EVERETT POLICE DEPARTMENT

Volunteer/Intern Application

As a candidate for a volunteer position with the Everett Police Department, I am willing to furnish information for use in determining my qualifications. I authorize release of any and all information that you may have concerning me, including information of a confidential or privileged nature. I understand that for security purposes a basic background check will be conducted to determine eligibility.

PLEASE PRINT CLEARLY. IT IS IMPORTANT THAT YOU ANSWER ALL QUESTIONS ON THIS APPLICATION FULLY AND ACCURATELY.

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Work Phone:	Ext Fax:	
E-Mail Address: _		
Place of Birth:		
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Degree(s) Earned Major(s) Minor(s) List Any Certifications:				
MILITARY SERVICE				
Branch:	Dates of Service:			
EMPLOYMENT HISTORY				
Current Employer:				
Address:				
Street City/State Zip Code				
Supervisor's Name:	Telephone #			
Job Duties:	Date of Hire:			
Previous Employer:				
Address:				
Street City/State Zip Code				
Supervisor's Name:	Telephone #			
Job Duties:	Date of Hire:			
Have you ever applied for a po	osition in law enforcement?			
Please list any misdemeanor, arrests or convictions:				
Everett Police Department -	VIP's / Intern Application			
LOCAL CHARACTER RE	FERENCES			
(1) Name	Telephone #			
AddressStreet City/Town Zip Code				
(2) Name	Telephone #			
AddressStreet City/Town Zip Code				

What days/hours would you be available?				
Please list any special ski Department:	lls, training, interests or hobb	pies that may be useful to the Everett Police		
EMERGENCY CONTA	CT INFORMATION:			
Person to be notified in c	ase of emergency:			
Home Phone:	Work Phone:	Relationship:		
GENERAL:				
Where did you learn of t	he EPD Volunteer Program?			
Why do you wish to volu		Department?		
Everett Police Department I hereby certify that all standarders contained in this co	ent – VIP's / Intern Applica atements made in this applicati application. I acknowledge tha	ion are true and I authorize investigation of all at any false statements or misrepresentations,		
either verbal or written, w	ill be cause for refusal of place	ement or immediate dismissal.		
Printed Name:				
Signature:				
Date:				
Please return application Volunteer Coordinator Everett Police Departme 45 Elm Street	n to the:			

AVAILABILTY/ SPECIAL SKILLS:

Everett MA 02149-5114

If you have any questions, please call Administrative Services (617) 394-2392 Note: Volunteers and Interns are subject to a CORI (Criminal Offender Record Information) Check prior to being accepted.