



# CITY OF TAMPA

**Bob Buckhorn**

**POLICE DEPARTMENT**

**Brian Dugan  
Chief of Police**

## COLLEGE INTERN APPLICATION

Date: \_\_\_\_\_

Name: \_\_\_\_\_

DOB: \_\_\_\_\_ Last First Middle  
Race: \_\_\_\_\_ Sex: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City FL Zip Code

Phone (Home): ( ) \_\_\_\_\_ Phone (Cell): ( ) \_\_\_\_\_ Email \_\_\_\_\_

Institution Name: \_\_\_\_\_

Requested Internship Semester/Date(s): \_\_\_\_\_ Patrol Or Forensics \_\_\_\_\_

1. Are you a United States Citizen?: Yes  No

2. Have you ever been in the military?: Yes  No  Branch: \_\_\_\_\_  
Type of Discharge: Honorable  Dishonorable

3. Have you ever been arrested or charged with any crime?: Yes  No   
If yes, please explain \_\_\_\_\_

4. Have you ever paid for an illegal sex act?: Yes  No  If yes, please explain \_\_\_\_\_

5. Have you ever had any involvement with child pornography?: Yes  No   
If yes, please explain \_\_\_\_\_

6. Have you ever used, tried, possessed, or experimented with marijuana? Yes  No   
If yes, give dates (first and last time) and number of times \_\_\_\_\_

7. Have you ever used, tried, possessed, or experimented with any other illegal drugs: (opiates, cocaine, heroin, barbiturates, amphetamines, hallucinogens, steroids, hashish, etc)?  
Yes  No  If yes, (type of illegal drug, dates and number of times) \_\_\_\_\_

8. Have you ever sold or delivered any amount of illegal drugs: (marijuana, cocaine, hashish, heroin, etc)? Yes  No   
If yes, (type of illegal drugs, number of times and dates) \_\_\_\_\_

9. Have you ever been involved in any other criminal activity that has not been detected?  
Yes  No  If yes, please explain \_\_\_\_\_

411 N. Franklin Street • Tampa, Florida 33602 • (813) 276-3200