

POLICE VOLUNTEER APPLICATION An Equal Opportunity Employer

RETURN TO: Concord Police Department 1350 Galindo Street • Concord, CA 94520-2809 Phone (925) 671-3184

PHINI NAME;	Last	FitSt	Middle Initial	SOCIAL SECOHITY NUMBER (Optional)	
ADDRESS:	Number	Street	Apt No.	City State Zip Code	
HOME PHONE:		WORK PHONE:		CELL PHONE:	
EMAIL ADDRESS:			DRIVER'S LIC	ENSE NO	**************************************
	a citizen of the United St vide such documentation	ates or a permanent resident a ? □ Yes □ No	llien.		
EDUCATION High Scho	(circle highest grade co	mpleted) College 1 2 3 4	5 6 7	8	
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Please list at	iy iniormation about youl	rself such as hobbies and inter	ests:		

CERTIFICATE OF APPLICANT I certify that the information shown is true, complete and correct to the best of my knowledge, and that misstatements may subject me to disqualification or dismissal. I further understand any or all information included on this application is subject to verification by the City of Concord			EXPER	IENCE			
Are there any physical conditions we should consider in arranging volunteer assignments for you? Yes No If "yes", please explain: CONTACT IN CASE OF EMERGENCY				ther life experi	ences which wo	uld apply to a v	volunteer
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