



**SAN BENITO SHERIFF EXPLORER
POST #441
INTEREST/ APPLICATION FORM**

NAME: (Last) _____ (First) _____ (MI) _____

DATE OF BIRTH: _____ AGE: _____

ADDRESS: _____

City: _____ State: _____ Zip: _____

County: _____

TELEPHONE # (Cell): _____ (Home): _____

EMAIL: _____

SCHOOL: _____

Address: _____

Grade Level: _____ GPA: _____

Teacher: _____

PARENTS INFORMATION:

Father: _____ **E-MAIL:** _____

Address: _____

Telephone#: _____ **E-MAIL:** _____

Mother: _____

Address: _____

Telephone#: _____

The information you have provided will be kept confidential only for the San Benito Co Sheriff's Office and will be verified to be true and correct. Any false representation will result to automatic disqualification.

Office Use Only

Date Rec'd:	Date Called:	By:
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