

# The "CSI EXPERIENCE" Application Form

Print or type (all information must be current and complete)

<b>FULL LEGAL NAME:</b>  _____ LAST                      FIRST                      MIDDLE INITIAL			<b>CONTACT NUMBER(S):</b> Home:  Cell:  Work:  Emergency Contact (Name & phone):		
<b>ALIAS/FORMER NAMES USED:</b>  _____					
<b>DATE OF BIRTH:</b>  _____			<b>E-MAIL ADDRESS:</b>  _____		
<b>LAST 4 DIGITS OF SOCIAL SECURITY NUMBER:</b>  _____			<b>HOME ADDRESS (physical residence, no PO Boxes):</b>  _____		
<b>ARIZONA DRIVER LICENSE #:</b>  _____					
<b>CURRENT EMPLOYER:</b>  _____			<b># OF YEARS:</b>  _____		
<b>REASON FOR ATTENDING?</b>  _____			<b>DO YOU HAVE A CAREER GOAL IN FORENSICS?</b> If so, explain:  _____		
<b>STUDENT:</b> (Yes/No) _____			<b>COLLEGE MAJOR, OR DEGREE WORKING TOWARDS:</b> If yes, FULL TIME _____ or PART TIME: _____		
<b>UNIVERSITY/COLLEGE ATTENDING:</b>  _____					
<b>Circle Yes or No to indicate if you or any immediate family members are any of the following:</b> -a City of Phoenix employee (Yes/No)? If yes, which Department: _____  -a government or law enforcement employee (Yes/No)? If yes, which Agency: _____  -in any way media affiliated (Yes/No)? If yes, explain how: _____					
<b>HOW DID YOU LEARN ABOUT THE CSI EXPERIENCE?</b> City website _____ University/College _____ Other _____					
Send completed and <b>signed</b> applications one the following methods: <b>Mail to:</b> Phoenix Police Crime Laboratory Attn: Public Relations Committee 621 W. Washington Street Phoenix, AZ 85003 <b>Fax to:</b> 602-495-0169 <u>Attn: PR Committee</u> <b>Email to*:</b> CSRinfo@phoenix.gov <i>* emailed applications must be printed out, physically signed, scanned, and then emailed back to the above email address</i>					

Application may take 6-8 weeks to process. We will notify you by email so ensure you email address is written clearly.

# THE "CSI EXPERIENCE" PROCESS, EXPECTATIONS, AND WAIVER

*The "CSI EXPERIENCE" is a hands-on learning opportunity for the forensically curious person to gain an insight into the field of crime scene investigations.*

*There are no weapons permitted in the Phoenix Police Crime Laboratory*

## **\*\*\*\*ELIGIBLE PARTICIPANTS\*\*\*\***

Persons **18 years** of age or older may be eligible to attend if the following criteria are met:

1. Complete the application and the process, expectation and waiver sheet and return no later than **three weeks** prior to the start date of the class (but classes are filled based on application date).
2. Pass background check; i.e. not having any outstanding warrants or having been convicted of felonies or had any undesirable police contact.
3. Appropriate attire must be worn, including closed toed shoes. Business casual is desired. Non-compliance with the dress code requirements may result in non-admittance to the class.

## **\*\*\*\*SELECTION PROCESS\*\*\*\***

Prospective participants who submit a completed application form will be reviewed to determine eligibility. Applicants will be selected by reviewing the information received, by passing the background check, and class availability. If it is determined you are eligible to attend you will be placed on a list and notified. In the event that the class is filled, a waiting list will be generated and applicants will be selected off that list for future classes. Once you have attended a "CSI Experience" class, you will not be allowed to repeat the class for at least two years.

Some eligible applicants may be refused attendance to this class due to non-compliance with the rules or regulations, and/or unspecified circumstances.

## **\*\*\*\*WAIVER\*\*\*\***

\_\_\_\_\_ As a participant of the CSI EXPERIENCE, I understand that I may be subjected to viewing disturbing images of a graphic nature.

\_\_\_\_\_ I will not take any unauthorized photographs and/or videos within the Crime Lab. Staff will instruct participants where photos are permitted.

\_\_\_\_\_ I will abide by all rules and requirements requested during the course of the class to include the use of proper personal protective equipment (gloves, masks, etc).

\_\_\_\_\_ I have filled out all CSI EXPERIENCE forms honestly and accurately to the best of my knowledge (including the disclosure of family members' employment or my employment by a law enforcement agency, attorney's office, other government agency, media, or similar profession).

\_\_\_\_\_ The information obtained from the CSI EXPERIENCE is for demonstration/informative purposes only.

\_\_\_\_\_  
**PRINT NAME**

\_\_\_\_\_  
**CLASS DATE REQUESTED**

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**DATE SIGNED**