

LOS ANGELES COUNTY SHERIFF'S DEPARTMENT DEPUTY EXPLORER PROGRAM APPLICATION & SCREENING QUESTIONNAIRE

<u>Instructions</u>: Accurately & honestly complete the entire application, neatly. Include all area and zip codes, apartment and space numbers, if applicable. Any false statement and/or omission of any information on this application will be grounds for disqualification. A criminal background check will be conducted, including being Live-Scan fingerprinted. Submission of this application is not a guarantee of acceptance. Deputy Explorers are NOT compensated, and are NOT considered employees of the LASD. Deputy Explorers are youth volunteers and serve at the discretion of the LASD and its representatives.

PERSONAL INFORMATION

Last Name:			First Name:			Middle Name:			
Sex:	Race:	Height:	Weight:	Hair Color:	Eye Color:	Date of Birth:	Age:		
California ID	Card #:			Student ID Card #:					
What social r	nedia sites are y	ou on? (ie: F	-acebook)						
What is <u>your</u>	e-mail address?								
Home Telephone #: ()			Cell Phone #: ()						
BACKGRO	OUND SCREE	ENING INF	ORMATION						
Have you eve	er been arrested	l?[]Yes[] No						
If yes, when,	where and what	t charge(s)?							
Have you eve	er been convicte	d (found or p	lead guilty) of a c	rime? [] Yes	[] No				
If yes, when,	where and what	t charge?							
Are you curre	ently on probatio	n?[]Yes	[] No						
If yes, for what	at charge?								
Have you eve	er received a cita	ation?[]Ye	s []No						
If yes, when a	and what charge	?							
Have you eve	er knowingly use	ed illegal nard	otics or drugs? [] Yes [] No					
If yes, what?				When was the last time?					
Have you eve	er knowingly ing	ested (used)	prescription drug	s, not prescribed	d to you? []	Yes [] No			
If yes, what?				When was the last time?					
Have you eve	er knowingly cor	nsumed alcoh	olic beverages?]Yes []No)				
If yes, what?				When wa	s the last time	e?			
Do you have	any tattoos? []Yes []No)						
If yes, where	is it / are they lo	cated & wha	t are they of?						
Do you have	any gang affiliat	tions? [] Ye	es []No						
If yes, who, w	hat is their relat	tion to you, a	nd from what gan	g?					

RESIDENCE INFORMATION

Residence Address: (I	How Long Residing Here?									
(g									
VEHICLE INFORM	ATION									
Do you drive an automo		•								
Make:	Model:	Color:	License #:	Registered To:						
EDUCATIONAL INFORMATION										
School Currently Atter	nding:		City:		Gra	ade:				
School Last Attended:			City:		Gra	ade:				
EMPLOYMENT IN	FORMATION									
Current Employer:	Address:		Telephone #:							
Job Title:		Supervisor's Full Name:								
Last Employer:		Address:		Telephone #:						
Job Title:		Supervisor's Full Name:								
JOD Title.	Supervisor's Full Name:									
Have you ever been te	rminated from a job? [] Yes []	No							
If yes, when, from when										
RELATED INFORM	•									
Have you ever been an	Explorer before? []	Yes [] No	o Where/When	?						
Have you ever been tu										
If currently enrolled in s	school, do you have a 0	GPA of 2.0 c	or higher? [] Yes	s []No						
Can you commit to atte	ending an 18 week basi	ic explorer a	cademy, held eve	ery Saturday from	n 6:30am – 5:00pm? _	·····				
**Use and a	ttach additional li	ned pape	r, if needed to	explain any	of your answers*	*				
I attest that the informa my authorization to con inquiries. I understand	nduct a thorough backg	round check	c on me (my child), to include finge	erprint and social media	a				
Signature of Explorer A	Printed Full Name			Date						
Signature of Parent/Gu	Printed Full Name			Date						

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