

**DOWNEY POLICE DEPARTMENT  
CHAPLAIN PROGRAM APPLICATION**



**Chief Scott Loughner**

**DOWNEY POLICE DEPARTMENT  
CHAPLAIN PROGRAM APPLICATION**

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

**Name**

\_\_\_\_\_  
(Last, First, Middle)

**Other Names You Have Used**

\_\_\_\_\_  
(Prior Marriages, Aliases)

**Address**

\_\_\_\_\_  
(Street, City, State, Zip Code)

**Phone**

\_\_\_\_\_  
(Home, Work, Cell)

**ID/Driver's License #**

\_\_\_\_\_  
(State and Number)

**Social Security #** \_\_\_\_\_

**Are you at least 18 years old** \_\_\_\_\_

**Are you a U.S. citizen?** \_\_\_\_\_

**E-Mail Address**

\_\_\_\_\_  
**Emergency Contact**

\_\_\_\_\_  
(Name and Relationship) (Phone Number)

**DOWNEY POLICE DEPARTMENT  
CHAPLAIN PROGRAM APPLICATION**

**Why do you want to be a Chaplain with our agency?**

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

**How did you hear about the Downey Police Department Chaplain program?**

---

---

**Have you ever been a Chaplain for a law enforcement agency? If so, where/when?**

---

---

**Please describe any experience or training you have as a religious Pastor, Counselor, or Police Chaplain:**

---

---

---

**Are you able to respond with short notice for emergency call-ins?**

**DOWNEY POLICE DEPARTMENT  
CHAPLAIN PROGRAM APPLICATION**

---

**Are you available to volunteer at least 6 hours a month to take part in ride-a-longs?** \_\_\_\_\_

**Do you have any conditions which could limit the type of activities you are able to participate in, and/or do you require any special accommodations? If so, please explain:**

---

---

---

**List any special skills, licenses, foreign languages, computer skills, etc.:**

---

---

---

---

**Clergy Information:**

Year Licensed: \_\_\_\_\_ Year Ordained: \_\_\_\_\_

Denomination: \_\_\_\_\_

Association, Conference, Presbytery: \_\_\_\_\_

Publication: \_\_\_\_\_

Year: \_\_\_\_\_ Page: \_\_\_\_\_

Current Church: \_\_\_\_\_

**Educational Background:**

High School:

**DOWNEY POLICE DEPARTMENT  
CHAPLAIN PROGRAM APPLICATION**

\_\_\_\_\_  
(Name and Location) (Date Completed)

College/Trade School:  
\_\_\_\_\_

\_\_\_\_\_  
(Name and Location) (Date Completed)

Seminary: \_\_\_\_\_

**Personal References:**

(Please include any Spouse, Former Spouse, Registered Domestic Partner,  
Former Registered Domestic Partner)

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Years Known \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Years Known \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Years Known \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Years Known \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

**Employment History**

**Current Employer**

**DOWNEY POLICE DEPARTMENT  
CHAPLAIN PROGRAM APPLICATION**

\_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Position Title: \_\_\_\_\_  
Dates Employed: \_\_\_\_\_

**Previous Employer**

\_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Position Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

**Volunteer Experience:**

Agency and Location \_\_\_\_\_

\_\_\_\_\_  
Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**Have you ever been arrested or convicted of a felony, or any criminal offense involving sexual misconduct? If yes, please list date, location, and disposition:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Have you ever been detained by the police and were not free to leave? If yes, please list date, location and disposition:**

\_\_\_\_\_  
\_\_\_\_\_

**Are you currently on parole or probation? If yes, explain:**

**DOWNEY POLICE DEPARTMENT  
CHAPLAIN PROGRAM APPLICATION**

---

---

---

**Do you have a permit to carry a concealed weapon? \_\_\_\_\_**

**Has your work performance ever been affected by your use of alcohol or drugs? If yes, please describe details:**

---

---

---

**Do you use marijuana (with or without a prescription)? \_\_\_\_\_**

**Have you used any illegal drugs within the past 5 years? \_\_\_\_\_**

**Do you have any tattoos? If yes, please describe tattoo, its meaning, and its location:**

---

---

---

**Please provide your driving history (past 7 years) including traffic citations and all traffic accidents.**

---

---

---

---

**Please attach a Letter of Recommendation from the head of the church you represent...on your organization's official letterhead.**

I have completed the above questions and to the best of my knowledge, what has been stated is true.

**DOWNEY POLICE DEPARTMENT  
CHAPLAIN PROGRAM APPLICATION**

I understand it is a normal part of the Downey Police Department procedure to perform a background check which includes fingerprinting, a review of the applicant's criminal history, a clearance for current warrants, and driving record checks on the suitability of new personnel due to the nature and sensitivity of the work. Current and previous employers, family members, neighbors as well as the personal references I listed may be contacted to determine my suitability to become a member of the Downey Police Department. In addition, any follow up investigation deemed necessary by the background investigator is authorized on my behalf. By signing below, I acknowledge and consent to such background check.

Signature \_\_\_\_\_ Date \_\_\_\_\_

If you have any questions please call Sergeant Ruth Valenzuela at 562-904-2382. Please return your completed application via mail, fax or email to:

**Downey Police Department  
Attn: Sergeant Ruth Valenzuela  
10911 Brookshire Avenue  
Downey, CA 90241  
bvalenzuela@downeyca.org**

**Fax: (562) 904-1995**

Office use only:

Notarized Waiver \_\_\_\_\_

Photo of Applicant \_\_\_\_\_