

***DAKOTA COUNTY SHERRIFF'S  
LAW ENFORCEMENT EXPLORER  
POST 9523***



**Application**

**Name:** \_\_\_\_\_

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

\_\_\_\_\_ Applicant

\_\_\_\_\_ Renewal



List the full name and birthdates of siblings and other persons that live at your home:

Name	DOB	Relationship
Name	DOB	Relationship
Name	DOB	Relationship
Name	DOB	Relationship
Name	DOB	Relationship

**Drivers License Information:** (Instructors permit also applies here)

State: \_\_\_\_\_ Number: \_\_\_\_\_

**List tickets that you received within the last 3 years:**

City	Charge	Disposition

**List all accidents within the last 3 years:**

City	Date

Have you ever been charged **OR** convicted of ANY crime?      YES      NO  
*If yes give detail to the above question. Use additional paper if needed.*

List any police contacts that you have had in the past 3 years:

**Work Experience:**

Name	Date of employment	Supervisor	Phone Number
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**Sports/Extra Curricular Activities:**

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**Personal References:**

Please list people you have known for at least 3 years

Peers

Name	Years Known	Phone
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Adults

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**Release:**

The information provided in this application is true to the best of my knowledge. I authorize a representative of the Dakota County Sheriff's Office to contact any of the people I have listed to verify my application to the Dakota County Sheriff's Office Explorer Post. This release is valid for one year from the dated signature.

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Write name

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Parents name

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Applicants Signature

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Parents Signature  
(If under the age of 18)

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Date

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Date

**RETURN APPLICATION BY MAIL OR EMAIL**

**Mail**

Sergeant Matt Regis  
Dakota County Sheriff's Office  
1580 Hwy 55 East  
Hastings, MN 55033

**Email**

[Matthew.Regis@CO.Dakota.MN.US](mailto:Matthew.Regis@CO.Dakota.MN.US)