# EAST LOS ANGELES COLLEGE SHERIFF'S STATION CADET EMPLOYMENT INTEREST FORM

## East Los Angeles College Sheriff Station 1301 Avenida Cesar Chavez, Monterey Park, CA 91754 (323) 265-8800

Date:			
NAME:			
(LAST)	(FIRST)	(MIDDLE)	
RESIDENTIAL ADDRESS:			
HOME PHONE:		CELL:	
EMAIL:		_	
CALIFORNIA DRIVER LICENSE:			
	(Required for en	nployment)	
DATE OF BIRTH:			_
SOCIAL SECURITY NUMBER:			
	(Required for en	nployment)	

### **HOURS OF AVAILABILITY**<sup>1</sup>

SHIFT	MON	TUE	WED	THR	FRI	SAT	SUN
DAYS (0600-1400)							
PMS (1400-2200)							
EMS (2200-0600)							

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<sup>&</sup>lt;sup>1</sup>Shifts will vary every semester

# **EAST L.A. COLLEGE SHERIFF STATION**

#### **CADET PRE-SCREEN BACKGROUND CHECK LIST**

Note: Answering "Yes" to any of the questions below will not automatically disqualify you from acquiring a Police Cadet position within the Los Angeles Community College District.

1.	Have you ever had any moving citations/violations?	
	If so, please explain	
2.	Have you ever dialed 911?	
	If so, please explain	
3.	Have you ever been fired or discharged?	
	If so, please explain	
4.	Have you ever been expelled or suspended from school?	
	If so, please explain	
5.	Have you ever been detained, arrested, or named as a suspect in a police report either	r as ar
	adult or juvenile?	
	If so, please explain.	
6.		
	If so, please explain	
7.		your
	ever received a warning notice from the state?	
	If so, please explain	
8.	Have you ever been involved in any traffic accidents?	
	If so, please explain	
9.	List members or law enforcement agencies you are acquainted with and your relations	ship
	(relative, friend, neighbor, casual acquaintance). How many years?	
	. Have you ever been involved in a fight?	
	it so njease explain	

\*Any false statements or omissions made on this form may cause your name to be removed from the eligibility list or may be recommended for immediate dismissal if an appointment is made.

### **PREVIOUS EMPLOYMENT**

Please list all jobs held for the past 5 years beginning with your most current employment.

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EMPLOYER/COMPANY NAME:	PHONE:
ADDRESS:	
FROM/TO: (MONTH/YEAR) JOB TITLE:	
DUTIES:	
REASON FOR LEAVING:	
EMPLOYER/COMPANY NAME:	PHONE:
ADDRESS:	
FROM/TO: (MONTH/YEAR) JOB TITLE:	
DUTIES:	
REASON FOR LEAVING:	
EMPLOYER/COMPANY NAME:	PHONE:
ADDRESS:	
FROM/TO: (MONTH/YEAR) JOB TITLE:	
DUTIES:	
REASON FOR LEAVING:	
EMPLOYER/COMPANY NAME:	PHONE:
ADDRESS:	
FROM/TO: (MONTH/YEAR) JOB TITLE:	
DUTIES:	
DEACON FOR LEAVING.	
REASON FOR LEAVING:	<del>-</del>
ENADLOVED/COMPANY NAME:	DHONE
EMPLOYER/COMPANY NAME:	PHONE:
ADDRESS:	
FROM/TO: (MONTH/YEAR) JOB TITLE:	
DUTIES:	
REASON FOR LEAVING:	