

Freeport Auxiliary Police Application Information

To help you better understand the Auxiliary Police organization below are some responsibilities and requirements of an Auxiliary Officer.

You must:

1. Within 30 days of appointment, purchase at your own expense, uniforms as required under our uniform standards. This should be at a cost to you of approximately \$75.00 to \$125.00.
2. Meet and maintain personal appearance standards of the Freeport Police Department.
3. Attend a minimum of three general service events and sixteen hours of training per year.
4. Ride in a squad with an officer for a minimum of 16 hours and 2 hours of radio room training within 60 days of appointment for training purposes.
5. Pay monthly dues to the Auxiliary Police organization in the amount of \$1.00 per month.

Although this is not a complete list of your responsibilities, it should be used as a guide to determine your desire to file an application with us. If you have any questions, please contact the Auxiliary Commander at the Freeport Police Department, 235-8222.

Thank you for your interest in the Auxiliary Police.

Freeport Auxiliary Police Membership Application

Instructions: Fill out application completely and accurately. All statements in our application are subject to verification. False statements in this application will bar you from membership. Please use a blank sheet of paper if needed for additional information. Identify additional information by question number. Use the term "DNA" (does not apply) if the question does not apply.

Personal		
Last Name	First Name	Middle
Maiden Name	Date of Birth	
Address	City	State/Zip Code
Home Phone	Work Phone	SSN
Are you licensed to drive a vehicle in Illinois?	Yes	No
Has your license ever been suspended or revoked? If yes, please explain:	Yes	No

Education	
High School (Name, Address, Phone)	Did you graduate
College (Name, Address, Phone)	Did you graduate
Major	Other courses completed

Military/Arrest	
Have you served in any military organization?	Yes No
If yes, branch _____	Type of discharge:
Have you ever been arrested (other than traffic)?	Yes No
If yes, please explain (date, arresting agency, charge, disposition):	

Work Experience

Work experience for the last ten years - list most recent first

Employer's Name	Address
From: / / To: / /	Immediate Supervisor
Work performed	Reason for leaving

Employer's Name	Address
From: / / To: / /	Immediate Supervisor
Work performed	Reason for leaving

Employer's Name	Address
From: / / To: / /	Immediate Supervisor
Work performed	Reason for leaving

Employer's Name	Address
From: / / To: / /	Immediate Supervisor
Work performed	Reason for leaving

Employer's Name	Address
From: / / To: / /	Immediate Supervisor
Work performed	Reason for leaving

Additional Information

Please include any additional information you think would be helpful to us in considering you for membership, such as additional experience, activities, accomplishments, etc.

References

List three references other than immediate family and past employers

Name	Phone Number ()
Address	City/State/Zip
Best time to contact	Relationship

Name	Phone Number ()
Address	City/State/Zip
Best time to contact	Relationship

Name	Phone Number ()
Address	City/State/Zip
Best time to contact	Relationship

Explain your reason for applying for this position:

Signature

Date