

SANTA FE POLICE DEPARTMENT

Police Officer Civil Service Application



12002 Hwy. 6
Santa Fe, Texas 77510

To be notified of the next entrance exam, this form should be completed and returned to the address below.

Last Name		First		Middle	
<hr/>					
Address:			City:		
<hr/>			<hr/>		
State:			Zip:		
Mailing Address if different:			City:		
<hr/>			<hr/>		
State:			Zip:		
Social Security Number:		Date of Birth:		Valid TX Driver's License Number:	
<hr/>		<hr/>		<hr/>	
Phone Number:					
<hr/>					

Are you currently TCOLE certified for a Police Officer position? _____

Are you currently enrolled in a Texas Police Academy? _____

If you answered yes, what is the anticipated completion date? _____

Do you have a high school diploma or GED? _____

Specify number of college credit hours: _____

Do you have military experience? _____

In order to receive 5 military service points added to a score of 70 or above, **you must submit prior to testing** a PHOTOCOPY OF FORM DD-214, UNDELETED which indicates that the individual performed active military service in the Armed Forces of the United States, and received an "Honorable" discharge. (Undeleted DD-214 contains sections 23-30). General discharge under honorable conditions or any other discharges are ineligible. Do not provide your original DD-214.

Signature of applicant: _____

Pamela K. Wood

Civil Service Director

pam@ci.santa-fe.tx.us

**Statement Concerning Your Employment in a Job
Not Covered by Social Security**

Applicant Name _____

Your earnings from this job are not covered under Social Security. When you retire, or if you become disabled, you may receive a pension based on earnings from this job. If you do, and you are also entitled to a benefit from Social Security based on either your own work or the work of your husband or wife, or former husband or wife, your pension may affect the amount of the Social Security benefit you receive. Your Medicare benefits, however, will not be affected. Under the Social Security law, there are two ways your Social Security benefit amount may be affected.

Windfall Elimination Provision

Under the Windfall Elimination Provision, your Social Security retirement or disability benefit is figured using a modified formula when you are also entitled to a pension from a job where you did not pay Social Security tax. As a result, you will receive a lower Social Security benefit than if you were not entitled to a pension from this job. For example, if you are age 62 in 2005, the maximum monthly reduction in your Social Security benefit as a result of this provision is \$313.50. This amount is updated annually. This provision reduces, but does not totally eliminate, your Social Security benefit. For additional information, please refer to Social Security Publication, "Windfall Elimination Provision."

Government Pension Offset Provision

Under the Government Pension Offset Provision, any Social Security spouse or widow(er) benefit to which you become entitled will be offset if you also receive a Federal, State or local government pension based on work where you did not pay Social Security tax. The offset reduces the amount of your Social Security spouse or widow(er) benefit by two-thirds of the amount of your pension.

For example, if you get a monthly pension of \$600 based on earnings that are not covered under Social Security, two-thirds of that amount, \$400, is used to offset your Social Security spouse or widow(er) benefit. If you are eligible for a \$500 widow(er) benefit, you will receive \$100 per month from Social Security ($\$500 - \$400 = \$100$). Even if your pension is high enough to totally offset your spouse or widow(er) Social Security benefit, you are still eligible for Medicare at age 65. For additional information, please refer to Social Security Publication, "Government Pension Offset."

For More Information

Social Security publications and additional information, including information about exceptions to each provision, are available at www.socialsecurity.gov. You may also call toll free 1-800-772-1213, or for the deaf or hard of hearing call the TTY number 1-800-325-0778, or contact your local Social Security office.

I certify that I have received Form SSA-1945 that contains information about the possible effects of the Windfall Elimination Provision and the Government Pension Offset Provision on my potential future Social Security benefits.

Signature of Applicant _____

Date _____