

CERTIFICATION STATEMENT

In making and filing this application for employment, I authorize all persons, firms, officers, corporations, associations, organizations, State and Federal agencies, and institutions to furnish to the Office of the Criminal District Attorney of Bexar County, or any of its authorized representatives, all relevant documents, records or other information that may be requested in the investigation of this application.

I further agree that all information received by that office or those representing the Criminal District Attorney may be treated confidentially, and I specifically waive any right to review the statements of reference made to the Office, which become a part of my official file.

I certify that, to the best of my knowledge and belief, all of the information on and attached to this application, including any attached application materials is true, correct, complete, and made in good faith. **I understand and agree** that a false or fraudulent answer to any question on any part of this declaration or its attachments may be grounds for not hiring me, or for my termination after I begin work, and this employer shall not be liable in any respect for such action or termination. **I authorize** the Bexar County Criminal District Attorney's Office to conduct a background investigation pertaining to my suitability for employment, which may include a criminal history check. **I consent** to the release of information about my ability and fitness for employment with the Bexar County Criminal District Attorney's Office by employers, schools, law enforcement agencies, and other individuals and organizations to investigators, human resources staff, and other authorized employees of the Bexar County Criminal District Attorney's Office. As an applicant for employment with the Bexar County Criminal District Attorney's Office, **I understand** that, if employed, I must comply with the employee Drug and Alcohol Policy. Additionally, **I agree** to submit to a pre-employment drug-screening test if requested or required by Bexar County.

I understand and acknowledge that employment by the Bexar County Criminal District Attorney's Office is "employment at-will." That is, if I am selected for a position within this Office, I may be terminated without notice at anytime, for any reason, or no reason at all, and I may do the same.

Applicant Signature: _____ Date: _____

Name of Applicant: _____

Social Security Number: _____

Driver's License Number: _____

Date of Birth: _____

Complete Current Address: _____