



Crystal Lake Police Department Internship Application

Personal Information

Name Last: _____ First: _____ Middle: _____

List any other names used (Maiden Names, etc): _____

Home Address: _____ City: _____ State: _____ Zip: _____

Home Telephone: _____ Age: _____ Date of Birth: _____ Sex: _____

Drivers License Number: _____ State: _____

Social Security Number: _____

School Information

College Attending: _____

College Address: _____ City: _____ State: _____ Zip: _____

College Telephone: _____ Field of Study/Year: _____

Program Coordinator: _____ Telephone: _____

Academic Advisor: _____ Telephone: _____

Criminal History

Have you ever been arrested? Yes No

If yes, please explain: _____

Appendix I

Have you ever been convicted of any offense other than minor traffic citations?

Yes No

Have you ever been the victim of a crime? Yes No

If yes, please explain: _____

Was this reported to the Police? Yes No

References:

Supply four adults who are not related to you and have known you for at least three

years:

Name: _____

Name: _____

Address: _____

Address: _____

Home Phone: _____

Home Phone: _____

Work Phone: _____

Work Phone: _____

Years Known: _____

Years Known: _____

Name: _____

Name: _____

Address: _____

Address: _____

Home Phone: _____

Home Phone: _____

Work Phone: _____

Work Phone: _____

Years Known: _____

Years Known: _____

Appendix I

Please state why you wish to participate in the Internship Program:

Certification:

I hereby certify by my signature that the information contained herein is truthful and there are no willful misrepresentations or falsifications in this application, and all answers are true and correct to the best of my knowledge.

By submitting this application to participate in the Crystal Lake Police Internship Program, I understand that the Crystal Lake Police Department will conduct a background check to ensure I have no convictions that would make me ineligible to participate in this program.

Signature: _____ Date: _____

Date received: _____ Interview Scheduled For: _____

Letter from College/University Received: ___Yes ___No

Starting date: _____ Ending date: _____