SKAGIT VALLEY COLLEGE

2405 EAST COLLEGE WAY MOUNT VERNON, WA 98273

# Parks Law Enforcement Academy

## CRIMINAL OFFENSE CHECKLIST

|  |  |
| --- | --- |
| Complete Name: |       |
| Social Security No.: |       | Date of Birth: |       |

The following questions must be answered **HONESTLY and to** **the best of your knowledge**. **DO NOT BE** **DECEPTIVE IN YOUR RESPONSES**. **If a “YES” answer is given, please document the details fully on page two of this Checklist.** Include in your documentation the date and full title of the offense(s), charge(s) filed, city and state of offense(s), name(s) of law enforcement agency involved, and the final disposition of the charges filed or case against you. ***Your signature is required at the bottom of page two, and MUST BE NOTARIZED. Mail the completed, signed checklist to the attention of Rick Mossman at the above address.***

Please note that any affirmative answers provided **do not necessarily,** in and of themselves, preclude you from admission to the Parks Law Enforcement Academy. However, attempts to deceive that are later revealed or detected, will be cause for expulsion at any stage of the Academy where deception is learned.

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| --- |
| Have you ***ever*** been: |
| 1. Arrested?
 |  |  |
| 1. Charged with any offense by a law enforcement agency?
 |  |  |
| 1. Charged with any offense (include any plea of “no contest”, “Alford plea”, or “nolo contendere”)?
 |  |  |
| 1. Charged with any motor vehicle moving violations (i.e., DUI/DWI, reckless driving, hit and run, speeding, etc.)?
 |  |  |
| 1. Charged with or convicted of Domestic Violence?
 |  |  |
| 1. Subjected to forfeiture of collateral in connection with an arrest or conviction?
 |  |  |
| 1. Do you currently have any credit problems, or a poor credit history?
 |  |  |
| 1. Incarcerated in jail, or imprisoned?
 |  |  |
| 1. Placed on probation?
 |  |  |
| 1. Charged with any weapons violations?
 |  |  |
| 1. Involved with the use, manufacture, sales or possession or gifting/giving of any illicit or unlawful drugs **other than marijuana**?
 |  |  |
| 1. In possession of, or used, Marijuana?
	1. Number of times used \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. Date of last usage \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	3. Did you ever sell any quantity of marijuana to anyone? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |  |  |
| 1. As a juvenile, required to appear before a Juvenile Court for committing unlawful acts?
 |  |  |
| 1. Charged or accused of any sexual misconduct?
 |  |  |
| 1. Involved in any sexual harassment situations?
 |  |  |
| 1. The subject of a restricted, suspended, or revoked driver’s license?
 |  |  |
| 1. Served, or the subject of, any type of a protection/restraining order?
 |  |  |
| **Have you recently--(within the past six months)--been:** |
| 1. Charged with any offense, by any law enforcement authority?
 |  |  |
| 1. Released on bail or on personal recognizance for any offense?
 |  |  |
| 1. Placed on any other type of “conditional” release program?
 |  |  |
| 1. Denied automobile insurance?
 |  |  |
| 1. Charged with State financial responsibility violations?
 |  |  |

**Answers to these questions are *strictly confidential*, to be used solely for the selection process into the Parks Law Enforcement Academy, and not for general admission to Skagit Valley College.**

**Use the space below to *specifically* explain *any* “yes” responses from Page 1 and the top of Page 2 *in detail.*** The back of this page, and additional pages, may be used if necessary. Attach copies of any supporting documentation that you might feel is necessary for a complete explanation. Include dates (month and year if possible); exact charge **(to simply say “speeding” does not suffice; give known or approximate charged speed within a posted \_\_\_ zone**. For any drug usage, the known or estimated number of times each substance was used, and the date of last usage of each substance.

**Signature is required. I certify and attest that all information provided in this document is true and accurate, and recognize that any false, untruthful or incorrect statements made herein will be grounds for my dismissal from the program. All attachments must be notarized.**

|  |
| --- |
| **In witness thereof, I, the undersigned participant, have set my hand and seal this**  |
|       | **day of** | **,** | **20** |       |
|  |
|       |  |  |
| Applicant Name (Print or Type)  | Applicant Signature |

#### NOTARY BLOCK

|  |  |
| --- | --- |
| In the County of |  |
| State of |  |
| On this date |  |

The above-named Applicant then personally appeared and acknowledged the foregoing instrument to be his free act and deed, before me.

|  |  |
| --- | --- |
| Notary Public |  |
| My Commission Expires |  |