## **Application To Participate in the FBI Police Executive Fellowship Program**

**Privacy Act** -Title 5, U.S. Code, Sections 3373 and 3374 authorizes collection of this information. The data will be used primarily to document and record your temporary assignment to the FBI. Solicitation of your Social Security Number (SSN) is authorized by Executive Order 9397, which permitted use of the SSN as an identifier of individual records maintained by Federal Agencies. Refusal on your part to furnish all of the information requested will result in no further consideration being given to your application. You should be aware that willfully making a false statement or concealing a material fact on this application can be basis for rejection as a candidate for the Police Executive Fellowship Program.

| <b>Notice:</b> If space provided is not sufficient for complete answers, or you wish o furnish additional information, you may attach a sheet to this application and number answers to correspond with questions. |   |  | Date         |                     |      |
|--|---|--|--------------|---------------------|------|
| ame of law enforcement agency wh   | nere candidate is employed  |  |              |                     |      |
| City   |   |  | S            | State               |      |
|  | I.  | Personal Data  |              |                     |      |
| . Full Name  |   |  |              |                     |      |
| Last name  | First name  | Middle name  | S            | Social Security Num | nber |
|  |   |  |              |                     |      |
|  |   | □ N  | vo           |                     |      |
| . Have you ever legally changed you If answer is "Yes," design   |   | □ N<br>Place   |              | Co                  | ourt |
| . Have you ever legally changed you If answer is "Yes," design . Residence address (street, city, st   | Dateate) Te   |  | mail address | ses:                |      |
| If answer is "Yes," design   | Date  Telescope Telescope Reference Telescope | Place elephone Numbers / E-r.                          | mail address | ses:                |      |
| If answer is "Yes," design   | Date  Date  To Ro   | Place elephone Numbers / E-residence                   | mail address | ses:                |      |
| If answer is "Yes," design   | Date  Date  To Ro   | Place Elephone Numbers / E-residence                   | mail address | ses:                |      |
| If answer is "Yes," design   | Date  Date  To Ro   | Place  elephone Numbers / E-residence  fobile  usiness | mail address | ses:                |      |
| If answer is "Yes," design  Residence address (street, city, st  | Date  Date  To Ro   | Place  elephone Numbers / E-residence  fobile  usiness | mail address | ses:                |      |

Married (Name of Spouse)

|                               |                | II. Education   |                              |  |
|-------------------------------|----------------|---|------------------------------|--|
| Name and location of schools  |                | Diploma or Degree received                                      | Date                         |  |
| a. High school                |                |   |                              |  |
| b. College                    |                |   |                              |  |
|                               |                |   |                              |  |
|                               |                |   |                              |  |
|                               |                |   | •                            |  |
|                               |                | III. Training   |                              |  |
| a. Li                         | ist significar | at civilian, law enforcement, and military training             | ining that you have received |  |
| Name and location of training |                | Certificate received  | Date                         |  |
|                               |                |   |                              |  |
|                               |                |   |                              |  |
|                               |                |   |                              |  |
|                               |                |   |                              |  |
|                               |                |   |                              |  |
|                               |                |   |                              |  |
|                               |                | IV. Experience  |                              |  |
|                               | a. List        | significant civilian, law enforcement, and m                    | nilitary experience          |  |
| Agency                        |                | Position and responsibilities                                   | Date                         |  |
|                               |                |   |                              |  |
|                               |                |   |                              |  |
|                               |                |   |                              |  |
|                               |                |   |                              |  |
|                               |                |   |                              |  |
|                               |                |   |                              |  |
|                               | a. (           | V. Special Skills Check the appropriate box(s) that reflect you | ır special skills            |  |
| ☐ Information Technology      |                | ☐Policy and Planning  | ☐ Task Force Investigations  |  |
| ☐Database Creation and Adm    | inistration    | ☐Budgeting and Finance  | ☐Training and Education      |  |
| ☐Computer System Administ     | ration         | □ Violent Crime Investigations                                  | ☐Crime Prevention            |  |
| □Public Speaking              |                | ☐ White Collar Crime Investigations                             | $\Box$ Other                 |  |

By furnishing your signature below, you are providing your consent for the disclosure and/or release of this information by the FBI.

| Signature of Applicant   | Date  |
|--|---|
| All Appl Attach one unmounted full-fact larger than 2 3/4 x 2 1/2 inches. Pri was taken plainly on the back of the been taken not more than 3 months p. No consideration will be afforded a furnished. | te photograph of yourself, not<br>nt your name and the date the pho<br>photograph. The photograph mu<br>prior to the date of this application |