Submit Application & Background Investigation to the
El Paso County Human Resources Department at:

800 E. Overland
Room 223
El Paso, TX 79901
Phone: (915) 546-2218
Fax: (915) 546-8126
Email: humanresources@epcounty.com

Board Liaison:

El Paso County 911
Patricia Caldera
Phone: (915) 362-3911
Email: patc@elpaso911.org
Dear Applicant,

Thank you for your interest in applying to serve as a member of the El Paso County 911 District Board. This packet provides the necessary information for you to familiarize yourself with the responsibilities of this board and the necessary documents to begin the application process.

We appreciate your willingness to be involved in guiding the future of this board and its function of ensuring the health and vitality of our community.

As a member of this board, you will be expected to participate in the meetings and other tasks as deemed necessary to fulfill your post. You should participate actively in meetings and seeking as much information needed to help the board come to its decisions. Please be aware of the various duties, responsibilities and the time commitment that will be required of you.

After submitting this application, it will be reviewed and if it meets the qualifications needed to fill the vacancy, your information will be submitted for approval by the El Paso County Commissioners Court.

If you have any further questions please feel free contact the County Judge’s office at (915) 546-2098. Again, thank you for your leadership and commitment.

Sincerely,

Veronica Escobar
El Paso County Judge
Board Overview
Located in El Paso, Texas, the El Paso 911 District provides enhanced 911 services for the more than 700,000 citizens living and working in El Paso County. Created in 1987, the district has dedicated itself to deploying technology which provides our community with the critical infrastructure -- equipment, connectivity, software, maintenance and support -- used by Public Safety entities to receive the 911 call and dispatch emergency responders. The District supports El Paso’s Public Safety entities county-wide by providing the phone systems that deliver the 911 call to a Public Safety Telecommunicator, a Computer Aided Dispatch system (CAD) that documents and coordinates responder's actions, network connections among various radio systems which promote interoperability, and Geographic Information System (GIS) services which provide maps to Public Safety entities for response-routing and analysis purposes.

Duties
To Control and manage the 911 district, including adopting rules for the operation of the district and contracting with any public or private entity, including the operation of a 911 system.

Seats
6 Members Total: 2 County (1 Socorro and 1 other), 2 City Appointees, 1 Southern Bell Corp., 1 by Board via recommendations of other small cities within the County. See Texas Statute 772 of the Health and Safety Code. Also see resolution of 7/21/87. Mayor is automatically the Director of Emergency Management.

Term
2 year terms with no term limits. (Exempt from filing Financial Disclosure)

Meeting Times
3rd Thursday of every month at 9:11 AM 200 N. Kansas Boardroom.
EL PASO COUNTY 911 DISTRICT BOARD
BYLAWS

Sec. 772.454.
BOARD OF MANAGERS.

(a) The consolidated district is governed by a board of managers appointed in accordance with the order issued by the temporary board of managers under Subsection (b). The members of the boards of managers of all the districts consolidated serve as a temporary board until all members of the initial board of managers are appointed and qualify. The temporary board has all authority necessary to operate and administer the district.

(b) Before the 45th day after the date the district is created, the temporary board of managers by order shall adjust the membership of the board. The order must be substantially in accordance with the consolidation plan and must specify:

(1) The number of members of the board;
(2) The entity or combination of entities that appoints each member;
(3) Whether each member may or may not vote; and
(4) The term of each member of the initial board so that as near to one-half of the members as is practical serve terms that expire in even-numbered years and the remaining members serve terms that expire in odd-numbered years.

(c) The order issued under Subsection (b) must preserve as nearly as possible the proportional representation of interests exhibited by the memberships of the boards of managers of the several districts before consolidation.

El Paso County 911 District Board Information:

Website: http://www.elpaso911.org/

Board of Managers: http://www.elpaso911.org/board.html

Meeting Times: http://www.elpaso911.org/meetings.html

El Paso County Code of Ethics Training:
http://epcounty.com/ethicscom/training.htm
COUNTY OF EL PASO

Application for Boards, Commissions, and Committees

Name: ________________________________ Voting Precinct: ___________________

List the Board(s), Commission(s), and/or Committee(s) you are particularly interested in:

__________________________________________

Home Address: ________________ STREET __________ CITY ___________ STATE ______ 2IP

Phone number: ________________ Cell Phone number: ________________

E-mail address: __________________________

PURSUANT TO TEXAS GOVERNMENT CODE, SEC. 522.021, I ELECT THAT MY HOME ADDRESS & TELEPHONE NUMBER (CHECK ONE): ☐ MAY BE RELEASED / ☐ SHALL NOT BE RELEASED TO THE PUBLIC UPON REQUEST UNDER THE TEXAS OPEN RECORDS ACT. FAILURE TO MAKE A DESIGNATION RESULTS IN INFORMATION BEING AVAILABLE FOR PUBLIC ACCESS.

Length of Residency in El Paso County: ________________ (Years/Months)

Place of Employment: ________________________________

Business Address: ________________ STREET __________ CITY ___________ STATE ______ 2IP

Telephone: ( ) ________________ Fax Number: ( ) ________________

Professional Background:

________________________________________

________________________________________

________________________________________

Educational Background:

________________________________________

________________________________________

________________________________________
Three (3) personal or professional references not related to you:

NAME __________________________ PHONE # _______________ YEARS KNOWN __________

NAME __________________________ PHONE # _______________ YEARS KNOWN __________

NAME __________________________ PHONE # _______________ YEARS KNOWN __________

Previous volunteer organizations and/or community service:

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Do you have property in El Paso County under your name? __________ (Yes) ______ (No)

Are your property taxes current? _______ (Yes) ______ (No) If not, please give a brief explanation:

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Are you aware of any matter that could be considered a conflict that should be disclosed before you are considered for appointment?

If so, please describe the matter.

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Signature: __________________________ Date: __________________

Application should be submitted to:

El Paso County Human Resources Department:
Attention: El Paso County Board Application
800 E. Overland
Room 223
El Paso, TX 79901
Phone: (915) 546-2218 Fax: (915) 546-8126
Email: humanresources@epcounty.com
Dear Applicant:

The County of El Paso conducts background investigations on applicants in various departments. This effort is part of the selection process and requires your authorization. By signing this document you acknowledge that you are voluntarily granting permission to the County of El Paso to conduct a background check and you authorize relevant parties to release confidential information. The information will remain confidential and will not be disclosed except ______________.

I, _______________________________________, further hereby authorize the County of El Paso Human Resources Department to obtain all confidential records and information pertaining to a complete background investigation. This may include items such as (but not limited to): personal references, work references, Police Records, Sheriff Records, Driving Record, and any open record request.

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List the cities and states in which you have lived in the past 10 years.

1. ___________________________  4. ___________________________
2. ___________________________  5. ___________________________
3. ___________________________  6. ___________________________

___________________________________
Signature of Applicant