



**City of Campbell Police Department
Police Explorer Unit**

70 North First Street, Campbell, CA 95008. (408)866-2121

Dear Prospective Explorer,

Thank you for your interest in the Campbell Police Department Explorer program. The Campbell Police Explorer post is a non-sworn volunteer program designed to introduce young men and women to the field of law enforcement through active participation and progressive training.

The process of becoming an Explorer has been designed to be similar to that of becoming a police officer. The goal of this is to provide you with experiences that will benefit you with your future careers. Attached you will find an application detailing requirements you will need to meet to be considered for the program. Upon meeting these requirements, you will advance to an oral board interview. A thorough background investigation will be conducted as well. All statements on the application and during the background investigation will be verified. Your parents/guardians shall indicate their support of your interest in this position. There is a probationary period of six months for all new explorers.

This is your first step toward entering a possible career in law enforcement. Many past Campbell Police Explorers have gone on to successful careers with the Campbell Police Department; as well as other agencies. Good luck during this process, and we are looking forward to you becoming a part of our Explorer post.

If you have any questions regarding the Explorer program please contact Paula Gallagher at (408)866-2126, or email me at the address below.

Sincerely,

Sgt Lee Heitzman #84

Email: lheitzman@cityofcampbell.com

Application for Police Explorer Unit

Please print legibly in black ink. If your application is sloppy or incomplete in any way it will not be accepted.

Basic Personal Information

Name: _____ Date of Birth _____
Last First Middle

Address: _____
Number Street Apt City Zip code

Telephone #: _____ Driver's License #: _____

Social Security #: _____ Age: _____ Sex: _____

Height: _____ Weight: _____ Hair color: _____ Eye color: _____

References

Please provide three people who you have known for over 1 year. They must be over 18 and know you very well. Do not list members of your immediate family. You must complete the address section accurately for all references.

1. _____
Name Complete address

Relationship to you Occupation Home phone Work phone

2. _____
Name Complete address

Relationship to you Occupation Home phone Work phone

3. _____
Name Complete address

Relationship to you Occupation Home phone Work phone

Criminal Record

Have you ever been arrested? Yes ____ No ____ . If yes, state charge, date and arresting agency: _____

Have you ever received a traffic citation? Yes ____ No ____ . If yes, state charge, date, and issuing agency: _____

Academics and extra-curricular activities

Please list the schools you have attended, including the school you are now attending (if any) beginning with high school. You must list the full mailing address of the school.

High School: _____
Name of school Complete address Did you graduate?

College: _____
Name of school Complete address Did you graduate?

Other: _____
Name of school Complete address Did you graduate?

If attending school, what is your GPA? _____

If attending high school or college, what year are you currently in school? (i.e. senior)

List any extra-curricular activities you are or were involved in. These may include school clubs, sports, or hobbies. Please note the years you were involved in these activities, or if you are still involved.

Activity Year Activity Year

Activity Year Activity Year

Awards

Below please list any achievements or awards you have received

Type of award What was it for? Who gave it to you? Date received

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Employment History

Beginning with your current employer (if any) and working backwards, list the last four jobs you have held. Do not omit employers, no matter how short the period of employment.

If you have never been employed check here: _____

1. Employed from: _____ to: _____
Position: _____
Employer: _____ Supervisor: _____

Complete street address: _____
Number Street City
State Zip code Phone #

2. Employed from: _____ to: _____
Position: _____
Employer: _____ Supervisor: _____

Complete street address: _____
Number Street City
State Zip code Phone #

3. Employed from: _____ to: _____
Position: _____
Employer: _____ Supervisor: _____

Complete street address: _____
Number Street City
State Zip code Phone #

4. Employed from: _____ to: _____
Position: _____
Employer: _____ Supervisor: _____

Complete street address: _____
Number Street City
State Zip code Phone #

Verification, release, and statement of support

All parts of this section must be completed for this application to be accepted

I hereby certify that all answers stated in this application are true and I agree and understand that any misstatement of material fact contained in the application will cause forfeiture upon my part of all rights of any position in the service of the City of Campbell Police Department. I have read the list of requirements and I believe that I meet all of them.

Signature _____ Date _____

Below, circle the appropriate phrase when a choice is presented in parenthesis. If you are under 18 years of age, the statement must be completed by a parent. If you are over 18 years of age, you must complete the statement for yourself

I, _____ do hereby agree to save and keep the City of Campbell, Chief of Police, his sureties, all members of the Police Department, their sureties, and each of them, free indemnified and harmless from any loss, damage, liability, or expense incurred or claimed by anyone for any reason of any damage to (my son/my daughter/myself) resulting from (his/her/my) participation with the Campbell Police Explorer Post.

Signature _____ Date _____

If you are under 18 years of age, you must have your parent sign the below release. If you are over 18 years of age, you must sign the below release.

I, _____ do authorize the Campbell Police Department to contact whoever they deem necessary from the information I have provided. My signature below authorizes the release of any documents pertaining to me to the Campbell Police Department for the purposes of conducting a background check.

Signature _____ Date _____