

Oberlin Police Department Oberlin Police Explorers Post #478



APPLICATION

Applicant Information:						
First Name:	M.I.:		Last Name:			
Street Address:						
City:	State:				Zip Code:	
Phone:	Eı	Email Address:				
Date of Birth:	A	Age:		Did you graduate High School? ☐ Yes ☐ No		
Were you referred to the Explor	rer Progr	ram by anyc	ne? (Pa	trol Offi	cer, Explorer, Other) 🛮 Yes 🗖 No	
If yes, who referred you to the E	Explorer	Program?				
Please list any special skills, acti	vities or	awards you	ı may ha	ive:		
Education:						
Name of Current School/College	Attend	ing:				
Current Grade/Year:	G.P.A.:	G.P.A.:		Degree/Major:		
Name of Guidance Counselor/A	dvisor:					
Employment (If Applicable)						
Current Place of Employment:						
City:	St	State:		Phone:		
Job Title:						
Criminal Background:						
Have you been convicted of a fe	•		neanor,	or are w	aiting deposition of a trial or	
hearing for such an offense? Defining the Have you ever been arrested?			es, expla	in:		
References: (Do not include pare	nts/guai	rdians or rel	latives)			
Name:			Phone:			
Name:			Phone:			
certify that the responses provide	ded here	ein are true,	accurat	e and co	omplete to the best of my knowled	
rinted Name Signat					Date	
Parent/Guardian Printed Name (<i>If Under</i>	 r 18 years	old) Parer	nt/Guardia	an Signatu	ure (If Under 18 years old) Date	