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# Crookston Police Department

321 West Robert • Crookston, MN 56716 • (218) 281-3111 • (218) 281-1410 (fax)

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Dear Applicant:

Thank you for your interest in becoming an officer with the Crookston Police Reserve.

The Reserve was founded in 1964 as part of the Civil Defense and is now an extension of the Crookston Police Department. The Reserve assists the Police Department in different areas of law enforcement. We also assist the community for public dances, sporting events, parades, bike patrol, foot patrol, flood control, and emergency management. Most of your time will be volunteer, but you will be compensated for certain events. Uniforms and equipment will be issued at the time of your appointment.

To be a Police Reserve officer, there are minimum requirements that have to be met over a one year probation. They are as follows:

1. Must be 21 years of age.
2. Must reside in the Crookston Public School District (ISD 593).
3. Must have a valid Minnesota drivers license.
4. No criminal history as an adult, i.e. not having been convicted of a gross misdemeanor or felony.
5. Must complete 8 hours of training with the Police Reserve Liaison or other full-time training officer in a 3 month period.
6. Must complete 24 hours of ride time annually over and above the initial 8 hours of training (the average Reserve Officer puts in approximately 200 hours annually).
7. Must attend monthly meetings for training on the first Monday of each month.
8. Must expect to work Ox Cart Days.
9. Must be knowledgeable in basic CPR and first aid.
10. Must have knowledge of the "10" codes for radio transmission.

Above all, you will be representing the Crookston Police Department and will be expected to conduct yourself as such both on and off duty. Activities unbecoming of an officer will not be tolerated. Confidentiality is of the utmost importance. Any breach of confidentiality will be investigated and, if proven, will be grounds for dismissal.

If you are able to meet the above requirements, the Crookston Police Reserve will welcome your application. We are sure that you will find it rewarding and challenging.

# Crookston Police Reserve

## Officer Application

321 West Robert St. Crookston, MN 56716  
 (218) 281-3111 (218) 281-1410 (fax)

*Important: Various Federal and State laws prohibit discrimination because of age, race, color, religious creed, national origin, ancestry, sex, physical handicap, or military status.*

(Please Type or Print)

Date of Application				
Last Name		First Name	Middle Name	
Address	Street	City	State	Zip
Home Phone	Work phone	Cell phone		
Social Security Number		Date of Birth (necessary to complete background check)		
Do you have a valid MN driver's license?	Yes	No	License Number and class:	

Have you previously made an application with the Crookston Police Reserve? \_\_\_\_\_

The Crookston Police Reserve is a volunteer organization made up of civic-minded citizens who volunteer their time to the city of Crookston and its Police Department. Members are encouraged to volunteer as many hours per month as they can. Most reserve members put in an average of 100 hours per year.

How many hours a month would you be able to volunteer? \_\_\_\_\_

What prompts you to make application to the Police Reserve? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any relatives or acquaintances on the Police Reserve, If so, please give name and relationship.

\_\_\_\_\_

\_\_\_\_\_

**Education:**

	High School				Undergraduate Collage/University				Graduate/Professional			
School name and location												
Years completed	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/ Degree												
Describe any specialized training, skills.												

**Emergency Medical Certification:**

Certification Type	Yes	No	Date of Certification
CPR			
First Responder			
EMT			
Other			

**Languages:**

Police reserve activities require that all members have the ability to read and write reports in English. Applicants should be able to produce accurate reports of their activities and observations.

The ability to converse in a foreign language is a valued asset to the Police Reserve.

Indicate any foreign languages you can speak, read and/or write.

	Fluent	Good	Fair
Speak			
Read			
Write			

**Physical Ability:**

Are you physically capable of fulfilling the duties of a Police Reserve Officer?	Yes	No
Do you have any existing conditions that may limit your activities as a member of the Police Reserve? If yes, explain:		

**Employment Experience:**

Employer	Type of work performed
Address	
Telephone	
Position	
Employer	Type of work performed
Address	
Telephone	
Position	
Employer	Type of work performed
Address	
Telephone	
Position	

Do you have any job-related training in the United States Military?	Yes	No
If Yes describe.		

List professional, trade, business or civic activities and offices held.

References: List four not related to you.

Name	Address	Phone	Years Associated?

### Criminal History:

All reserve members must submit to a criminal history background check.  
By signing this application you authorize the Crookston Police department to complete these checks.

Have you ever been convicted of a crime, which would be considered a misdemeanor or felony? (not including misdemeanor traffic offences) . If yes please explain:

### Applicant's Statement

I hereby Certify that the information contained in this application is correct and I have not omitted any information. I understand that falsification or omission of information may result in immediate termination.

I authorize the schools, references and employers I have listed to provide my record and all information they have concerning me and I release all parties from any and all liability or claims for damage whatsoever that may result therefrom.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

*WE Are an Equal Opportunity Volunteer Organization*

AUTHORIZATION TO RELEASE INFORMATION

As an applicant for the CROOKSTON POLICE DEPARTMENT, I am requested to furnish information which the City of Crookston may use in determining my moral, physical, and mental qualifications. In this connection, I hereby expressly authorize release of any and all information which you may have concerning me, including my personal history and records, physical and medical history and records, personnel and employment history and records, background investigation reports and records, and all other information of every kind of a confidential or privileged nature.

This authorization specifically includes records prepared prior to the date of this authorization and records prepared after the date of this authorization.

I hereby release the City of Crookston, the Crookston Police Department, and any organization, company or person, furnishing information to that agency as expressly authorized above, from any liability for damage which may result from furnishing the information requested.

I understand that I may revoke this authorization in writing at any time, but that such revocation may adversely affect consideration of my application for employment.

A photocopy of this authorization will be treated in the same manner as an original.

Conversations by the bearer of this authorization with representatives of agencies and individuals to which the authorization has been presented are authorized by this release form.

APPLICANT'S SIGNATURE: \_\_\_\_\_

APPLICANT'S FULL PRINTED NAME: \_\_\_\_\_

APPLICANT'S ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

APPLICANT'S SOC SEC NO: \_\_\_\_\_ DOB: \_\_\_\_\_

DATED: \_\_\_\_\_, 20\_\_\_\_.