



MACE RESERVE UNIT APPLICATION

Name:		Social Security Number:	
Present Address:		Driver's License Number:	
City:		State:	Zip Code:
Home Telephone Number:		Work Telephone Number:	
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E-mail Address:		Cell Phone Number:	
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E-mail Address:		Date of Birth:	

- Requirements for the position of MACE Reserve Officer:**
- Minimum age 25 years
 - All applicants must pass a background check
 - Willing to work 40 hours per year
 - Must possess a valid MI Drivers License
 - Submit to an interview

Training/Experience: Please detail computer experience:

Wages:	This is a volunteer position. There is no pay for your services.
Participation:	All unit members are required to perform a minimum of 40 hours of service per year. Includes special events, internet safety presentations and supervised online undercover investigations.
Yearly Training Requirements:	Applicant must attend a minimum of eight (8) meetings during a calendar year to maintain their status as a reserve.

Membership Meetings:	Regular membership meeting attendance is required.
Physical Requirements:	Weight must be proportionate to height. Physical condition must be adequate to perform the function of a MACE Enforcement Unit Officer. Including but not limited to: climbing stairs and walking distances up to (1) mile.
Conduct & Bi-laws:	The Macomb County MACE Reserve Officer Program is governed by it's own by-laws and the Operations Manual of the Macomb County Sheriff's Office. You must comply with such regulations. Failure to do so will result in punitive action up to and including dismissal from the MACE Reserve Program.
Probation:	One year probation. During this time, you are required to successfully complete all training and work assignments.
Background Investigation:	A background investigation will be conducted with the acceptance of this application. You will be required to submit signed waivers so that references may be contacted. 1. Have you ever been arrested? <input type="checkbox"/> Yes or <input type="checkbox"/> No 2. Have you ever been issued a traffic violation or marine citation? <input type="checkbox"/> Yes or <input type="checkbox"/> No
If you answered yes to either question above, please indicate the arresting/citing department, the arrest/violation charge and the disposition of the case:	

Employment History (Current or Previous)	
Company Name:	Current/Previous Position:

Address:	Phone Number:	
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City:	State:	Zip Code:

Please list your regular work schedule:

Family History:	<input type="checkbox"/> Married	<input type="checkbox"/> Single	<input type="checkbox"/> Divorced	Dependents #
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Please write a short narrative about yourself and your reason for applying to this unit:

REFERENCES:

List three personal references

1	Name:	Home Phone:
		()
	Address:	Cell Phone:
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	City, State & Zip Code:	Work Phone:
		()

2	Name:	Home Phone:
		()
	Address:	Cell Phone:
		()
	City, State & Zip Code:	Work Phone:
		()

3	Name:	Home Phone:
		()
	Address:	Cell Phone:
		()
	City, State & Zip Code:	Work Phone:
		()

I, the undersigned applicant, do hereby make application for membership in the Macomb County Sheriff's Office MACE Reserve Unit Division. I authorize the MACE Officers and the Macomb County Sheriff's Office to make inquiries and to conduct a background investigation on myself. This will serve to waive any and all rights that I might have under the 1974 Privacy Act, 5 USC 552 A and any claim I might have had under Michigan law on the basis of invasion of privacy.

I further certify that I can and will upon request substantiate all statements and information provided by myself on this application and that all statements are complete and correct to the best of my knowledge.

I also understand that any false statements or erroneous information provided in connection with this application may be cause for rejection of membership.

Applicant's Signature

Witness Signature

Date

Date

Witness Name (Please Print)

PLEASE SIGN AND RETURN YOUR COMPLETED APPLICATION TO:

**CAPTAIN JEFFREY MCPHERSON
C/O MACOMB COUNTY SHERIFF'S OFFICE
43565 ELIZABETH ROAD
MT. CLEMENS, MI 48043**