Antioch Police Activities League

300 L Street
Antioch, CA 94509
(925)779-6875

VOLUNTEER APPLICATION

PLEASE PRINT

_____ Date: _____
Last Name First Name Middle Name
Other Names (Maiden, aka, etc)_____ Sex: ☐ M ☐ F
Social Security #_____ DL# _____ State CA _____
Physical Data: Race:_____ Height:_____ Weight:_____ Hair:_____ Eye:_____
Date of Birth _____ Place of Birth_____ U.S. Citizen ☐ Y ☐ N
Home Address_____ CA _____ Phone# _____
address street city state zip
Previous Address_____ CA _____

List all for the past 5 years. Use another sheet if necessary. May we contact for reference ☐ Y ☐ N

Present Employer _____ Name of Supervisor_____
_____ CA _____

Past Employer _____ Name of Supervisor_____
_____ CA _____

Dates of Employment _____ Describe Position _____

May we contact for reference? ☐ Y ☐ N Phone# _____

Have you been convicted of a felony? ☐ Y ☐ N

Who shall we notify in case of an emergency? _____
Relationship_____
References (List three references not related)

_____
Name Address Phone

_____
Name Address Phone

_____
Name Address Phone

I verify the aforementioned information is correct.

Signature _____