

# Freeport Auxiliary Police Membership Application

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**Instructions:** Fill out this application completely and accurately. All statements in our application are subject to verification. False statements in this application will bar you from membership. If writing space provided is inadequate, use the continuation sheet at the end of this application and identify additional information by question number. Use the term "DNA" (does not apply) if the question does not apply.

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## Personal:

1. Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_
2. Maiden Name \_\_\_\_\_
3. Date of Birth \_\_\_\_\_
4. Home Address (no. street, city, state, zip code) \_\_\_\_\_
5. Home telephone number \_\_\_\_\_
6. Work telephone number \_\_\_\_\_
7. Social Security number \_\_\_\_\_

## Education:

8. High School (Name, address, phone #) \_\_\_\_\_  
Did you graduate? (yes or no) \_\_\_\_\_  
College (Name, address, phone #) \_\_\_\_\_  
Did you graduate? (yes or no) \_\_\_\_\_  
Major \_\_\_\_\_  
Other courses completed \_\_\_\_\_
9. Are you licensed to drive a vehicle in Illinois? \_\_\_\_\_
10. Has your license ever been suspended or revoked? \_\_\_\_\_  
If yes, explain. \_\_\_\_\_

**Military:**

11. Have you served in any military organization? \_\_\_\_\_

If yes, branch \_\_\_\_\_

Type of discharge \_\_\_\_\_

12. Have you ever been arrested? (other than traffic) \_\_\_\_\_

If yes, show date, arresting agency, charge, disposition. \_\_\_\_\_

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**Work Experience:**

13. Work experience for the last ten years. List below with the most recent first.

Employer's name \_\_\_\_\_

Address \_\_\_\_\_

From (date) \_\_\_\_\_ to (date) \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_

Work performed \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Employer's name \_\_\_\_\_

Address \_\_\_\_\_

From (date) \_\_\_\_\_ to (date) \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_

Work performed \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Employer's name \_\_\_\_\_

Address \_\_\_\_\_

From (date) \_\_\_\_\_ to (date) \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_

Work performed \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Employer's name \_\_\_\_\_

Address \_\_\_\_\_

From (date) \_\_\_\_\_ to (date) \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_

Work performed \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Employer's name \_\_\_\_\_

Address \_\_\_\_\_

From (date) \_\_\_\_\_ to (date) \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_

Work performed \_\_\_\_\_

Reason for leaving \_\_\_\_\_

**Additional Information:**

14. 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:**

15. List three references other than immediate family and past employers.

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone number (with area code) \_\_\_\_\_

Best time to contact \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone number (with area code) \_\_\_\_\_

Best time to contact \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone number (with area code) \_\_\_\_\_

Best time to contact \_\_\_\_\_

16. Explain your reason for applying for this position.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Date** \_\_\_\_\_ **Signature** \_\_\_\_\_