



CITY OF CORONA - POLICE DEPARTMENT

730 Corporation Yard Way, Corona, CA 92880

VOLUNTEER *Pre-Screen* APPLICATION

Print your full name: _____
(Last) (First) (Full Middle) (Maiden Name)

Home Address: _____

Home Phone (____) _____ Cell Phone (____) _____ Email _____

CDL# _____	Exp. Date _____	SS# _____
Date of Birth _____	Place of Birth _____	Alias: _____
Race Code _____		

Note: This is a PRE-SCREEN application for our Volunteer Program. All applicants are still contingent upon the successful completion of a background process, which includes a police records and work history check.

EDUCATION:

High School graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No		GED or High School equivalency? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Name of College	Units Completed	Major	Did you graduate?	Degree/Certificate
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

CRIMINAL:

Have you ever been convicted of a crime as an adult? Yes No

INTERESTS:

Please list the areas in which you are interested in volunteering with our agency:

Explain why you want to volunteer? _____

WORK EXPERIENCE:

List all work experience for the last five years beginning with your most recent position first. (Additional sheets may be attached, if needed).

Employer Name: _____ Dates Employed: _____

Address: _____

Job Title: _____ Supervisor: _____ Phone: _____

Duties: _____

Reason for leaving: _____

Employer Name: _____ Dates Employed: _____

Address: _____

Job Title: _____ Supervisor: _____ Phone: _____

Duties: _____

Reason for leaving: _____

Employer Name: _____ Dates Employed: _____

Address: _____

Job Title: _____ Supervisor: _____ Phone: _____

Duties: _____

Reason for leaving: _____

I hereby certify that all information contained in this application is true and complete. I also understand that the information I have provided will be verified by the Corona Police Department and that any false statement, omission or incomplete information may be cause for rejection of my application or discharge from the volunteer program. I agree to provide any additional information that may be required to determine my suitability for membership with the Corona Police Department Volunteer Program. My signature is permission for the Corona Police Department to conduct a records background check for my qualifications for the Police Volunteer Program.

Signature: _____

Date: _____

**Return original application in person or by
mail to:**

City of Corona Police Department
730 Corporation Yard Way, Corona, CA 92880