

Deputy Explorer Interest Form

Station of Choice:

Name:	Last	First
Middle		

Address:	Number	Street	Apt.#	City
State	Zip Code			

Home Phone:	Cell Phone/Pager/Other:
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Please answer each of the following questions	Yes	No
Are you between the ages of 14-20? -If yes, Age: _____ Date of Birth: _____		
Have you completed the eighth grade?		
Do you currently attend school? -If yes, school name: _____		
Do you have a grade point average of 2.0 or higher?		
Have you ever been arrested for committing a crime? -If yes, Explain: _____		
Have you ever been engaged in any regular, routine, or habitual use of any illegal drug, illegal narcotic, or illegal substance?		
Do you understand that the position of Deputy Explorer is a volunteer position?		
Do you understand that you must attend an Explorer Academy held every Saturday for 18-20 weeks?		

Explain why you are interested in becoming a Deputy Explorer:

Signature: _____	Date: _____
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-----For Department use-----

Does the above individual meet the Department requirements for the position of Deputy Explorer:			
Yes		Oral Interview Scheduled on: _____	Time: _____
No		Reason: Contacted: _____	Date _____