

WAYNE COUNTY SHERIFF RESERVES APPLICATION



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|---|-------------|
| Name: | DOB: |
| Address: | |
| City | State: ZIP: |
| Drivers License # (attach photocopy of your license): | |

US Citizen: Yes No If you were not born in the United States, you must provide proof of citizenship.

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|----------------|--------------------|
| City of Birth: | Social Security #: |
|----------------|--------------------|

| | | | |
|-------------|------------|---------|---------|
| Hair Color: | Eye Color: | Height: | Weight: |
|-------------|------------|---------|---------|

| | | |
|-------|--|--|
| Race: | Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female | Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced |
|-------|--|--|

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|----------------------|----------------------|
| Work Phone: () | Home Phone: () |
|----------------------|----------------------|

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|----------------------|---------------------|
| Cell Phone: () | Pager No.: () |
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|-------------------|------------------------|
| Fax No.: () | Relative No.: () |
|-------------------|------------------------|

e-mail address:

Education (Civilian or Military):

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Hobbies, Special Interests, Skills, Training or Licenses:

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Do you have any physical limitations? Yes No If yes, explain:

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|-------------|-----------|
| Occupation: | Employer: |
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If retired, when and from where did you retire:

| | | | |
|---------------------|-------|--------|------|
| Employer's Address: | City: | State: | ZIP: |
|---------------------|-------|--------|------|

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|--------------------------------|-----------------------|
| Employer's Phone No.: () | Immediate Supervisor: |
|--------------------------------|-----------------------|

Specific Responsibilities:

Have you ever been arrested? No Yes If yes, explain in detail, state the charge, arresting agency and disposition of the case.

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WAYNE COUNTY SHERIFF RESERVES APPLICATION CONTINUED

Have you ever been employed by or associated with a law enforcement agency? No Yes If yes, whom:

If requested to do so, would you take a drug test? Yes No

How many hours can you volunteer each month to provide assistance in various community functions within Wayne Co.? _____
(A minimum of eight (8) hours is required by each officer per month.)

Basic deputy training will be required. Can you attend classes for three (3) hours during the day or evening twice a week for sixteen (16) weeks? Yes No

A security clearance shall be required for all reserve officers. Do you object to your fingerprints being taken and a background check being made of you? Yes No

Have you ever been judged insane or mentally ill? Yes No

Have you ever been convicted of a misdemeanor crime of domestic violence anytime during your adult life? No Yes

If yes, indicate the date, city and state of the conviction:

REFERENCES

| Name | Address | Phone # | Relationship |
|------|---------|---------|--------------|
| 1. | | () | |
| 2. | | () | |
| 3. | | () | |

I certify that all of the above information is true and correct.

Signature:

Date:

COMPLETED APPLICATION SHOULD BE MAILED TO:

WAYNE COUNTY SHERIFF RESERVE
9555 Haggerty Road
Belleville, MI 48111