



# Police Reserve Officer Application

**Instructions:** Please complete this form and return it to the Police Department. Please type or handwrite in black ink. Answer all questions, inserting N/A if the question does not apply to you. Incomplete, illegible, or improperly completed applications will not be accepted. Do not list “see resume” in lieu of providing information. Attach additional sheets if necessary. You will be contacted regarding your status.

## Release of Information

**The City of Hopkins requires a check of the criminal history for all persons volunteering in the Police Department.** You may refuse to authorize the release of this information, but a failure to do so will result in disqualification as a Hopkins Police Reserve.

*I authorize the City of Hopkins to obtain, and the State of Minnesota to release, all information in the State of Minnesota Criminal Justice Information System regarding the undersigned. I hereby release the City of Hopkins and the State of Minnesota from any claims or damages which I might have as a result of the City obtaining this information from the state. This authorization is effective for three months following the date of execution.*

*This information is being requested by the City to determine if I meet the minimum requirements or are otherwise disqualified from volunteering with the Police Department Reserve Program.*

*This information is classified as private personnel data and will be provided only to those City employees or agents who have a need to review it. The City does not intend to release the information to any other party but may be required to do so by subpoena or court order under the provisions of Minnesota Statute, Chapter 13.*

Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

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

## 1. Personal Information

Name First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Current Street Address \_\_\_\_\_ Apt # \_\_\_\_\_

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

Date you began living at this address: Month \_\_\_\_\_ Year \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

### Past Addresses

Street Address \_\_\_\_\_ Apt # \_\_\_\_\_

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

Start Date: Month \_\_\_\_\_ Year \_\_\_\_\_ End Date: Month \_\_\_\_\_ Year \_\_\_\_\_



**Past Addresses (continued)**

Street Address \_\_\_\_\_ Apt # \_\_\_\_\_

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

Start Date: Month \_\_\_\_\_ Year \_\_\_\_\_ End Date: Month \_\_\_\_\_ Year \_\_\_\_\_

Street Address \_\_\_\_\_ Apt # \_\_\_\_\_

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

Start Date: Month \_\_\_\_\_ Year \_\_\_\_\_ End Date: Month \_\_\_\_\_ Year \_\_\_\_\_

Street Address \_\_\_\_\_ Apt # \_\_\_\_\_

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

Start Date: Month \_\_\_\_\_ Year \_\_\_\_\_ End Date: Month \_\_\_\_\_ Year \_\_\_\_\_

**Other Names**

List any other names you have used. \_\_\_\_\_

List any nicknames by which you are known. \_\_\_\_\_

**Citizenship**

Are you a U.S. Citizen?      No      Yes

If naturalized, please provide: State \_\_\_\_\_ Date \_\_\_\_\_

**Driver's License**

Driver's License Number \_\_\_\_\_ State \_\_\_\_\_

Have you ever had a driver's license in another state?      No      Yes

If yes, please list the state and name you were licensed under. \_\_\_\_\_

**Criminal History**

Have you ever been arrested or charged with a crime?      No      Yes

If yes, indicate the **charge** and the **disposition** of the case. Include traffic citations.



## 2. Interests and Goals

What are your hobbies and interests?

Please discuss why you would like to become a Hopkins Reserve Officer.

Are you a Law Enforcement Student?      No      Yes

Projected "skills" start date \_\_\_\_\_ Projected graduation date \_\_\_\_\_

Please discuss your future law enforcement plans/goals.

---

## 3. Educational Information

<b>Mark highest grade completed:</b>	<i>Grade School</i>	<i>High School</i>	<i>College</i>	<i>Post Graduate</i>
	1 2 3 4 5 6 7 8	9 10 11 12	13 14 15 16	1 2 MA PhD

Did you graduate from high school or receive a GED? \_\_\_\_\_

Name and address of high school \_\_\_\_\_

Type of School	Name & Location of School	Major	Degree?	
			<i>Type: A.A., B.A., M.A., etc.</i>	
College/University			Yes	No
College/University			Yes	No
Graduate			Yes	No
Technical			Yes	No
Other			Yes	No

Please describe any additional training or experience that you believe would be beneficial to your position as a Hopkins Reserve officer:



### 4. Employment Information

Enter your employment history for the last 10 years, starting with your current employer(s).

1. Employing Firm \_\_\_\_\_  
 Address \_\_\_\_\_  
 Your Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Specific Duties: \_\_\_\_\_  
 Reason for seeking other employment \_\_\_\_\_

Length of Employment:  
 From \_\_\_\_\_  
                   Month           Year  
 To \_\_\_\_\_  
                   Month           Year  
 Total \_\_\_\_\_ Years, \_\_\_\_\_ Months

2. Employing Firm \_\_\_\_\_  
 Address \_\_\_\_\_  
 Your Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Specific Duties: \_\_\_\_\_  
 Reason for seeking other employment \_\_\_\_\_

Length of Employment:  
 From \_\_\_\_\_  
                   Month           Year  
 To \_\_\_\_\_  
                   Month           Year  
 Total \_\_\_\_\_ Years, \_\_\_\_\_ Months

3. Employing Firm \_\_\_\_\_  
 Address \_\_\_\_\_  
 Your Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Specific Duties: \_\_\_\_\_  
 Reason for seeking other employment \_\_\_\_\_

Length of Employment:  
 From \_\_\_\_\_  
                   Month           Year  
 To \_\_\_\_\_  
                   Month           Year  
 Total \_\_\_\_\_ Years, \_\_\_\_\_ Months

4. Employing Firm \_\_\_\_\_  
 Address \_\_\_\_\_  
 Your Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Specific Duties: \_\_\_\_\_  
 Reason for seeking other employment \_\_\_\_\_

Length of Employment:  
 From \_\_\_\_\_  
                   Month           Year  
 To \_\_\_\_\_  
                   Month           Year  
 Total \_\_\_\_\_ Years, \_\_\_\_\_ Months

5. Employing Firm \_\_\_\_\_  
 Address \_\_\_\_\_  
 Your Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Specific Duties: \_\_\_\_\_  
 Reason for seeking other employment \_\_\_\_\_

Length of Employment:  
 From \_\_\_\_\_  
                   Month           Year  
 To \_\_\_\_\_  
                   Month           Year  
 Total \_\_\_\_\_ Years, \_\_\_\_\_ Months



## 5. References

Please provide 3 references that are not members of your family.

1. First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Occupation \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Relationship \_\_\_\_\_

2. First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Occupation \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Relationship \_\_\_\_\_

3. First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Occupation \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Relationship \_\_\_\_\_

## Certification

*I hereby certify that all statements made in this application are true and complete to the best of my knowledge and ability, and I realize that any misstatement or omissions of material facts may subject me to disqualification, dismissal, or possible criminal prosecution.*

**X Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Printed Name \_\_\_\_\_