Gillette Crime Stoppers, Inc.

Board Membership Application

Please complete the application in full to be considered for a board membership position with the Crime Stoppers of Gillette. Applicants must be at least 21 years of age to be considered for membership.

By completing this application, you agree to a criminal background check to determine eligibility. Eligibility may be denied for falsifying any part of this application. All applications are reviewed by the City of Gillette Police Department and the Campbell County Sheriff's Office.

Full Legal Name:_____
(First, Middle, Last)

Known by other names:_____
(If none then leave blank)

Date of Birth:_____ SSN _____

Physical Home Address:_____

Mailing Address:_____
(If different than physical address)

Home Phone: (_____)_____Cell Phone: (_____)_____

Personal Email Address: _____

Employer:_____

Position:_____

Employer Address: _____

Work Phone: _____

How long have you resided in Campbell County, WY? _____Yrs _____Mo
(only residents of Campbell County, WY may apply)

Do you have any immediate adult family members (spouse, siblings, parents) that have a criminal history? *(if yes, please provide their names and offenses)*

_____

_____

Gillette Crime Stoppers, Inc.

Personal Criminal Background Review

Have you ever been convicted for any offense(s) - misdemeanor or felony? _____

This <u>does not</u> include traffic offenses but does include cited offenses that may not have included jailtime on conviction.

Please indicate the type(s) of offense, the year and the jurisdiction of the conviction(s):

Circle all that apply: Misdemeanor / Felony

Type of Offense(s): _____

Year(s) of Conviction: _____

County / State of Conviction: _____

Did a conviction include jail or prison time? _____

(Where, When, How Long)

Please explain the circumstances behind the conviction(s):

_____

_____

_____

_____

Personal Experiences

Have you ever served on a board for a public, private or non-profit organization? *If Yes, please provide the name of the organization and position you served in.*

_____

_____

Do you have any experience in fundraising for an organization?

_____

_____

Do you have any issues in making contacts, public or private, on behalf of an organization?

_____

_____

Gillette Crime Stoppers, Inc.

Please provide the reason(s) why you wish to be considered for membership:

_____

_____

_____

_____

References:

Please provide at least three references, former employers, co-workers, or contacts from your prior board experience.

Name: _____

Phone Number (_____)_____ Email: _____

Name: _____

Phone Number (_____)_____ Email: _____

Name: _____

Phone Number (_____)_____ Email: _____

Confidentiality Agreement

I, _____, understand that should I be accepted to a membership position with the Gillette Crime Stoppers Inc., that I may become privy to sensitive and confidential information regarding current and active criminal cases under law enforcement investigation. By signing this application and agreement, I understand that I may be prosecuted to the fullest extent of the law for any interference, disclosure of confidential information, or for aiding and abetting a criminal.

All information disclosed through the Gillette Crime Stoppers Inc program is to be considered private and confidential and shall not be disclosed to anyone outside of law enforcement or the Board of Directors for the Gillette Crime Stoppers Inc organization.

Applicant's Signature: _____

Date: _____

Gillette Crime Stoppers, Inc.

I, _____, hereby apply for membership to the Board of Directors of Gillette Crime Stoppers, Inc. In doing so, I understand that my responsibilities will include attending board meetings at the prescribed date/time; I will maintain confidentiality in materials discussed during these meetings, and I will do my share to help this organization in accomplishing its goals.

Applicant's Signature: _____

Date: _____