



New Mexico Mounted Patrol Troop 10
4055 Sonoma Ranch Blvd NMSP Building
Las Cruces, NM 88011
575-323-1180
newmexicomountedpatrol.org
webmaster@nmmp.us

Initial applicant packet

Note:

Please hand deliver completed application to a Troop Officer during a regular Troop meeting unless other arrangements are made in advance. An application and background forms may be requested at that time.

INSTRUCTIONS:

1. Complete the New Mexico Mounted Patrol Waiver and release for background information. **This form will have to be notarized.**
2. Sign the Omnibus Consolidation Appropriation Act of 1997 form. **This form will also have to be notarized**
3. Fill out the New Mexico Mounted Patrol Electronic Fingerprint form. You must fill in every portion of the form for it to be considered complete. If the form is not complete it will be returned to you and will cause a delay in your application process.
4. Return all forms back to the Troop in which you are applying.
5. Wait for the New Mexico Mounted Patrol Captain Adjutant to contact you via your E-Mail address you have provided. The Captain Adjutant will contact you with your fingerprint registration information and the nearest location to have your fingerprints taken
6. You will have ***seven (7) days*** to have your fingerprints taken. Once you have completed the fingerprint process you will have to send a reply E-Mail to the Captain Adjutant, and the Troop confirming the time and date your prints were taken.
7. The Troop will give you a New Mexico Mounted Patrol Application. Follow the instructions on the application and return it to the Troop.

Thank you for your interest in New Mexico Mounted Patrol

NEW MEXICO MOUNTED PATROL
WAIVER AND RELEASE FOR BACKGROUND INFORMATION

I, _____, am presently applying for membership in the New Mexico Mounted Patrol, which I acknowledge and understand, must thoroughly investigate my employment background, criminal history, personal background, education, credit history and reports, medical records, my military records and references in order to evaluate my qualifications for a position as a Trooper. I understand that it is in the public's interest that all relevant information in this regard, including my personal and employment history with my current and former employers, be disclosed to the New Mexico Mounted Patrol. I also understand and acknowledge that my background information may be shared with other law enforcement agencies including but not limited to the New Mexico State Police.

By this release, I hereby authorize any representative of all of my former employers, which have been fully disclosed and identified in my employment application, to divulge any information in its files, including my personnel file, pertaining to my employment records and history. I further authorize the release of such information, including photocopies, upon request to any representative of the New Mexico Mounted Patrol. I also authorize all former employers identified in my employment application to permit review and full disclosure of all records, or any part thereof, concerning myself and my employment with those former employers, by and to any duly authorized agent of the New Mexico Mounted Patrol. Said records are or may be public, private, or confidential nature.

The intent of this authorization is to permit all former employers identified in my membership application to provide, and for the New Mexico Mounted Patrol to obtain, full and free access to **ALL** records with the specific purpose of permitting the New Mexico Mounted Patrol to conduct a thorough background investigation regarding me. It is my specific intent to provide the New Mexico Mounted Patrol with access to personnel information, however personal and confidential it may appear to be.

I authorize all former employers and their representatives, which have been fully disclosed and identified in my membership application, to release any and all public and private information that it may have concerning me, my work record, my background and reputation, including photocopies of those documents. My military service records, education records, my financial status, my credit history and reports, my criminal history record, including arrest record(s) and records compiled during or as the result of criminal investigation(s) of me. Efficiency ratings, work performance evaluations, complaints or grievances filed by or against me, the records or recollections of attorneys at law, or other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had, an interest. Attendance records, polygraph examinations, and any internal affairs investigation and discipline, including any file which are deemed to be confidential and/or sealed and I

authorize any law enforcement agency that may have already completed a background investigation on me to share any and all information with the New Mexico Mounted Patrol.

I hereby release all former employers identified in my membership application, and, if applicable, their elected and appointed officials, employees and agents and all other from liability or damages that may result from furnishing the information requested, including any liability or damage pursuant to any state or federal laws. I hereby release all former employers identified in my membership application, and, if applicable, its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind; which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. I direct duly accredited representative of the New Mexico Mounted Patrol, regardless of any agreement I may have made with former employer to the contrary.

In addition, I also authorize law enforcement agencies with whom I may have applied for employment in the past or in the future to share their background investigative information with the New Mexico Mounted Patrol in order to ascertain my suitability for service as a New Mexico Mounted Patrol Trooper. I release and hold harmless all of the law enforcement agencies and the New Mexico Mounted Patrol, its elected and appointed officials, agents, members and employees from and against any and all liability which might result from conduction such an investigation, including any damages of whatever kind which may at any time result to me, my heirs, family or associates because of such investigation.

I recognize and understand that my rights under Title 5, United States Code, Section 552a, The Privacy Act of 1974, with regard to access and disclosure of records. I waive those rights with the understanding that information furnished by any former employer will be used by the New Mexico Mounted Patrol in conjunction with membership procedures.

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

This waiver is valid for a period of one year from the date of my signature as listed below.

Should there be any question as to the validity of this release, you may contact me at the address listed below.

I agree to indemnify and hold harmless the person, to whom this request is presented, as well as his or her agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request.

Printed Name

Signature

Subscribed and Sworn to before this day of _____ 20____



NOTAERY PUBLIC

My Commission Expires: _____

Applicant's Full Name (Printed)

Applicant's Signature

Applicant's Street Address

City State Zip

OMNIBUS CONSOLIDATED APPROPRIATION ACT OF 1997

The Omnibus Consolidation Appropriation Act of 1997 amends the Gun Control Act of 1968, and makes it unlawful to: SHIP, TRANSPORT, POSSESS, OR RECEIVE firearms or ammunition if **CONVICTEED** of a misdemeanor crime of domestic violence, past, present or future.

As defined by the Act:

1. A misdemeanor under Federal or State Law.
2. The use or attempted use of physical force or threatened use of a deadly weapon.
3. Committed by a current or former spouse, parent or guardian of the victim.
4. By a person with whom the victim shares a child in common.
5. By a person who is cohabiting or was cohabiting with the victim as a spouse (common Law), parent or guardian or similarly situated.
6. Includes all misdemeanors that involve the use or attempted use of force (simple assault and battery).
7. Does not have to be specifically defined as a domestic violence misdemeanor.

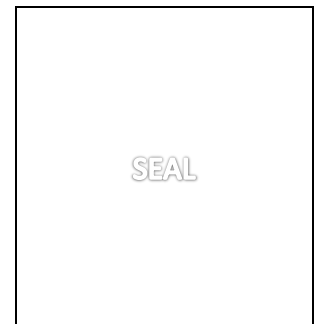
It is mandatory for you to respond to this form by signing below and having the document notarized and returned with your application. Failure to complete this form will disqualify you from applying for the New Mexico Mounted Patrol, and you application will be declined.

I SWEAR AND AFFIRM THAT I HAVE NO VIOLATIONS, IN ANY JURISDICTION, THAT WOULD APPLY TO THE OMNIBUS CONSOLIDATION APPROPRIATION ACT OF 1997 WHICH AMENDS THE GUN CONTROL ACT OF 1968.

Printed Name

Signature

Subscribed and Sworn to before this day of _____ 20____



NOTAERY PUBLIC

My Commission Expires: _____

NEW MEXICO MOUNTED PATROL ELECTRONIC FINGERPRINT REGISTRATION FORM

Instructions:

- A valid E-Mail is needed to Register.
- A valid social security number must be entered and then re-entered
- Place of birth is the state which you were born in
- Country of Citizenship must be US. If you are not a United States citizen you cannot apply.

You must use one of the listed options while filling out the registration form:

- Race is one of the following

- Asian or Pacific Islander
- Black
- American Indian and Alaska Native
- Unknown
- White (including Latino)

- Hair Color is one of the following:

- BALD
- BROWN
- PURPLE
- WHITE
- BLACK
- GREEN
- PINK
- UNKNOWN
- BLONDE
- GRAY
- RED
- BLUE
- ORANGE
- SANDY

- Eye Color is one of the following:

- BLACK
- GRAY
- PINK
- BLUE
- HAZEL
- UNKNOWN
- BROWN
- MAROON
- GREEN
- MULTICOLORED

NEW MEXICO MOUNTED PATROL ELECTRONIC FINGERPRINT REGISTRATION FORM

Personal Information			
First Name:		Middle Name:	
Last Name:		Suffix (Jr., Sr.):	
Aliases: Maiden Name		Date of Birth: MMDDYYYY	
Social Security #:		Re-enter SS #:	
Place of Birth: State		Country of Citizenship:	
Sex:		Race:	
Weight:		Height:	
Hair Color:		Eye Color:	
Address Information			
Address 1:		Address 2:	
City:		State:	
Zip:		Phone:	
Email:			

THIS FORM TO BE SENT TO THE NEW MEXICO MOUNTED PATROL CAPTAIN ADJUTANT