Internship Application

Reno Police Department

Legal Name:	Date of Birth:			
Preferred Name:				
Address:	Social Security #: E-mail:			
Home Phone:				
Preferred method of contact: Email 🛛 Ho	me phone 🛛 Cell 🔲 Mail 🔲			
\rightarrow What areas of RPD and/or criminal justice inte	erest you?			
→Which semester and year are you looking to in Year	ntern? SPRING SUMMER FALL			
\rightarrow Are you currently enrolled in school? No	Yes 🗆			
If yes, where:	Course(s) of study:			
→How did you hear about this internship program	m?			

 \rightarrow If you are interning to fulfill a class requirement, please list the class, the number of hours required, and the goal of your service:

Please list recent employers and/or volunteer experience in the last 5 years:

Position/Duties	Dates	Contact Information
	Position/Duties	Position/Duties Dates Image: Description of the second s

Education

School Name	Course of Study	Year	Diploma/Degree/Certificate

\rightarrow Have you ever been terminated or disciplined at a job or internship?	No 🗌	Yes 🗌
If Yes, Please explain:		

→Please describe any training and/or experiences (personal or professional) that would make you well suited to intern at RPD:

→ Have you ever been arrested or convicted of a criminal offense other than a minor traffic violation?

No 🗆	Yes 🛛	If yes, please describe:
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 \rightarrow Have you ever had contact with the police outside of a traffic stop (to include domestic disturbances, theft, fighting, etc.)?

No Yes I If yes, please describe:

→Have you ever used recreational drugs?

No \Box Yes \Box If yes, please describe which drug(s) and last date of use:

 \rightarrow Do you speak a language other than English? No

Please list one professional and one personal reference.

Name:	Address:	Phone:
Name:	Address:	Phone:

Please indicate when you are available to work.

	Mon.	Tues.	Wed,	Thurs.	Fri.	Sat.	Sun.
Morning							
Afternoon							
Evening							

Do you have a valid driver's license and access to a working vehicle?

	res	INO	
DL#:			

Yes

State:

Exp:_____

EMERGENCY CONTACT

Name:	Relationship to you:	Home Phone:
Address:		Work Phone:

I hereby certify that all statements made in this application are true, and I understand that any false statement of material facts herein may cause forfeiture on my part of all rights to intern or volunteer with Reno Police Department. My signature also indicates my understanding that my application will be forwarded to the Backgrounds Investigation Unit and a background check will be performed prior to my acceptance into the program. *Details other than pass/fail of the background investigation will not be disclosed.*

Signature

Date

Return: Via email- RPDInterns@reno.gov Mail- P.O. BOX 1900, Reno, NV 89505

rev. 8/20

Administrative Use Only				
Received on	Interviewed on	Attended Orientation	No 🗖	Yes 🗖
Initial Approval 🗆 R Unapproved 🗖 Reason:	eservations 🗖 Reason:			