



# La Crosse Police Department

## Police Reserve Unit

### Volunteer Application

| APPLICANT INFORMATION                       |               |             |      |
|---|---------------|-------------|------|
| LAST NAME                                   | FIRST NAME    | MIDDLE NAME | DATE |
| NAMES PREVIOUSLY USED                       |               |             |      |
| ADDRESS (STREET, CITY, STATE, ZIP)          |               |             |      |
| PREVIOUS ADDRESS (STREET, CITY, STATE, ZIP) |               |             |      |
| CELL OR HOME PHONE                          | EMAIL ADDRESS |             |      |

| EDUCATION   |                             |                           |                 |
|-------------|-----------------------------|---------------------------|-----------------|
|             | NAME AND LOCATION OF SCHOOL | DEGREE – MAJOR COURSEWORK | GRADUATION DATE |
| HIGH SCHOOL |                             |                           |                 |
| COLLEGE     |                             |                           |                 |
| OTHER       |                             |                           |                 |

| EMPLOYMENT                 |                                  |                    |                          |
|----------------------------|----------------------------------|--------------------|--------------------------|
| NAME / ADDRESS OF EMPLOYER | SUPERVISOR NAME AND PHONE NUMBER | REASON FOR LEAVING | DATES EMPLOYED FROM / TO |
| 1)                         |                                  |                    |                          |
| 2)                         |                                  |                    |                          |
| 3)                         |                                  |                    |                          |

| REFERENCES                  |              |              |             |
|-----------------------------|--------------|--------------|-------------|
| NAME / ADDRESS OF REFERENCE | PHONE NUMBER | RELATIONSHIP | YEARS KNOWN |
| 1)                          |              |              |             |
| 2)                          |              |              |             |
| 3)                          |              |              |             |

Explain why you want to become a volunteer with the La Crosse Police Reserve unit.

Describe any related experience or training, including military service, reserves, police volunteering, etc. (This section is optional.)

| DRIVER LICENSE VERIFICATION INFORMATION |                |              |             |              |
|---|----------------|--------------|-------------|--------------|
| DRIVER LICENSE NUMBER                   | STATE          | BIRTHDATE    | DATE ISSUED | DATE EXPIRES |
| SEX (M/F)                               | HEIGHT (FT/IN) | WEIGHT (LBS) | EYE COLOR   | HAIR COLOR   |

| TRAFFIC ACCIDENTS AND/OR CITATIONS     |      |           |                         |
|--|------|-----------|-------------------------|
| *ATTACH ADDITIONAL SHEETS IF NECESSARY |      |           |                         |
| ACCIDENT/CITATION LOCATION             | DATE | VIOLATION | DISPOSITION – FINE/JAIL |
| 1)                                     |      |           |                         |
| 2)                                     |      |           |                         |
| 3)                                     |      |           |                         |
| 4)                                     |      |           |                         |
| 5)                                     |      |           |                         |

| ARRESTS AND/OR ORDINANCE CITATIONS     |      |                           |                         |
|--|------|---------------------------|-------------------------|
| *ATTACH ADDITIONAL SHEETS IF NECESSARY |      |                           |                         |
| ARREST / ORDINANCE CITATION LOCATION   | DATE | CHARGES FILED / VIOLATION | DISPOSITION – FINE/JAIL |
| 1)                                     |      |                           |                         |
| 2)                                     |      |                           |                         |
| 3)                                     |      |                           |                         |
| 4)                                     |      |                           |                         |
| 5)                                     |      |                           |                         |

**RELEASE OF INFORMATION**

I, the undersigned, hereby empower any employee of the La Crosse Police Department to obtain any records and information concerning the enumerated items below, reference to my application for the Police Reserve Program.

I hereby release any individual or institution, including its Officers, Employees, or Related Personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result from/to me, my heirs, family or associates because of compliance with this authorization and request to release information or any attempt to comply within. I understand that the results are confidential, and I do not have access to them, as the information is obtained from sources in confidentiality.

1. From Law Enforcement or Criminal Justice Agencies.
2. From current or past Employers.
3. From Schools and Learning Institutions.
4. From Medical, Physical, Mental Offices, Clinics, Hospitals, Treatment Facilities, or other institutions engaged in such services.

Signature \_\_\_\_\_ Date Signed \_\_\_\_\_

**NOTE:** Mail or bring this application to: La Crosse Police Department  
 Reserve Liaison Officer  
 400 La Crosse Street  
 La Crosse, WI 54601

**POLICE RESERVE USE ONLY**

Interviewer: \_\_\_\_\_ Interview Date: \_\_\_\_\_ Time: \_\_\_\_\_ Hired:  Yes  No  Wait List