

**Volunteer & Instructor Application** 

## **LEOCode4™**

- Future First Responders of America™
  Code 4 Academy™
  Code 4 Response™
  Sheriff McLaw & Sgt. Chewz Right™

		Appl	icant Ir	nforma	ation			
Full Name:							Date:	
	Last	First				M.I.		
Address:								
	Street Address						Apartment/Ui	nit #
	City					State	ZIP Code	
Phone:			E	Email				
Date Availal	ble:	Social Security	No.:			Desired	d Salary: <u>\$</u>	
Position App	olied for:							
Are you a citizen of the United States?  YES NO				YES NO If no, are you authorized to work in the U.S.?				
Have you ever worked for this company?  YES NO				If yes, v	when?_			
YES NO Have you ever been convicted of a felony?								
If yes, expla	in:							
			Educa					
High School	l:	A	ddress:					
From:	To:	Did you gra	aduate?	YES	NO	Diploma:		
College:		A	ddress:					
From:	To:	Did you gra	aduate?	YES	NO	Degree:		
Other:		A	ddress:					
From:	To:	Did you gra	aduate?	YES	NO	Degree:		
			Refere	ences				
Please list t	three professional refe	erences not relate	ed to yo	u.				
Full Name:							nship:	
Company:						Pr	hone:	
Address:								
Full Name:						Relation	nship:	

Company:				Phone:	
Address: Full Name: Company:					
Address:					
0	Previous E	imployme	ent	Dhana	
Company: Address:					
Job Title:					
Responsibil	ities:				
From:	To:				
May we cor	tact your previous supervisor for a reference?	YES	NO		
C				Dhana	
Company: Address:					
Job Title:					
Responsibil	ities:				
From:	To:				
May we cor	tact your previous supervisor for a reference?	YES	NO		
Company:				Phone:	
Address:					
Job Title:					
Responsibil	ities:				
From:	To:	Reason f	or Leaving:_		
May we cor	tact your previous supervisor for a reference?	YES	NO		
	Military	Service			
Branch:			From:		To:

Rank at Discharge:	Type of Discharge:
If other than honorable, explain:	
Experience a	and Certifications
Please list any and all experience as well as certifications	s you may have:
Disclaime	r and Signature
I certify that my answers are true and complete to the	best of my knowledge. I understand that I must successfully join the organization. I also understand and agree that at
liability or loss in respect of their volunteering and will I	le4 and its subsidiaries) harmless from any action, claims, not bring any claim against the principal in any and all on in my application or interview may result in my release.
Print Name:	
Signature:	Date:
Fill out the application	LEOCode4

- Do not leave any section un-filled
- Place N/A if it does not pertain
- Mail or Emil to address provided →
- If you have any questions please email
- Once the application is received you will be notified

Please allow at least 10-15 days for a response

Corporate Executive Offices PO Box 415 Snowflake, AZ 85937

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www.LEOCode4.org | www.FFROA.org