

## **Chief's Advisory Board Application**

Applicant Information		
Name		
Street Address		
City, State, Zip		
Home Phone		
Work Phone		
Cell Phone		
E-Mail Address		
CA Driver's License No.		
Birth Date		
Current Occupation		
Name of Current Employer		
Availability		
During which hours are you a	available for meetings?	
Weekday mornings	Weekend mornings	
Weekday afternoons	Weekend afternoons	
Weekday evenings	Weekend evenings	
Why do you wish to serv	ve on the Chief's Advisory Board?	
Briefly describe your reasons for applying for a position on this Advisory Board:		

Applicant Name:	
Name	
Previous Experience	
Briefly describe experience a	and expertise you bring to this position:
Priofly describe tonics y	ou would like to be addressed by this Advisory Poards
briefly describe topics y	ou would like to be addressed by this Advisory Board:
Agreement and Signatur	
if I am accepted as a volunte	e, I affirm that the facts set forth in it are true and complete. I understand that eer, any false statements, omissions, or other misrepresentations made by esult in my immediate dismissal.
Name (printed)	
Signature	
Date	

## **Return Completed Form to:**

Lieutenant Stephanie Nichols Professional Standards Division Tustin Police Department 300 Centennial Way Tustin, CA 92780

Thank you for completing this application form and for your interest in volunteering to serve on the Chief's Advisory Board.