

Oro Valley Police Department Explorer Post 2011
Applicant Form

Name: _____ DOB: _____

Address: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____

School You Attend: _____ Grade: _____

Mothers Name: _____

Mother's Address _____

Phone: _____ E-mail: _____

Father's Name: _____

Father's Address: _____

Phone: _____ E-mail: _____

Other Emergency Contact: _____ Phone: _____

- Learning For Life Application Completed
- Learning For Life Medical Form Completed
- Code Of Conduct Signed
- Media Release Signed

Code of Conduct

1. As a member of Post 2011, I agree to be free of the use or possession of illegal drugs, alcohol, and tobacco and understand that if I violate this promise I may be dismissed from the program.
2. As a member of Post 2011, I agree to contribute my part to model good citizenship.
3. As a member of Post 2011, I will strive to attain grades at a level that represents my best ability in my school coursework. I will abide by my school code of conduct policies. I understand I may need to be excused from Post events and activities to focus on my course work at the request of advisors or parent/guardians. I also understand that misconduct as a student and violation of my school code of conduct may result in Post discipline to include exclusion from activities, loss of Post rank or suspension from the program.
4. As a member of Post 2011, I will not be involved in criminal activity.
5. As a member of Post 2011, I will be responsible for issued equipment and for the replacement of damaged or lost equipment at my own expense. I will present myself in a professional manner. I will only wear my issued uniform and equipment at Post events or with the approval of a post advisor. I will not present myself as a police officer to the public or imply that I am a state certified police officer.
6. As a member of Post 2011, I understand that I am a representative of my family, the Oro Valley Police Department and an ambassador for the Town of Oro Valley. I will conduct myself at all times in a professional matter to maintain the trust of those I represent and the community.
7. As a member of Post 2011, I understand that dishonesty may result in dismissal from this program.
8. As a member of Post 2011, I will use texting and social media appropriately.

By signing below I affirm or acknowledge that any violation of this code of conduct may result in demotion or removal from the post.

Applicant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

I affirm I have not been expelled or suspended from an educational institution and my parents/guardian also affirm.

Applicant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Media Release

As a member of Post 2011, I give my consent to the release of my name or image for the purpose of promoting the Explorer program to the general public. This is usually done with posted photos and recognition on Town of Oro Valley and OVPD social media or websites as well as local news reporting agencies.

Applicant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

