G.R.E.A.T. INSTRUCTOR APPLICATION REQUEST FORM

CHICAGO POLICE DEPARTMENT/SPECIAL ACTIVITIES SECTION-Unit 441





DATE:					
PERSONAL INFORMA	<u>TION</u>				
Applicant Name:		Star #	#	Employee #	Gender: M
Home Phone:	Work Nur	mber:		Fax Number:_	
Cell Number:	Email:			Number of years	on the job:
Last 4 Digits of Social Secu	rity Number:_				
EMERGENCY INFORM	<u>IATION</u>				
In case of emergency c	ontact:				
Relationship:		Phor	ne Nu	ımber:	
WORK INFORMATION					
Are you a D.A.R.E. Instru	ctor?	Yes	No	(circle one)	
Do you have a teaching cer	tificate?	Yes	No	(circle one)	
Unit of Assignment:	Curre	nt Watch:		This Year's Furlo	:
Why do you want to become	a G.R.E.A.T	. officer? ((Attac	h additional page if nee	ded)
What characteristics do you your strengths?	feel you have	e to be a C	G.R.E.	A.T. officer? In your op	inion, what are

EMAIL COMPLETED FORM TO PREVENTIVEPROGRAMS@CHICAGOPOLICE.ORG

Officer's Signature:

Commander's Signature:

CPD-51.105 (Rev. 3/22)