



HAYWARD POLICE DEPARTMENT

Volunteer Application

(Please complete both pages)



NAME					
Last		First		Middle	
ADDRESS					
Number		Street		Apt. #	City
Zip					
TELEPHONE: Work: ()		Home: ()		Email:	
U.S. CITIZEN: (Y / N) <input type="checkbox"/>		DO YOU DRIVE? (Y / N) <input type="checkbox"/>		DRIVER'S LICENSE No. & State	
SECOND LANGUAGE? Specify				Speak <input type="checkbox"/>	Read/Write <input type="checkbox"/>
EMPLOYED? (Y / N) <input type="checkbox"/>		OCCUPATION or type of work (explain)			
				HOW MANY YEARS?	
LAST EMPLOYER: Name:				Phone: ()	
ADDRESS:				HOW MANY YEARS?	
PREVIOUS VOLUNTEER WORK:					
HOBBIES / SPECIAL INTERESTS:					
SPECIAL SKILLS (Typing, computers, telephones, public contact, etc.)					

(Please continue next page)

VOLUNTEER APPLICATION (continued)

REFERENCES (Include current address and phone number)	
1. Name:	Daytime Phone: ()
Address:	
2. Name:	Daytime Phone: ()
Address:	
3. Name:	Daytime Phone: ()
Address:	

Have you since age 18 been convicted of a misdemeanor or a felony? Do not include traffic citations. A fingerprint check will be made. A "yes" answer will not automatically disqualify you.

Yes No

If yes, please explain below:

Signature: _____ Date: _____