER THE DATE OF SIGNATURE.

SIGNATURE:		ADDRESS:	
(Full Legal Signature) PRINT NAME:	(Signature to be witnessed)	CITY:	
DATE:		TELEPHONE:	
	A notary public or other officer completing this certificate document to which this certificate is attached, and not		C C
State of California County of			
On	before me,		
		(insert name and title of	of the officer)
me that he/she/they ex			oscribed to the within instrument and acknowledged to heir signature(s) on the instrument the person(s), or the
I certify under PENALT	Y OF PERJURY under the laws of the State of Califo	rnia that the foregoing pa	aragraph is true and correct.
WITNESS my hand an	d official seal.		
Signature		(Seal)	

rev. 03/11/21



ORANGE COUNTY SHERIFF'S DEPARTMENT

CALIFORNIA

SHERIFF-CORONER DON BARNES

I understand that I am authorizing an intensive investigation into my background for employment-related purposes. The investigation will include, for example, verification of any and all information contained in my application, background questionnaires, and/or any information supplied by me or others about me to the Orange County Sheriff's Department ("OCSD"), review of documents from third parties, and contacting persons and/or organizations that have or may have information relating to me and my suitability for employment with the OCSD, as well as a search of public and private databases, including criminal justice and law enforcement databases such as COPLINK, LINX, C-ALL, DDEX, NDEX.

I understand that those persons and/or organizations that are contacted or otherwise provide information in the course of my background investigation may feel inhibited about furnishing information concerning my suitability for employment with OCSD unless confidentiality of their information can be guaranteed on a permanent basis. I further recognize that although some of the information in OCSD's background investigation report could come from a public record or otherwise be accessible to me, this information may be inextricably interwoven with other confidential data to which I otherwise would not be privy. I understand that I will not be permitted to access or review information communicated by persons and/or organizations about my suitability for OCSD employment. I further understand that, except as required by law, I will not receive feedback about the conclusion of my background investigation except for notification that I "passed" or "did not pass." In addition, I waive any and all rights to review and/or obtain the background investigation report and/or any information provided to OCSD during the background investigation. I also understand that truthful responses by current and former employers are protected, even if unsolicited, by the absolute privilege of California Civil Code §47.

Those persons contacted must be able to communicate freely and openly with a background investigator about my qualifications and suitability for employment without fear that their statements might subject them to liability or become known to me. Therefore, I exonerate, release, and discharge the person(s) contacted by OCSD or its representative(s), together with OCSD and the County of Orange, and their officers, agents, or assigns, from any claim for liability or damages of any kind, whether in law or in equity, on behalf of myself, my heirs, agents, or assigns, for their communications about my suitability for employment, and for any refusal to make available to me any confidential information contained in OCSD's background investigation, including but not limited to the identity of any person or organization who may have supplied information in the course of this investigation, as well as the substance of any such information supplied which might identify that person, and from any other compliance with this authorization or attempts to comply with it.

I have had adequate time to review this form, and understand its meaning and purpose. If I do not understand the above terms, I will seek competent advice before signing.



CONTINUATION

THIS RELEASE WILL EXPIRE ONE YEAR AFTER THE DATE OF SIGNATURE.

SIGNATURE: (Full Legal Signature) PRINT NAME: DATE:	(Signature to be witnessed)	ADDRESS: CITY: TELEPHONE:	
	A notary public or other officer completing this certificate document to which this certificate is attached, and not		5
State of California County of			
On	before me,		
me that he/she/they ex entity upon behalf of w	ecuted the same in his/her/their authorized capacity(ie hich the person(s) acted, executed the instrument.	es), and that by his/her/t	bscribed to the within instrument and acknowledged to their signature(s) on the instrument the person(s), or the
Signature		(Seal)	

rev. 03/11/21

PERSONAL HISTORY STATEMENT – Peace Officer POST 2-251 (Rev 2/2018)

SECTION 5:	EXPERIENCE AND EMPLOYMENT	
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28. JOB EXPERIENCE

- List ALL jobs you have had, including part-time, temporary, self-employment, and volunteer. (Begin with your current or most recent.)
- · If you have military experience, including reserve duty, enter your military base, assignments, or unit of assignment.
- List ALL periods of unemployment in excess of 30 days.
- If more space is needed, continue your response on page 25.

28.1	NAME OF CURRENT EMPLOYER OR MILITARY UNIT FROM IMM/YYYY) TO IMM/YYYY) OCSD Imm/YYYY) Imm/YYYY) Imm/YYYY)				TO MM((YYY)	
	ADDRESS (NUMBER / STREET / SUITE / OR BASE)					EXT
	OTY STATE :					
	JOB TITLE / RANK			TYPE OF EMPLOYMENT (CHECK ALL THAT APPLY)		
	DUTIES / ASSIGNMENTS			REABON FOR LEAVING		
	SUPERVISOR	CONTACT NUMBER	EXT.	EMAL		
	Michael Moreno	(714) 555-1234		michaelmoreno@	ocsd.org	
	NAMES OF CO-WORKERS 1) Maria Medina	(714) 555-5678	EXT.	mariamedina@oo	ed ora	
	2) Melanie Luna	(714) 555-9876		melanieluna@oc	sd.org	
	Would there be a problem if we conta	ct your current employer?				🔲 Yes 🔲 No
	IF YES, explain:					
28.2	PERIOD OF UNEMPLOYMENT ICHECK APPLICA				FROM (MM/YYYY)	TO MM/YYYYY
	Student 🔲 Between jobs 🔲	Leave of absence	Other:		_ /	/
	NAME OF EMPLOYER OR MILITARY UNIT				EROM IMMOOTO	TO MMOOOO
28.3					/	/
	ADDRESS (NUMBER / STREET / SUITE / OR BAS			QONTAG	T NUMBER	EXT
				()	
	сіту		STATE 2	ZIP EMAIL		
	JOS TITLE / RANK			TYPE OF EMPLOYMENT		
					Temp 🔲 Self-emp	loyed 🔲 Volunteer
	DUTIES / ASSIGNMENTS			REABON FOR LEAVING		
	SUPERVISOR.	CONTACT NUMBER	EXT.	EMAIL		
		()				
	NAMES OF CO-WORKERS	CONTACT NUMBER	EXT.	EMAL		
	1)	()				
	2)	()				
		1		1		
28.4	PERIOD OF UNEMPLOYMENT (CHECK APPLICA Student Between jobs		E 0/h			

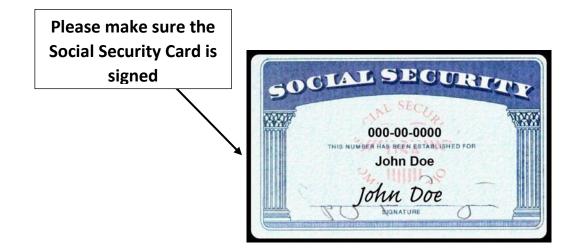
PERSONAL HISTORY STATEMENT - Peace Officer POST 2-251 (Rev 02/2018)

SUPPLEMENTAL INFORMATION

- Use this space to provide information that does not fit elsewhere on this form (e.g., additional family members, schools, residences, employers, explanations to questions, etc.). Reference the corresponding questions and/or specific items. ٠
- · You may print copies of this page as needed. If you are filling in this page online, text will flow to additional pages automatically.

28.1- Michael Moreno (Supervisor) OCSD (Employment dates)
Address	
Phone Number	
Email Address	
Maria Moreno (Co-worker)	
Address	
Phone Number	
Email Address	
Melanie Luna (Co-worker)	
Address	
Phone Number	
Email Address	
28.3 First and Last Name (Supervisor) Com	ipany name (Employment dates)
Address	
Phone Number	
Email Address	
First and Last Name (Co-worker)	
Address	
Phone Number	
Email Address	
First and Last Name (Co-worker)	
Address	
Phone Number	
Email Address	
Page 25 of 25	initial this page to indicate that you have provided complete and accurate information:





(2) COPIES

Birth Certificate (Original) Naturalization Certificate Samples of what is and is not accepted:

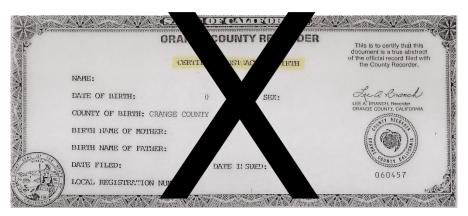
ACCEPTED







NOT ACCEPTED





DAY OF <u>BACKGROUND</u> INTERVIEW

PACKET 1

PACKET 2

PACKET 3

*Make Sure your SOCIAL SECURITY card is signed.

*Make sure your PERSONAL HISTORY STATEMENT is signed and all pages are initial on the bottom right corner.

Example of 3 Packets

	Broker Australia Broker Broker JULY KANG Broker Broker Broker JULY KANG Broker Broker Broker JULY KANG Broker Broker Broker An TESK CA (6770) Broker Broker Broker Martine Broker Broker Broker Martine Broker Broker Broker Antesk CA (6770) Broker Broker Broker Broker Broker Broker Broker <td< th=""><th>ne, a una singe on one many popores applicants are not expected or required to reveal any medical or other disability-related matamano about transitives in reaponse to questions on this form, on to any other industry mede prior to receiving a conditional offer of employment.</th></td<>	ne, a una singe on one many popores applicants are not expected or required to reveal any medical or other disability-related matamano about transitives in reaponse to questions on this form, on to any other industry mede prior to receiving a conditional offer of employment.
And the offer an	Broker AUTO INS SPECIALISTS1 PO BOX 6507 ATTESIA CA 80703 800-4577079 800-4577079 Policy Number PO	Initial We page to indicate that you have read the instructions.

Picture shown above is how documents should be turned in.



Do not turn in paperwork in binder, folder, envelope, breifcase, or bag.