



INSTRUCTIONS, AUTHORIZATION AND
PERSONAL HISTORY STATEMENT 4

ORANGE COUNTY SHERIFF'S DEPARTMENT

CALIFORNIA

SHERIFF-CORONER DON BARNES

The following instructions are provided as a guide and assist you. **This form, which you are required to fill out, must be complete and detailed in all respects.** It is the basis for your background investigation.

The Personal History Statement can be found on the Orange County Sheriff's Department website at **OCSHERIFF.GOV** click on **Join OCSD**, then **click on Personal History Statement for New applicants, and go to PHS-4** . It is highly recommended that you save a copy. This form cannot be electronically transmitted. **Personal History Statement must be typed on single sided.**

It is to your advantage to respond openly. Any negative factor in your background will be evaluate in terms of the circumstances and facts surrounding its occurrence, and its degree of relevance to this volunteer position. For example, being fired from a job or having an arrest record may not in itself be grounds for disqualification. During the investigation, the investigator will inquire into the facts surrounding such an occurrence. An evaluation will then be made of the relevance of these facts to this volunteer position.

Do not attach documents such as resumes, credit reports, Department of Motor Vehicle printouts or driver's licenses, etc. in lieu of the information requested in the Personal History Form.

All zip codes, addresses (including city names), telephone numbers, and other pertinent information must be included or the Personal History Form cannot be processed in a timely manner. **All boxes must be filled in. If a question does not apply to you, enter "DNA" in the space provided.**

Bring the completed form and your personal documents with you to the background interview. This interview will last approximately 2 hours. This is the process that starts your background investigation. The appointment will be at the Sheriff's Department, 320 N. Flower St 4th floor, Santa Ana, 92703. **Parking will be at your own expense, no validation.**

Please bring the following **original forms** to the appointment. The information will be verified and noted. Your originals will be returned to you.

1. Birth Certificate (**Original or Certified Copy**) / Naturalization Papers / Resident Card
2. California Driver's License
3. Social Security Card
4. Proof of Current Automobile Liability Insurance (**Listing you as an Insured Driver**)
5. Authorization to Release Information (**We do not notarize**)

If you do not understand any part of the form, ask for assistance; call the Background Unit at, (714) 834-5311.

AUTHORIZATION TO RELEASE INFORMATION



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TO WHOM IT MAY CONCERN:

I am an applicant for the position of _____ with the Orange County Sheriff-Coroner Department. As a matter of department policy, my prospective employer is required to conduct a thorough investigation into my personal, medical, and psychological fitness to serve in this capacity.

I hereby direct you, your organization, its Custodian of Records, and/or persons in your employ to release all information which you may have concerning me, including information which may be confidential, privileged and/or derogatory in nature, including, but not limited to: employment information, official employment documents, employment performance data, character reference information, educational records and transcripts (pursuant to Public Law 93-380), medical, surgical, psychological and dental records if I am offered employment with this agency (pursuant to the Medical Information Act, Civil Code Section 56 et. Seq. and C.F.R. 1630), credit and financial information (pursuant to Banking Privacy and Fair Credit Reporting Acts), local criminal history information (pursuant to Penal Code Section 13300 [b][10]), and/or any other information that you possess. By signing this form, I acknowledge that I have received notice and have provided consent for the Orange County Sheriff's Department to use this information to conduct such a background investigation, which may include the searching of public databases, private databases, criminal justice databases, and law enforcement databases including, but not limited to, COPLINK, LINX, C-ALL, DDEX, and NDEX.

I exonerate, release and discharge you, your organization, its officers, agents and assigns, from any liability or damages, whether in law or in equity, for furnishing the truthful information requested by the bearer of this authorization form.

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

The signing of this document authorizes its execution and acknowledges that I have received a copy of it.

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

FULL NAME: _____ ADDRESS: _____
(Signature to be witnessed)
PRINT NAME: _____ CITY/STATE: _____
DATE: _____ TELEPHONE: _____

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of _____

On _____ before me, _____
(insert name and title of the officer)

personally appeared _____ who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)



ORANGE COUNTY SHERIFF'S DEPARTMENT

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SHERIFF-CORONER DON BARNES

- CAC/CTAC/HSAC
- ONSITE CONTRACTORS/INTERNS/CONSULTANTS
- ONE LEGACY-TRANSPORTATION
- PSR/CHAPLAINS/RACES/KEEPERS

PERSONAL HISTORY STATEMENT FORM 4

INSTRUCTIONS: Please type. Each question must be answered. If the question does not apply, enter "DNA" in the space provided for the answer.

PART I PERSONAL DESCRIPTION

1. Legal Name		Last	First	Middle			
2. Aliases-Nicknames (List <u>all</u> names you have ever been known by and the circumstances)							
3. Date of Birth		4. Place of Birth (City, County, State)		5. Social Security Number			
6. If a Naturalized Citizen, list the City, County and State where Naturalized.							
7. Sex	Age	Height	Weight	Build (Light, Medium, Heavy)	Complexion	Hair	Eyes
8. Scars, tattoos, or other distinguishing marks.							

PART II RESIDENCE INFORMATION

9. Residence address (Number, Street, City, State, Zip Code)		
List the telephone number(s) where you can be contacted.		E-mail Addresses:
Home #	Cell #	Primary secondary

PART III MARITAL INFORMATION

10. Marital Status (Check one or more)	<input type="checkbox"/> Never Been Married	<input type="checkbox"/> Married	<input type="checkbox"/> Separated
	<input type="checkbox"/> Divorced	<input type="checkbox"/> Widowed	<input type="checkbox"/> Re-married
11. Name of Present Spouse (First, Middle, Last Name)			
12. If divorced or annulled, list prior marriages in order of occurrence. (If additional space is needed, use the back of this page)			
Name and addresses of former Spouses			



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PART IV EMPLOYMENT INFORMATION

13. Begin with the most recent job and list your work history for the past 5 years in chronological order. Include in sequence, all part-time jobs, periods of employment, periods of unemployment and military service. List each duty station with complete military address including unit designation. Do not duplicate the names of persons whom you listed as references. (For the purposes of this personal history statement, volunteer work should be included as employment.)

From	Employer's Name	Employer's Address (Number, Street, City, State, Zip)	Area Code/Telephone
To	Job Title	Supervisor Name - Area Code/Telephone	
Duties		Email Address	
From	Employer's Name	Employer's Address (Number, Street, City, State, Zip)	Area Code/Telephone
To	Job Title	Supervisor Name - Area Code/Telephone	
Duties		Email Address	
From	Employer's Name	Employer's Address (Number, Street, City, State, Zip)	Area Code/Telephone
To	Job Title	Supervisor Name - Area Code/Telephone	
Duties		Email Address	
From	Employer's Name	Employer's Address (Number, Street, City, State, Zip)	Area Code/Telephone
To	Job Title	Supervisor Name - Area Code/Telephone	
Duties		Email Address	

PART V COMMUNITY INFORMATION

14. List in chronological order every city or community in which you **resided** in the past 5 years. Begin with your present residence and work backwards. Include the state or territory applicable.

From	To	Address (Specify N, S, E, W, St, Dr, Pl, Ave, City and State) Include Zip Code



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PART VI REFERENCE INFORMATION

15. Please list Names, Addresses, and Phone Numbers of three Personal Character References.		
Name (First, Middle, Last)	Residence Address (Number, Street, City, State, Zip Code)	Area Code/Telephone
How does this person know you?		Email Address
Name (First, Middle, Last)	Residence Address (Number, Street, City, State, Zip Code)	Area Code/Telephone
How does this person know you?		Email Address
Name (First, Middle, Last)	Residence Address (Number, Street, City, State, Zip Code)	Area Code/Telephone
How does this person know you?		Email Address

PART VII TRAFFIC INFORMATION

17. Driver's License Number and State	Class of License	Expiration Date
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PART VIII ARREST INFORMATION

18. <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been detained by a law enforcement officer? If the answer is "Yes", explain below why you were detained.
19. <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been arrested and released by a misdemeanor citation? If the answer is "Yes", what was the offense listed on the citation? Please explain.
20. <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been arrested and booked into a jail facility? If the answer is "Yes", what was the offense and where were you booked? Please explain.



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PART IX MISCELLANEOUS INFORMATION

23. Is there anything else you wish to disclose that will assist us in conducting your background investigation more expeditiously? If "Yes", please explain.

Empty rectangular box for miscellaneous information.

BACKGROUND INVESTIGATION CONSENT

I, the undersigned, authorize the Orange County Sheriff's Department, and its agents, to independently research my background, character, credit and criminal record, past employment and education. This includes contacting references and other persons, reviewing records maintained by any of these persons, both public and private organizations. This may include investigating whether you have been involved in any insurance, unemployment or worker's compensation related fraud.

Date _____ Signed _____