



# Greece Police Department

## Town of Greece, New York

6 VINCE TOFANY BOULEVARD, GREECE, NEW YORK 14612 – TELEPHONE (585) 865-9200

### Intern Application

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Social Security #: \_\_\_\_\_ Telephone #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Professor/Teacher Overseeing Internship: \_\_\_\_\_

Contact #: \_\_\_\_\_ Number of hours required for internship: \_\_\_\_\_

Have you ever been arrested or charged with a crime: Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Do you have a valid driver's license: Yes  No  Driver's License #: \_\_\_\_\_

Are you now or have you ever been the subject of a criminal investigation? Yes  No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

*I authorize members of the Greece Police Department to investigate my background and authorize the release of any information, records, or documents related to that investigation whether the said records are public, private or confidential in nature.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Completed form must be signed and returned to the Greece Police Department Community Services Unit by the following:

1. Scan completed and signed form and email to [gpdcommunityservices@greecenyny.gov](mailto:gpdcommunityservices@greecenyny.gov)
2. Print completed and signed form and mail to Greece Police Department, Attn: CSU, 6 Vince Tofany Boulevard, Rochester NY 14612
3. Drop off completed and signed form to the Greece Police Department Headquarters (Mon-Fri 9:00am-5:00pm), 6 Vince Tofany Boulevard, Rochester NY 14612

**Protect**

**Lead**

**Empower**

*The Town of Greece is an Equal Opportunity Employer*