

**Willoughby Police Department
Explorer Post 602**

Full name _____ Age _____

Address _____

Telephone Number _____ Cell Phone _____

Social Security Number _____ Date of Birth _____

School _____ Grade _____

List any dealings with police, court or school disciplinary action _____

List three (3) adult references (name, phone, relationship)

1. _____

2. _____

3. _____

Do you know any police officers or explorers? Please give their names and department affiliations. _____

Answer the following information if under 18 years of age:

Father's Name _____

Address _____

Mother's Name _____

Address _____

(If the address is the same as above – disregard)

The program is for Lake County residents ages 14-21 year of age that have a genuine interest in law enforcement as a future profession. As part of the application process a background check will be performed. Applications will be denied if any information herein is incomplete or false.

I swear and affirm that the above-information is true.

Applicant's Signature

Date