





APPLICATION FOR ENROLLMENT BASIC LAW ENFORCEMENT, JAIL OR SECURE JUVENILE DETENTION OFFICER TRAINING

NOTICE: All questions must be answered. Incomplete or illegible applications will not be considered. If the space provided is insufficient for complete answers or you wish to furnish additional information, please attach additional pages.

1. PERSONAL INFORMATION					
Name (Last, First, Middle)			Date of	Birth (mm-dd-yyyy)	Social Security # (xxx-xx-xxxx)
Address (Apartment, Street, P.O. Box)					Home Telephone Number
City	State	,		Zip Code	Work Telephone Number
Email Address					Cell Phone Number
In the past, have you ever enrolled in a basic law enf	orcement, ja	il or secure j	uvenile d	etention officer trainir	ng academy or courses?
What type(s) of basic training did you enroll in? La	w Enforceme	ent 🗌 J	ail 🗌	Secure Juvenile Dete	ention Not applicable
If applicable, include the name and location (city and	state) of the	school(s) w	here you	enrolled in basic trair	ning:
Are you a United States citizen? Yes No					
Do you have a high school diploma, GED or HSED?	Yes 🗌	No 🗌			
Do you have an Associate Degree or 60 associate de	gree level cr	edits or high	er from a	n accredited college o	or university? Yes \(\square\) No \(\square\)
If No, were you employed as a law enforcement officer prior to February 1, 1993? Yes No The college credit requirement as written in Wisconsin Administrative Code & LES 2.01(1)(e), pertains to law enforcement and tribal law enforcement officers first employed on or after February 1, 1993.					
Have you ever been convicted of a felony? Yes No					
Have you ever been convicted of a misdemeanor crime of domestic violence? Yes No					
Are you prohibited by state or federal law from posse	essing a firea	arm? Yes [No 🗌	
Do you possess a valid Wisconsin driver's license or a valid driver's license from another state? Yes \(\sqrt{No} \sqrt{\sqrt{No}} \sqrt{\sqrt{No}} \sqrt{\sqrt{No}} \sqrt{\sqrt{No}} \sqrt{\sqrt{No}}					
	2.	. EDUCATION	١		
		Dates			
Name of School(s) (n	From nm/yyyy)	To (mm/	′уууу)	Degree, Dip	oloma, or Credits Earned
High School(s)				l	
College(s)		1			

3. EMPLOYMENT

Begin with current or most recent employer. List chronologically all employment, including summer and part-time employment while attending school. To furnish additional employment information, attach sheets of the same size and format as this application.

Name and Address of Fundame	Dates of Employment	
Name and Address of Employer	From (mm/yyyy)	To (mm/yyyy)
Name of Employer:		
Address:	Full-Time	Part-Time
City:	State:	Zip Code:
Supervisor's Name / Telephone Number:	May we contact the employer / s Yes No	upervisor?
Position and kind of work:	Reason for Leaving:	
	_	
	Dates of En	nployment
Name and Address of Employer	From (mm/yyyy)	To (mm/yyyy)
Name of Employer:	, , , , ,	
Address:		
	Full-Time	Part-Time
City:	State:	Zip Code:
ony.	Grand.	
Our and a sile Name / Talankana Namekan	Manage and the second second	
Supervisor's Name / Telephone Number:	May we contact the employer / s Yes No	upervisor?
Position and kind of work:	Reason for Leaving:	
Name and Address of Employer	Dates of En	
Name of Employer:	From (mm/yyyy)	To (mm/yyyy)
Name of Employer.		
Address:	Full-Time	Part-Time
	run-rime	Fart-Time
City	State:	Zip Code:
Supervisor's Name / Telephone Number:	May we contact the employer / s	upervisor?
	Yes No No	
Position and kind of work:	Reason for Leaving:	
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			I. MILITARY SERVI	CF	
	- Francis				
Branch of Service	From (mm/yyyy)	To (mm/yyyy)	Active Duty or Reserve	Highest Grade	Skill Specialty or Primary Duty
Honorably Discharged from Mi	litary Service?	Yes	No 🗌	Not Applicable	
			5. REFERENCE	S	
Give three references (not rela	atives, or pres	ent employer;	avoid listing memb	ers of the clergy).	
Name:					
Position/Title/Profession:					
Number of Years Acquainted:	:				
Address:					
City/State/Zip:					
Telephone Number:					
Name:					
Position/Title/Profession:					
Number of Years Acquainted:	:				
Address:					
City/State/Zip:					
Telephone Number:					
Name:					
Position/Title/Profession:					
Number of Years Acquainted:	:				
Address:					
City/State/Zip:					
Telephone Number:					

6. GENERAL

Attach no more than one additional page for each answer.

- A. Why have you chosen to enroll in basic law enforcement, jail and/or secure juvenile detention officer training?
- B. Discuss things you have done which have contributed to your life experience. Be sure to include information regarding volunteer work with civic, school, or professional organizations. Be specific about names and dates.
- C. Why do you believe you could relate to and/or work with people of different races, genders, cultures, ages, socio-economic groups, and educational levels?

APPLICANT	PLEASE READ	CARFFILLYA	ND SIGN REI	\cap W
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Information provided and statements made as part of this application may be grounds for not allowing you to enroll in basic training or for dismissing you after training has already begun. All information and statements made are subject to verification.
CERTIFICATION
ALL INFORMATION PROVIDED AND STATEMENTS MADE BY ME AS PART OF THIS APPLICATION, OR AS PART OF ANY ADDITIONAL INFORMATION PROVIDED IN SUPPORT OF THIS APPLICATION, ARE COMPLETE, CORRECT, AND TRUE TO THE BEST OF MY KNOWLEDGE.
I UNDERSTAND THAT IF I AM ALLOWED TO PARTICIPATE IN BASIC TRAINING, FALSE INFORMATION PROVIDED OR FALSE STATEMENTS MADE AS PART OF THIS APPLICATION MAY BE CONSIDERED AS CAUSE FOR DISMISSAL FROM TRAINING.
Applicants Signature Date Signed