



City of Tracy
1000 Civic Center Drive
Tracy, CA 95376

POLICE DEPARTMENT

MAIN 209.831.4550
FAX 209.831.4017
www.ci.tracy.ca.us



TRACY POLICE EXPLORER PROGRAM

Law enforcement exploring is a “special interest” program chartered by the Boy Scouts of America under the “Learning for Life” division open to both young men and women of good character. The program is designed to give the student a working knowledge of police functions within the community, as well as being of service to the police department.

QUALIFICATIONS

- Age:** Must be at least 14 years of age (graduated from middle school or junior high school) and under the age of 18.
- Physical Requirements:** Must be in good health. (The City of Tracy does not discriminate against anyone based on race, religion, color, sex, national origin, ancestry, sexual orientation, marital status, political affiliation, or disability).
- Residency:** Must live within the city limits of Tracy, the area serviced by the Tracy Unified School District, or be a child/dependant of a City of Tracy Police Department employee.
- Academic Standing:** Must maintain a “C” average in all school work (2.0 GPA or better with no “F’s”).

REQUIREMENTS FOR AN EXPLORER

- Volunteer a minimum of 16 hours per calendar month.
- Must conform with Tracy Police Department and Police Explorer rules and regulations.
- Attend one mandatory Explorer meeting per month.
- Be available for special events as needed.

EXPLORER DUTES

- Office work as needed.
- Traffic control at City events such as parades, DUI checkpoints, Bean Festival and other City events.
- Work in specialized areas such as Records and Communications upon completion of appropriate training.
- Ride along with patrol officers.

SALARY

The Tracy Police Department Explorer Program is strictly voluntary and participants are not subject to financial compensation.



TRACY POLICE DEPARTMENT EXPLORER PROGRAM APPLICATION

This application is to be typewritten, printed or written legibly in ink only. When completed return this form to the Tracy Police Department. Statements in this application are subject to verification. Any intentional false information shall result in immediate termination or dismissal from the program.

NAME: _____ **PHONE:** _____

ADDRESS: _____

HEIGHT: _____ **WEIGHT:** _____ **HAIR:** _____ **EYES:** _____

GENDER: _____ **DATE OF BIRTH:** _____ **CURRENT AGE:** _____

SOCIAL SECURITY NUMBER: _____

SCHOOL: _____ **GRADE:** _____ **GPA:** _____

NAME OF PARENT(S)/GUARDIAN(S): _____

ADDRESS: _____

DO YOU HAVE A VALID CALIFORNIA DRIVER LICENSE? _____

CDL# _____

LIST ALL TRAFFIC VIOLATIONS YOU HAVE RECEIVED: _____

IF YOU HAVE BEEN DETAINED BY THE POLICE FOR ANY REASON? _____

IF YES, GIVE DATE TIME AND REASON: _____

LIST ANY SPECIAL SKILL OR HOBBIES THAT MAY BENEFIT YOU IN THE EXPLORER PROGRAM: _____

LIST ALL CLUBS AND ORGANIZATIONS YOU ARE PRESENTLY A MEMBER OF: _____



LIST ALL EMPLOYERS, INCLUDING DATES, COMPANY NAMES AND SUPERVISORS. (If more than two employers please use the back of this page.)

NAME: _____ **PHONE:** _____

ADDRESS: _____

SUPERVISOR: _____

DATES EMPLOYED: FROM _____ **TO** _____

NAME: _____ **PHONE:** _____

ADDRESS: _____

SUPERVISOR: _____

DATES EMPLOYED: FROM _____ **TO** _____

LIST THREE REFERENCES (Other than relatives)

1. NAME: _____ **PHONE:** _____

ADDRESS: _____

2. NAME: _____ **PHONE:** _____

ADDRESS: _____

3. NAME: _____ **PHONE:** _____

ADDRESS: _____

(ALL APPLICANTS MUST SUBMIT WITH THEIR APPLICATIONS (2) TWO REFERENCE LETTERS WRITTEN BY TWO ADULTS WHO CAN ATTEST TO THE APPLICANT'S GOOD CHARACTER.)



QUESTIONS:

1. **WHY DO YOU WANT TO BECOME AN EXPLORER?**

2. **WHAT DO YOU KNOW ABOUT THE EXPLORER PROGRAM?**

3. **WHERE DO YOU SEE YOURSELF IN THE NEXT TEN YEARS?**

4. **DO YOU KNOW ANYONE IN LAW ENFORCEMENT? _____**
IF YES, HOW HAVE THEY INFLUENCED YOU? _____

5. **HAVE YOU EVER USED DRUGS (CIRCLE ONE)? YES NO**
IF "YES", WHAT AND WHEN: _____

6. **HAVE YOU EVER BEEN SUSPENDED FROM SCHOOL (CIRCLE ONE)? YES NO**
IF "YES", WHEN AND WHY: _____

ESSAY:

APPLICANTS NEED TO COMPLETE AND ATTACH A ONE PAGE WRITTEN OR TYPED ESSAY ON WHY THEY ARE INTERESTED IN LAW ENFORCEMENT.

The above information is true and accurate to the best of my knowledge. I understand this is only an application for entrance into the Tracy Police Department Explorer Program and not a letter of appointment. I hereby apply for the position of Tracy Police Explorer. I further consent and authorize the Police Department to conduct a background check, including but not limited to, a juvenile and criminal history records check. If applicant is under 18 years of age a parent's signature is required below.

SIGNATURE _____ DATE _____

PARENT'S SIGNATURE _____ DATE _____

