



CRISIS INTERVENTION TEAM APPLICATION

Name and Serial Number _____

Present Assignment _____

Previous Assignments _____

Length of Service _____

Prior Education or Employment with Mental Illness:

Education: _____

Employment: _____

Officer's Signature _____

Supervisor's Signature _____

Commander's Signature _____

*After completion and approval, please attach a copy of a current **demeanor record** and forward to Sergeant Sean Hess MPD-II.