



## Student Employee Benefits

- Community Service Officer Pay Range: \$17-\$19 per hour; we work around your class schedule
- Students can obtain a F/S parking permit after purchasing a student permit.
- Regardless of the field of study, the CSO Program provides an opportunity to serve SDSU's diverse campus community in a manner that creates actionable real-world experience to bolster any resume.
- SDSU Police Department provides the unique opportunity to learn about the functions and actions of a police department in consideration and in partnership with the community it serves.
- Promotional Opportunities (Field Training Officer, Supervisor)
- Access to professional training: CSOs are trained in all shift work through an established phase training program led by CSO FTOs which covers all shift responsibilities. CSOs have access to voluntary law enforcement training through our CSO Academy.

### Community Services Officer

The primary duty of the CSO is to observe and report suspicious activities or incidents to the University Police Department. CSOs act as a force multiplier and extension of the University Police Department in ensuring the safety of those who study, work, and visit SDSU.

CSOs are SDSU students who are trained to use police radios and in the proper protocols in reporting criminal behavior, mitigating risk to both SDSU students as an extension of the University Police Department. CSOs serve the campus community and engage in community policing efforts, strengthening the tie between UPD and the campus community. CSOs participate in departmental trainings such as implicit bias and procedural justice training and understand the mission of providing fair and equitable services to everyone.

CSOs provide services using a variety of methods including marked vehicle, bicycles, cart, and on foot. CSOs perform traffic control, enforce parking regulations, write reports, security services, unlock campus facilities, drive shuttles, work desk shifts, support police and professional staff, and assist in building evacuations and other tasks during emergency operations.

### Qualifications

**Eligibility:** Must be a current SDSU student, carrying 6 units of coursework with a 2.0 GPA or above.  
*Extended Studies Students do not qualify.*

**Experience:** Knowledge of the campus community, campus buildings and parking areas. Customer Service experience or the ability to communicate well within a diverse organization and workplace.

**Abilities:** To maintain a pleasant, courteous, interested, helpful, and positive attitude always, particularly in stressful situations where de-escalation is required; to be adaptable to work during stressful situations, rotating shifts, late hours, and weekends. To follow prescribed policies, procedures, and orders while executing good and reasonable judgement.

**Required:** Valid California Driver's license and must be able to pass a background investigation check (Live Scan fingerprints, DMV check, detailed background investigation check)



## APPLICATION INSTRUCTIONS AND OVERVIEW

The information you provide in this Personal History Statement has been approved in accordance to the Chancellor's Office and Human Resources. The Personal History Statement will be used in the background investigation to assist in determining your suitability for the classification of Non-Sworn Law Enforcement Personnel.

- It is your responsibility to complete this form and provide all required information.
- If you are filling out a printed copy of this form, neatly print in black or blue ink.
- You must respond to all items and questions. If a question does not apply to you write N/A (not applicable) in the space provided for your response.
- If you need more space for any response, use the last page of this form and identify the additional information by the question number.
- **UPON COMPLETION, SCAN AND SEND YOUR FORM TO CSO@SDSU.EDU OR DROP THE FORM OFF IN PERSON AT PARKING AND TRANSPORTATION SERVICES LOCATED AT 6001 LINDO PASEO ROAD.**

### Background Investigation

Please read and answer all the questions in the Background Investigations Questionnaire. You are admonished to answer all the questions truthfully and completely. If you are dishonest in your answers, fail to fully answer any question, misstate or omit any material facts, you will be disqualified for further consideration for this position.

The commission of one or more of the offenses listed on this questionnaire may not automatically disqualify you from consideration for this position. Student Assistants support the University Police Department, employees must demonstrate integrity and credibility, your responses to these questions will be evaluated and considered in relationship to your entire background.

There are very few automatic bases for rejection. Even issues of prior misconduct, such as prior illegal drug use, driving under the influence, theft or even arrest or conviction are not, in and of themselves, automatically disqualifying. However, deliberate misstatements or omissions can and often will result in your application being rejected, regardless of the nature or reason of the misstatements/omissions. In fact, the number one reason individuals "fail" background investigations is because they deliberately withhold or misrepresent job relevant information from their prospective employer. You are responsible for providing complete, accurate, and truthful responses.

### Autobiography

You are required to handwrite an autobiography with your background package.

### Disclosure of Medical or Disability Related Information

In accordance with the U.S. Americans with Disabilities Act, the Genetic Information Nondiscrimination Act (GINA) and the California Fair Employment and Housing Act, applicants are not expected to reveal any medical or other disability-related information about themselves or their family members in response to questions in this form

### Required Documentation

The following documents are required, where applicable, and will be requested upon review of your application. Bring the original documents with you, they will be photocopied and returned. Photocopies will not be accepted under any circumstances.

- Social Security Card (International Students see below)
- US Driver's License
- Two professional references

**International Students** meet eligibility requirements if they meet university requirements of being fully enrolled, attending SDSU on a full-time basis, and possess either a J-1 or F-1 student visa. International students may work up to 20 hours per week during the semester when in school is in session and up to 40 hours during the summer session provided completion of the previous spring semester and will be attending SDSU the following fall semester.



## CSO Background Authorization

By signing this form, the employee has read, understands, agrees to its contents, and realizes the penalties for non-compliance to its terms. I hereby verify that all statements made in this questionnaire, and any materials, which I have submitted in the application process for this position, are true and complete. I understand that any misstatement of material facts subjects me to dismissal.

I fully recognize that under California Law, individuals must clearly demonstrate their personal, medical, and psychological fitness to serve in the position of COMMUNITY SERVICE OFFICER. I further recognize that an employing agency has both a legal and a moral obligation to take every reasonable effort to ensure that any person employed by them as a COMMUNITY SERVICE OFFICER will conform to the very highest standards. I understand that I am authorizing investigations into aspects of my personal, medical, and phycological fitness, and that such an investigation will include contacting persons and/or organizations who have information relating to my fitness, including if I am or have been a peace officer in California, information protected under 832.7 of the Penal Code and 1043 of the Evidence Code. I also understand that those persons and/or organizations may feel inhibited, intimidated, or otherwise reticent about furnishing legitimate information concerning my fitness unless the confidentiality of their information can be guaranteed on a permanent basis.

I further recognize that although some of the information contained in this report is a matter of public record, or would otherwise be accessible to me, this information will be inextricably interwoven with other confidential data to which I would otherwise not be privy. Therefore, I exonerate, release, and discharge the San Diego State University Police Department, their officers, agents or assigns, now and in the future, from any claim or damages, whether in law or in equity on behalf of myself, my heirs, agents, or assigns for their refusal to make available any information contained in the pre-employment investigation, including but not limited to the identity of any person or organization who may have supplied information in the course of this investigation as well as the substance of any such information supplied, even where such information has been the basis for my disqualification.

I hereby knowingly, voluntarily, specifically, and permanently waive my rights I may have to examine, review, or to otherwise discover contents of this investigations and all documents related thereto pursuant to Labor Code Section 1198.5 or other legislation, whether by request, appeal, grievance, or legal process. Having been hired by the San Diego State University Police Department – Community Service Officer program, I understand that I am on probation for six months beginning from the date of hire, and that my employment may be terminated at any time during that six-month period, regardless of my performance.

### CERTIFICATION OF APPLICANT

I hereby certify that I have read and understood the instructions for completing this document. I understand that I am solely responsible for the accuracy, completeness and truthfulness of the information contained on this form, and I will personally complete each item contained on this form. I understand any deliberate misstatements or omissions on this form will result in disqualification dismissal.

Name (Last/First): \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Employee Scheduling

Instructions: Check off boxes during which you are **UNAVAILABLE** to work. Do not check the boxes during time when you would prefer not to work. Any boxes not checked will be assumed to be times you are available to work. CHECK HALF AN HOUR BEFORE AND AFTER CLASS TIMES. **Applicants must turn in a current copy and future copies of course schedules upon request and in submission of this application.**

|           | SUN | MON | TUE | WED | THU | FRI | SAT |
|-----------|-----|-----|-----|-----|-----|-----|-----|
| 0700-0730 |     |     |     |     |     |     |     |
| 0730-0800 |     |     |     |     |     |     |     |
| 0800-0830 |     |     |     |     |     |     |     |
| 0830-0900 |     |     |     |     |     |     |     |
| 0900-0930 |     |     |     |     |     |     |     |
| 0930-1000 |     |     |     |     |     |     |     |
| 1000-1030 |     |     |     |     |     |     |     |
| 1030-1100 |     |     |     |     |     |     |     |
| 1100-1130 |     |     |     |     |     |     |     |
| 1130-1200 |     |     |     |     |     |     |     |
| 1200-1230 |     |     |     |     |     |     |     |
| 1230-1300 |     |     |     |     |     |     |     |
| 1300-1330 |     |     |     |     |     |     |     |
| 1330-1400 |     |     |     |     |     |     |     |
| 1400-1430 |     |     |     |     |     |     |     |
| 1430-1500 |     |     |     |     |     |     |     |
| 1500-1530 |     |     |     |     |     |     |     |
| 1530-1600 |     |     |     |     |     |     |     |
| 1600-1630 |     |     |     |     |     |     |     |
| 1630-1700 |     |     |     |     |     |     |     |
| 1700-1730 |     |     |     |     |     |     |     |
| 1730-1800 |     |     |     |     |     |     |     |
| 1800-1830 |     |     |     |     |     |     |     |
| 1830-1900 |     |     |     |     |     |     |     |
| 1900-1930 |     |     |     |     |     |     |     |
| 1930-2000 |     |     |     |     |     |     |     |
| 2000-2030 |     |     |     |     |     |     |     |
| 2030-2100 |     |     |     |     |     |     |     |
| 2100-2130 |     |     |     |     |     |     |     |
| 2130-2200 |     |     |     |     |     |     |     |
| 2200-2230 |     |     |     |     |     |     |     |
| 2230-2300 |     |     |     |     |     |     |     |
| 2300-2330 |     |     |     |     |     |     |     |
| 2330-0000 |     |     |     |     |     |     |     |



## Personal Information

The following information will be used for certification and contact purposes. Please fill out all information correctly and include your signature where requested. Please list your legal last name on the first line as identified on your Red ID.

|  |           |            |        |
|--|-----------|------------|--------|
| Your Name:   | Last Name | First Name | Middle |
| Other names, including maiden and nicknames, you have used or been known by: |           |            |        |
|  |           |            |        |
|  |           |            |        |

|                                 |        |        |      |       |     |
|---------------------------------|--------|--------|------|-------|-----|
| Address where you reside:       | Number | Street | City | State | Zip |
| Mailing address (if different): | Number | Street | City | State | Zip |

|                     |           |          |                          |
|---------------------|-----------|----------|--------------------------|
| Telephone Numbers:  | Residence | Business | Other (fax, cell, pager) |
| SDSU Student Email: |           |          |                          |

|                         |                         |
|-------------------------|-------------------------|
| Birthdate (mm/dd/yyyy): | Social Security Number: |
|-------------------------|-------------------------|

|                          |        |  |   |
|--------------------------|--------|--|---|
| Driver's License Number: | State: | You must be a United States Citizen or permanent resident alien who is eligible for and has applied for citizenship. Can you meet the citizenship requirement? | <input type="radio"/> Yes<br><input type="radio"/> No |
|--------------------------|--------|--|---|

|   |                 |                    |                  |
|---|-----------------|--------------------|------------------|
| For Identification purposes, provide the following information: |                 |                    |                  |
| Height  | Weight          | Natural Hair Color | Eye Color        |
| City of Birth   | County of Birth | State of Birth     | Country of Birth |
| Blood Type (optional)   |                 |                    |                  |



## Experience and Employment

Beginning with your most current employment, list ALL JOBS you have had including part-time, temporary and voluntary position. If you have had military experience, which includes reserve duty, include in the "name & address of employer" box your military base, assignments or unit of assignment. **\*\*\*Note: All periods of unemployment, in excess of 30 days must be listed.**

|   |                       |  |
|---|-----------------------|--|
| Dates of Employment<br>(mm/yyyy)<br>From:<br>To:  | Employer:<br>Address: | Current Supervisor:<br>Telephone:  |
| <input type="radio"/> Full-time<br><input type="radio"/> Part-time<br><input type="radio"/> Voluntary | Title:<br>Duties:     | Co-Worker Names:   |
| Why do you want to leave?   |                       |  |
| <input type="radio"/> Military Service<br><input type="radio"/> Not Employed                          | From: To:             | May we contact your employer?<br><input type="radio"/> Yes <input type="radio"/> No          |
| Dates of Employment<br>(mm/yyyy)<br>From:<br>To:  | Employer:<br>Address: | Supervisor:<br>Telephone:  |
| <input type="radio"/> Full-time<br><input type="radio"/> Part-time<br><input type="radio"/> Voluntary | Title:<br>Duties:     | Co-Worker Names:   |
| Why did you want to leave?  |                       |  |
| <input type="radio"/> Military Service<br><input type="radio"/> Not Employed                          | From: To:             | May we contact your previous employer?<br><input type="radio"/> Yes <input type="radio"/> No |
| Dates of Employment<br>(mm/yyyy)<br>From:<br>To:  | Employer:<br>Address: | Supervisor:<br>Telephone:  |
| <input type="radio"/> Full-time<br><input type="radio"/> Part-time<br><input type="radio"/> Voluntary | Title:<br>Duties:     | Co-Worker Names:   |
| Why did you want to leave?  |                       |  |
| <input type="radio"/> Military Service<br><input type="radio"/> Not Employed                          | From: To:             | May we contact your previous employer?<br><input type="radio"/> Yes <input type="radio"/> No |

If you have had no prior employment, please explain:

### Professional References

| Name | Position/Title | Contact Number |
|------|----------------|----------------|
|      |                |                |
|      |                |                |
|      |                |                |



**Pre-screening Inquiry**

- |  | <b>Yes</b>              | <b>No</b>               |
|--|-------------------------|-------------------------|
| 1.) Do you have a valid Social Security Card?                    | <input type="radio"/> Y | <input type="radio"/> N |
| 2.) Do you have a valid California Driver's License?             | <input type="radio"/> Y | <input type="radio"/> N |
| 3.) Do you have proof of vehicle insurance?                      | <input type="radio"/> Y | <input type="radio"/> N |
| 4.) Are you currently taking at least 6.0 units or more at SDSU? | <input type="radio"/> Y | <input type="radio"/> N |

**If you answered "No" to any of these questions then you are not eligible at this time to submit an application for the Community Service Officer Position. Please complete these steps before applying.**

**General**

- |   | <b>Yes</b>              | <b>No</b>               |
|---|-------------------------|-------------------------|
| 1. Are you currently employed?<br>If yes, do you plan to continue at your present job if hired by the Community Service Officer Program     | <input type="radio"/> Y | <input type="radio"/> N |
| 2. How many academic units are you taking this semester at SDSU?  | _____                   |                         |
| 3. Do you have any special training?<br>If yes, what type? CPR, EMT, FCC, Class B, CDL, or _____ exp. Date _____                            | <input type="radio"/> Y | <input type="radio"/> N |
| 4. Are you fluent in any foreign languages to the extent that you could interpret should the need arise?<br>If yes, what language(s)? _____ | <input type="radio"/> Y | <input type="radio"/> N |
| 5. When are you available to start? _____   | -                       | -                       |
| 6. Are you able to work up 20 hours (year-round) and 40 hours (Intersession and Summer) per week?   | <input type="radio"/> Y | <input type="radio"/> N |
| 7. Are you willing to work nights, weekdays and weekends?   | <input type="radio"/> Y | <input type="radio"/> N |
| 8. Are you willing to work during midterms, finals and holidays?  | <input type="radio"/> Y | <input type="radio"/> N |
| 9. Do you know anyone in University Police Department?<br>If yes, please provide his/her name. _____  | <input type="radio"/> Y | <input type="radio"/> N |
| 10. What is your major/minor? _____   | -                       | -                       |
| 11. What is your expected date of graduation? _____   | -                       | -                       |
| 12. What is your career objective? _____  | -                       | -                       |

**FOR EMPLOYER ONLY. DO NOT WRITE BELOW THIS LINE**



## Background Investigation

### Disclosure of Convictions

This section requires you to report arrests and convictions, including diversion programs that you did not successfully complete, and in some cases, offenses that may have been pardoned. As an applicant for government employment, you are also required to disclose this information unless exempted by state or federal law.

1.) Have you ever been convicted of any misdemeanor or felony in this state or any other state? (If yes, explain below: **Include Approximate Date, Charge, Arresting or Detaining Agency, and the Disposition or Penalty**)       Yes       No  
 Y       N

|       |                         |                                |  |
|-------|-------------------------|--------------------------------|--|
| A.)   | Approximate Date:       | Detaining or Arresting Agency: |  |
|       | Charge:                 |                                |  |
|       | Disposition or Penalty: |                                |  |
| <hr/> |                         |                                |  |
| B.)   | Approximate Date:       | Detaining or Arresting Agency: |  |
|       | Charge:                 |                                |  |
|       | Disposition or Penalty: |                                |  |
| <hr/> |                         |                                |  |
| C.)   | Approximate Date:       | Detaining or Arresting Agency: |  |
|       | Charge:                 |                                |  |
|       | Disposition or Penalty: |                                |  |



## Community Service Officer Application

**SDSU** | San Diego State  
University

### Controlled Substances

This section asks about your current and past recreational drug use. This covers the use of ANY illegal drug, including the unauthorized use of prescription drugs or over-the-counter drugs.

|   | Yes                     | No                      |
|---|-------------------------|-------------------------|
| 1.) Have you ever used any illegal drugs?   | <input type="radio"/> Y | <input type="radio"/> N |
| 2.) Have you ever used marijuana?   | <input type="radio"/> Y | <input type="radio"/> N |
| 3.) Have you ever used prescription drugs or non prescription drugs in a manner other than directed by a doctor or physician? | <input type="radio"/> Y | <input type="radio"/> N |

If you have answered "Yes" to any of the above questions, provide details, including drug(s) used, where, when and circumstances-reference to corresponding numbers:

4.) Prior to the past six months (check all that apply)

- A.) I have never used any drug in a recreational manner.
- B.) I have tried or used one or more drugs, but only under limited circumstances (for example, experimentation, at parties, concerts, special events, etc.)

If B.) is checked, give details including drug(s) used, most recent date used, and circumstances.

**FOR EMPLOYER ONLY. DO NOT WRITE BELOW THIS LINE**



Community Service Officer  
Application

**SDSU**

San Diego State  
University

**Traffic Citations**

List all traffic citations, **excluding parking citations**, you have received.

A.)

|                                |               |                |           |
|--------------------------------|---------------|----------------|-----------|
| Date Violation Occurred:       | Violation:    |                |           |
| Location (Street, City, State) | Action Taken: | Not Guilty     | Fined     |
|                                |               | Traffic School | Dismissed |

B.)

|                                |               |                |           |
|--------------------------------|---------------|----------------|-----------|
| Date Violation Occurred:       | Violation:    |                |           |
| Location (Street, City, State) | Action Taken: | Not Guilty     | Fined     |
|                                |               | Traffic School | Dismissed |

C.)

|                                |               |                |           |
|--------------------------------|---------------|----------------|-----------|
| Date Violation Occurred:       | Violation:    |                |           |
| Location (Street, City, State) | Action Taken: | Not Guilty     | Fined     |
|                                |               | Traffic School | Dismissed |

**FOR EMPLOYER ONLY. DO NOT WRITE BELOW THIS LINE**

**Employment History**

- |   | <b>Yes</b>              | <b>No</b>               |
|---|-------------------------|-------------------------|
| 1.) Have you ever been involved in an incident of workplace violence?   | <input type="radio"/> Y | <input type="radio"/> N |
| 2.) Have you ever quit a job without giving proper notice to your employer?   | <input type="radio"/> Y | <input type="radio"/> N |
| 3.) Have you ever failed to complete a probationary period for any job?   | <input type="radio"/> Y | <input type="radio"/> N |
| 4.) Have you ever taken anything from your employer without authorization?  | <input type="radio"/> Y | <input type="radio"/> N |
| 5.) Have you ever received any disciplinary action; including an oral or written reprimand, demotion, denial of merit increase, suspension without pay, surrendering earned time off, or any non-judicial punishment? | <input type="radio"/> Y | <input type="radio"/> N |
| 6.) Have you ever had any problems with any of your supervisors?  | <input type="radio"/> Y | <input type="radio"/> N |
| 7.) Have you ever had any problems with any of your co-workers?   | <input type="radio"/> Y | <input type="radio"/> N |
| 8.) Have you ever been found to have discriminated against a co-worker, superior, subordinate, or customer (Sexual harassment, racial bias, etc.)   | <input type="radio"/> Y | <input type="radio"/> N |
| 9.) Have you ever released, sold, or given away legal confidential information?   | <input type="radio"/> Y | <input type="radio"/> N |

**Driving Record**

- |   | <b>Yes</b>              | <b>No</b>               |
|---|-------------------------|-------------------------|
| 10.) Has your automobile insurance ever been canceled for any reason?                                 | <input type="radio"/> Y | <input type="radio"/> N |
| 11.) Have you ever been refused a drivers license?  | <input type="radio"/> Y | <input type="radio"/> N |
| 12.) Have you been involved as the driver in a motor vehicle accident within the past 7 years?        | <input type="radio"/> Y | <input type="radio"/> N |
| 13.) Have you ever been arrested and/or convicted of driving under the influence of drugs or alcohol? | <input type="radio"/> Y | <input type="radio"/> N |
| 14.) Have you ever falsified information on a driver's license or identification card application?    | <input type="radio"/> Y | <input type="radio"/> N |
| 15.) Have you ever driven a vehicle without auto insurance, as required by law?                       | <input type="radio"/> Y | <input type="radio"/> N |
| 16.) Has your automobile insurance ever been placed in an assigned risk category?                     | <input type="radio"/> Y | <input type="radio"/> N |

**Directions:** The applicant will list all answers responded to with a "yes" by question number in the left column, then will provide an explanation of the circumstances and any details deemed relevant by the applicant.



*Continued from page 13*

Item #

#### CERTIFICATION

I HEREBY CERTIFY THAT ALL OF THE ANSWERS PROVIDED AND STATEMENTS MADE IN THIS QUESTIONNAIRE ARE TRUE AND COMPLETE. I UNDERSTAND THAT ANY MISSTATEMENTS OF MATERIAL FACT, OMISSIONS, INCOMPLETE ANSWERS, OR INACCURATE RESPONSES WILL RESULT IN DISQUALIFICATION OR DISMISSAL.

I UNDERSTAND THE UNIVERSITY WILL VERIFY ALL OF MY EMPLOYMENT REFERENCES AS A CONDITION OF AN OFFER OF EMPLOYMENT. I FURTHER UNDERSTAND THAT, IF OFFERED A POSITION, I MUST COMPLETE A FINGERPRINTING AND SUBMISSION OF DOCUMENTS THAT CERTIFY MY ELIGIBILITY TO WORK IN THIS COUNTRY.

I HEREBY FUTHER CERTIFY THAT I HAVE PERSONALLY COMPLETED THIS FORM AND ANY SUPPLEMENTAL PAGES ATTACHED AND THAT ALL STATEMENTS MADE ON EACH AND EVERY PAGE ARE TRUE AND COMPLETE, TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT ANY MISSTATEMENT OF MATERIAL FACT MAY SUBJECT ME TO DISQUALIFICATION, OR, IF I HAVE BEEN APPOINTED, MAY DISQUALIFY ME FROM CONTINUED APPOINTMENT.

Signature

Date

Print Name



### **CONFIDENTIALITY AGREEMENT**

#### Confidentiality

1. I understand that the Community Service Officer Program is an integral part of this department.
2. I understand that during the course of my employment, I may be exposed to or have access to confidential information related to the criminal justice system, law enforcement operations, or other restricted or sensitive information; including comments, reports and other documents.
3. I understand that any unauthorized use or disclosure of such information for other than legitimate law enforcement purposes is expressly prohibited.
4. I understand that any violation of this Agreement, or of confidentiality in general, may be cause for disciplinary action, including termination, financial penalty, or legal prosecution as established by law.

#### System Security

1. The criminal justice information stored and transmitted through local, state, and federal law enforcement computer systems is sensitive and legally protected.
2. Access and disclosure is restricted to duly authorized criminal justice agencies on a need to know basis.

#### System Discipline

1. Local, state, and federal computer systems are to be used exclusively for the transmission of official transactions relevant to law enforcement operations. All transactions are logged, stored, and reviewed at their respective computer centers.
2. The use of these systems for mass vehicle registration and operator information checks is not permitted and will not be tolerated.
3. All transactions are covered by federal and state privacy laws and regulations and as such are closely monitored.

Access to law enforcement computer systems for personal or non-law enforcement use or disclosure is strictly prohibited. Any use or disclosure of information requested and/or received through any law enforcement computer system or database for purposes other than legitimate law enforcement inquiries is expressly prohibited. Any prohibited use or disclosure of information will be considered a violation of the policies, rules, and procedures of this department and the respective local, state, and federal computer systems. The violator will be subject to possible termination of employment and criminal prosecution.

This Agreement shall not be construed to prevent me from discussing the general nature of my work as a Community Service Officer, or the public service provided by this Department. However, under no circumstance may I reveal any confidential information. In consideration of having been selected by this department as an authorized operator of law enforcement computer systems.

**I have read, understood, and my signature below acknowledges my agreement to comply with the above listed policies and rules.**

|                                   |              |         |
|-----------------------------------|--------------|---------|
| <b>Applicant's Certification:</b> | Accept       | Decline |
| <b>Signature:</b>                 | <b>Date:</b> |         |
| <b>Print Name:</b>                |              |         |



## AUTOBIOGRAPHY

- a.) You are required to turn in an autobiography and address your personal history within it.
  - b.) After completing the autobiography, please explain your long term professional goals and why you are interested in the CSO Program.
  - c.) Add why you are qualified to be a Community Service Officer. Include extra cirricular activities, volunteer work, and leadership positions that you have held in the past.

**Your response must be handwritten, in blue or black ink, in uppercase print, and a minimum of 2 pages.** We are looking for a detailed and well presented response.

Use the following pages to write your response. If more is needed, reprint page #17 as many times as needed.



# Community Service Officer Application

**SDSU** | San Diego State University



# Community Service Officer Application

**SDSU** | San Diego State University

I certify that I typed the above autobiography and the information I provided is true and accurate to the best of my knowledge. I understand any deliberate misstatements or omissions on this form will result in disqualification dismissal.

**Signature:**

Date:

**Print Name:**

San Diego State University  
Police Department  
5500 Campanile Drive,  
San Diego, CA 92182-4390  
Tel (619) 594-3424-Ops

## **AUTHORIZATION TO OBTAIN DRIVING RECORDS FROM THE DEPARTMENT OF MOTOR VEHICLES**

**Please complete the following sections below.**

**FULL NAME** \_\_\_\_\_ **BIRTHDATE** \_\_\_\_\_  
Last                      First                      MI                      mm/dd/yyyy

**ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**CALIFORNIA**  
**DRIVERS LICENSE NUMBER** \_\_\_\_\_

**DRIVERS LICENSE EXPIRATION DATE** \_\_\_\_\_  
mm/dd/yyyy

**CAMPUS INFORMATION:**

**CWID** \_\_\_\_\_

**CHECK ONE:** [ ]**FACULTY/STAFF** [ ]**AUXILLARY** [ ]**STUDENT** [ ]**VOLUNTEER**

**DEPARTMENT** \_\_\_\_\_ **EXTENSION** \_\_\_\_\_

**SUPERVISOR** \_\_\_\_\_ **EXTENSION** \_\_\_\_\_

**UPON COMPLETION, YOUR APPLICATION WILL BE SUBMITTED TO:**

San Diego State University Police Department  
5500 Campanile Drive  
San Diego, CA 92182-4390

or may be emailed to CSO@sdsu.edu