

LAW ENFORCEMENT EXPLORER POST APPLICATION FOR MEMBERSHIP

Revised 11/99

NAME (Last) _____ (First) _____ (Middle) _____				HOME PHONE _____			
HOME ADDRESS _____						ZIP CODE _____	
NAME OF PARENTS OR GUARDIAN _____			HOME ADDRESS _____			HOME PHONE _____	
AGE	BIRTHDATE	HEIGHT	WEIGHT	GLASSES? ____ NO ____ YES	IF YES, UNCORRECTED VISION L/EYE RT/EYE	DO YOU HAVE CONVULSIONS?	ARE YOU DIABETIC?
HAVE YOU EVER HAD ANY SERIOUS ILLNESS OR INJURIES? IF YES, LIST BELOW							
IF YOU HAVE EVER BEEN ARRESTED, HELD ON SUSPICION, DETAINED, OR FINGERPRINTED BY ANY POLICE AUTHORITY, PROVIDE THE FOLLOWING INFORMATION:							
DATE	CHARGE			DETAINING OR ARRESTING AGENCY		DISPOSITION	
BEGINNING WITH THE MOST RECENT CASE, WRITE AN ACCOUNT OF EACH INCIDENT LISTED ABOVE.							
SCHOOL PRESENTLY ATTENDING (Name and City)						GRADE	
OTHER SCHOOL(S) ATTENDED IN PAST TWO YEARS						REASON FOR LEAVING	
THE ABOVE INFORMATION IS TO THE BEST OF MY KNOWLEDGE, TRUE AND CORRECT.				SIGNATURE OF APPLICANT		DATE	
BACKGROUND							
NAME OF SCHOOL			SIGNATURE OF APPROVING AUTHORITY			POSITION OR TITLE	
ACADEMIC STANDING			WORK HABIT			REPUTATION	
ADDITIONAL INFORMATION AND REMARKS							
RESULTS OF RECORD CHECK (LAPD, CII, ETC.)							
FIELD INTERVIEW CARDS							
OTHER INFORMATION AND OFFICER'S COMMENTS							
ORAL INTERVIEW GRADE		DATE COMPLETED		INVESTIGATING OFFICER (Name & Serial No.)		DIVISION	