



**MUSKEGO POLICE DEPARTMENT
PUBLIC SAFETY CADET UNIT 128
APPLICATION**



PLEASE PRINT

Name: _____ Male: _____ Female: _____

First Middle Last

Address: _____
City State Zip Code

Date Of Birth: _____ Age: _____ Cell Phone #: _____

DL #/State: _____ Restrictions: _____

School/Grade: _____

Email Address: _____

Employer: _____ Phone Number: _____

Physical Limitations/Conditions (Explain): _____

Allergies: _____

In Case of an Emergency:

Contact Person(s): _____ Phone Number: _____

_____ Phone Number: _____

Insurance Carrier: _____ Policy Number: _____

Have you ever had any type of contact with police? Yes: _____ No: _____

If yes, provide information on the following that apply: date, reason, type of violation, arresting agency. Use back of form if necessary.

If under 18 years of age, you must fill out the information below:

Father/Legal Guardian Name: _____ Cell Phone #: _____

Address (if different from yours): _____

Email Address: _____ Other Phone #: _____

Mother/Legal Guardian Name: _____ Cell Phone #: _____

Address (if different from yours): _____

Email Address: _____ Other Phone #: _____

References: List at least one (1) non-relative adult who can vouch for your character. (include name, address, phone number and how you know the person)

Application Date: _____ Start Date: _____

Background Check

Completed by: _____ Date: _____

Approved: _____ Denied: _____ Police Record: _____