

# **COPPERAS COVE POLICE DEPARTMENT LAW ENFORCEMENT EXPLORER PROGRAM**

**Copperas Cove Police Department  
302 E. Avenue E  
Copperas Cove, Texas 76522  
(254) 547-8222**



**Name of Applicant**

## INSTRUCTIONS

These instructions are provided as a guide to assist you in properly completing your application. It is essential that the information be accurate in all respects. It will be used as the basis for a background investigation that will determine your eligibility for acceptance into the program.

- Answer all questions to the best of your ability.
- Your application should be completed electronically.
- If a question does not apply to you, enter "N/A" in the space provided. Do not leave any blanks empty.
- Avoid errors by reading directions carefully before making any entries on the form. Be sure information is correct and in proper sequence before you begin.

### The Importance of Honesty

The Copperas Cove Police Department is seeking Explorer applicants who demonstrate certain characteristics. **Honesty is the most important characteristic that you must demonstrate.** It is extremely important that you are completely honest in all of your answers.

The importance of honesty from the time of application, as well as during all interviews, cannot be overemphasized. Failure to respond to any question accurately and completely, whether orally or in writing, will result in disqualification. Many applicants have been disqualified for dishonesty.

While filling out documents, you are cautioned to take your time and to be thorough and specific in all answers. If you have any doubt in your mind concerning a particular question, or if you are unsure whether to include certain information, the answer is "Yes, include it".

You may think that something you have done will disqualify you from further consideration. It may or may not. What will certainly disqualify you is lying or distorting the truth. However, lying or willfully omitting any information from the application **will** certainly disqualify you from further consideration.

Applicant's Name

**APPLICANT IDENTIFICATION**

<b>Name (Last, First, Middle)</b>			
<b>Address</b>			
<b>Phone Number</b>		<b>Email</b>	
<b>Height</b>	<b>Weight</b>	<b>Eye Color</b>	<b>Hair Color</b>
<b>Social Security Number</b>		<b>Driver License Number &amp; State</b>	
<b>Date of Birth</b>		<b>Place of Birth</b>	
<b>School(s) attending/Grade level</b>			
<b>Scars, tattoos, or other distinguishing marks</b>			
<b>List all nicknames, maiden name, or other names by which you have been known</b>			
<b>List all social media sites you frequent and include user ID</b>			
<b>List any special licenses or certifications</b>			
<b>List any foreign languages you speak and level of fluency (fair, good, excellent)</b>			

Applicant's Name

**FAMILY/PERSONAL INFORMATION**

<b>Parent/Guardian (1)</b>	
<b>Name</b>	
<b>Address</b>	
<b>Phone Number</b>	<b>Place of Employment</b>
<b>Email</b>	

<b>Parent/Guardian (2)</b>	
<b>Name</b>	
<b>Address</b>	
<b>Phone Number</b>	<b>Place of Employment</b>
<b>Email</b>	

<b>List all siblings (Name and age)</b>

List all organizations that you have been a member of. Include all past and present memberships. This includes professional, social, fraternal, and religious organizations.

<b>From</b>	<b>To</b>	<b>Name of Organization</b>	<b>Address</b>	<b>Type of Organization</b>

Applicant's Name

## WORK HISTORY

Beginning with your present or most recent job, list all employment, including part-time, temporary, or seasonal employment.

<b>From</b>	<b>To</b>	<b>Employer (Business Name)</b>	<b>Business Address</b>
<b>Name of Supervisor</b>		<b>Name of a Co-Worker</b>	<b>Business Phone Number</b>
<b>Your Last Name at Time of Employment</b>			<b>Your Job Title</b>
<b>Job Description</b>			
<b>Reason for Leaving</b>			

<b>From</b>	<b>To</b>	<b>Employer (Business Name)</b>	<b>Business Address</b>
<b>Name of Supervisor</b>		<b>Name of a Co-Worker</b>	<b>Business Phone Number</b>
<b>Your Last Name at Time of Employment</b>			<b>Your Job Title</b>
<b>Job Description</b>			
<b>Reason for Leaving</b>			

<b>From</b>	<b>To</b>	<b>Employer (Business Name)</b>	<b>Business Address</b>
<b>Name of Supervisor</b>		<b>Name of a Co-Worker</b>	<b>Business Phone Number</b>
<b>Your Last Name at Time of Employment</b>			<b>Your Job Title</b>
<b>Job Description</b>			
<b>Reason for Leaving</b>			

Applicant's Name

**EDUCATIONAL HISTORY**

High School(s) Attended	City & State	Dates Attended	Graduated
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

College or University Attended		City & State
Dates Attended	Units Completed	Major/Minor
Degree Received (if any)		Date Received

College or University Attended		City & State
Dates Attended	Units Completed	Major/Minor
Degree Received (if any)		Date Received

Applicant's Name

**ARRESTS/DETENTIONS, TRAFFIC RECORD**

Were you ever arrested as a juvenile (16 years of age or under)?  Yes  No

If so, what was the charge(s)?

Were you ever processed in Juvenile Court?  Yes  No

If so, what was the disposition of the case(s)?

Have you ever been arrested or detained by law enforcement or summoned into court? (Do not include traffic tickets.)

Yes  No If yes, complete the following:

Offense	City & State	Date	Disposition of Case

Have you ever been convicted of an offense?  Yes  No

Have you ever been on probation for an offense?  Yes  No

If you were placed on probation, list the offense(s) and how long you were on probation.

If you were placed on Deferred Adjudication or Community Supervision, list the offense(s) and date(s).

Have you ever been arrested for a Felony?  Yes  No

Have you ever been convicted of a Felony?  Yes  No

Have you ever been arrested for Driving While Intoxicated or Driving Under the Influence of Drugs?  Yes  No

Other than traffic citations, have you ever been fined for any offense?  Yes  No

If yes, what was the offense? \_\_\_\_\_

Have you ever done anything that you could have been arrested for had you gotten caught?  Yes  No

List, to the best of your memory, all traffic encounters with law enforcement and include any driving citations (tickets) you have received.

Month & Year	Charge	City & State	Disposition

Applicant's Name

### SCHOOL DISCIPLINE

Name of school	Grade level	Violation	Level of discipline

### REFERENCES

List three (3) persons who know you well enough to provide current information about you. Do not list relatives or employers (former or current). All information should be current.

Name of Reference	Home Address
Home Phone Number	Mobile Phone Number
Name of Employer	Years Known

Name of Reference	Home Address
Home Phone Number	Mobile Phone Number
Name of Employer	Years Known

Name of Reference	Home Address
Home Phone Number	Mobile Phone Number
Name of Employer	Years Known



**DRUG HISTORY**

Have you ever used, sold, experimented with, or provide another with any of the following controlled substances or dangerous drugs?

Illegal Substance	Yes or No	Approximate Number of Times Used	Date Last Used (Month/Year)	Form(s) of the Drug(s)	Used, Sold, Experimented, Provided
Marijuana					
Hashish					
Amphetamine					
Methamphetamine					
Heroin					
Cocaine (powder or crack)					
Spice or Potpourri					
L.S.D.					
Ecstasy					
Mushroom					
Quaalude					
Barbiturates					
Designer Drugs					
Steroids					
P.C.P.					
Inhalants					
Other Illegal or Dangerous Drugs					
Prescription Medicine (Not prescribed to you)					

Applicant's Name

**ADDITIONAL INFORMATION TO SECTION(S)**

Use this supplemental page for additional information in any section of this Personal History Statement. Please reference the section and question you are answering on this sheet. Use a separate supplemental page for each section. Do not answer questions from two or more sections on the same supplemental page. Insert this sheet after the page it references. You may copy this page to use as needed.

Section Title

Page Number

Continue your statement or answer below. Please reference the question you are answering.

\_\_\_\_\_  
Applicant's Name

## **WRITING ASSIGNMENT**

Complete a 500-word essay about yourself and include the following:

- Why you want to join the Explorer program
- What you hope to gain from the experience
- What you have to offer the program

Applicant's Name

## APPLICATION SUBMISSION

Turn completed application packet in with the following items:

- Copy of driver's license (if applicable)
- Copy of high school diploma or GED certificate (if applicable)
- Copy of report card (to include current and at least 2 previous semesters)

Submit completed packet to Lieutenant Baker either in person at the police department or by email ([kbaker@copperascovetx.gov](mailto:kbaker@copperascovetx.gov)). If you have any questions, please contact Lieutenant Baker (254-518-7856) or in her absence, Captain Cardona (254-518-7835).