GARLAND POLICE DEPARTMENT APPLICATION FOR VOLUNTEER SERVICE

DIRECTIONS In the spaces below, please give us some background information on yourself. If any section does not apply to you, please indicate by writing N/A. Please return the completed application to: Volunteer Coordinator, Cindy Hale 1891 Forest Lane Garland, TX 75042 Questions? Call (972) 205-2012 or e-mail to hale@ci.garland.tx.us PLEASE PRINT OR TYPE LEGIBLY PERSONAL INFORMATION Full Name : Social Security # Date of Birth Age Home Address: City Zip Code Place of Birth Home Phone: Years City Resident: Previous Addresses Last Five Years: CRIMINAL HISTORY AND DRIVING RECORD Your Texas driver's license number : Has your license ever been suspended or revoked? Yes [] No [Have you ever been convicted of a crime? Yes [No [If yes, please explain: Traffic citations and accidents for the past two years: REFERENCES References: (Please list name, address, and telephone number) Name Address Phone

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EMPLOYER HISTORY				
Employer :		Occupation :		How Long :
Business Address :			Business Telephone	
Employment for past five years (Plea		ne, address, s	upervisor, dates) :	
EDUCATION BACKGROUND	AND MILITA	RY EXPER	IENCE	
Please check highest level of educatio	n completed :			
Some High School []	High School Dip	ploma []	Some College Study []	College Degree []
Some Graduate Study [] Graduate Deg			
High School Attended :		Colleg	ge Attended :	
Military Service Branch :	Rank:		Time Served :	Discharged :
VOLUNTEERISM BACKGRO	UND			
Previous volunteer services (please in	nclude organizatio	ns and dates)	•	
Memberships in community organizat	tions :			
Do you have your own transportation	? Yes [] No	[]		
Do you wish to volunteer specific hou				
On an as-needed basis ?				
What type of work would interest you	the most ?			
Please briefly state why you wish to v	olunteer your time	to the Garlan	d Police Department.	
IN CASE OF EMERGENCY				
In case of emergency, please notify :			Address :	
Relationship :			Daytime and evening phone	number :
			Day:	Evening:
SIGNATURE				
In signing, I do hereby certify that all inforr	nation contained in th	is application is	correct and accurate to the be	est of my knowledge. I further
authorize the Garland Police Department				
to perform volunteer duties for the Garland	d Police Department ,	I understand I r	may be privy to confidential info	ormation and promise to respect
and maintain that confidentiality at all time	S.			
nature : Date :				