



West Fargo Police Explorers Post 281



PLEASE PRINT CLEARLY - APPLICATION MUST BE COMPLETED IN FULL

FULL LEGAL NAME: _____ AGE: _____

DATE OF BIRTH: _____ PHONE NUMBER (with area code): _____

ADDRESS: _____ CITY & STATE: _____

DRIVERS LICENSE / PERMIT NUMBER: _____ STATE: _____

SCHOOL ATTENDING: _____ GRADE: _____ GPA: _____

MEN'S POLO SHIRT SIZE: _____ (Explorers are issued a polo style uniform shirt by the department)

HOW DID YOU LEARN ABOUT THE WEST FARGO POLICE EXPLORERS & WHY YOU ARE INTERESTED IN JOINING THE POST?

PREVIOUS TRAFFIC VIOLATIONS, CITATIONS, & POLICE CONTACTS – INCLUDE JURISDICTION:

HAVE YOU EVER BEEN ARRESTED, SUSPECTED OF, OR CHARGED WITH A CRIME?

NO YES

IF YES, PLEASE EXPLAIN & INCLUDE JURISDICTION:

I request the opportunity to participate in the West Fargo Police Department Explorer Post. I further understand that a records and background investigation will be conducted by the West Fargo Police Department. I assure that the above information is true and accurate to the best of my knowledge. Misrepresentation or omission of facts or information may be grounds for rejection of the application and denial of membership or dismissal if already a member.

APPLICANT NAME (PRINTED): _____

SIGNATURE: _____

DATE: _____

*If under 18 years of age, parent/guardian's signature is required.

PARENT/GUARDIAN NAME (PRINTED): _____

PARENT/GUARDIAN SIGNATURE: _____

DATE: _____

Please return application in person or by mail to:

WEST FARGO POLICE DEPARTMENT
EXPLORER POST #281
800 4TH AVE E. SUITE 2
WEST FARGO, ND 58078

OFFICAL USE ONLY

