



# LOWER PROVIDENCE TOWNSHIP POLICE DEPARTMENT

100 Parklane Drive • Eagleville, PA 19403 • [www.lowerprovidence.org](http://www.lowerprovidence.org)  
Phone: 610-539-5901 • Fax: 610-630-2219



**Michael Jackson, Chief of Police**

## **Lower Providence Township Police Department Internship Program**

This internship program is designed as a participant observation experience. It is intended that Criminal Justice students be allowed to participate in actual professional activities where feasible. The program will provide as realistic an exposure to the actual tasks performed by your professional staff as is possible under the circumstances.

Intern participation may include, but is not limited to, the following:

- Interacting with Citizens
- Report Writing
- Routine Agency Activities
- Assisting in The Conduct of Ongoing Agency Research Projects

Orientation consists of the following:

- Tour of the Agency
- Introduction to Personnel
- Description of Other Agencies You Interact with Regularly
- Discussion of Responsibilities, Liabilities, Etc.
- Discussion of Agency Policies
- Assignments of Necessary Reading Material(s) – Crimes Code, Vehicle Code, Etc.

## **Student Field Internship Program**

***Student Interns are prohibited*** from participation in those tasks that are off limits to them due to safety, legal or personnel concerns, including:

- Wearing a Uniform
- Making Arrests
- Handling Firearms



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- Participating in Undercover Surveillance
- Purchasing Illegal Drugs or Other Contraband
- Performing Tasks that Violate Union or Contract Stipulations

## **Objectives of Police Internship Program**

- To give the student the opportunity to apply classroom learning in an agency setting.
- To encourage the development of a professional identity and appropriate set of skills to include use of computer.
- To provide the student with the opportunity to conduct “Hands On” field research in a Criminal Justice Agency.
- It is important for the students’ development that they have the chance to view the full range of the host agency’s activities and to develop an understanding of how these relate to organizational objectives and goals. Interns are required to visit/interview all divisions and units within the Police Department.
- Lower Providence Township Police Department can provide a very rewarding opportunity for students desiring an internship with a modern Criminal Justice Agency.

## **Police Intern Duties**

1. Upon arrival, check in with Sgt. Mark Stead or his designee.
2. Complete assigned task(s) as required.
3. **DO NOT ABUSE THE COMPUTER or TELEPHONE WITH PERSONAL BUSINESS!**
4. **DRESS APPROPRIATELY. REMEMBER**, you are representing your school and the Police Department.
5. **YOU MUST** wear your nametag at all times while in the building. It will be removed when you leave the building, unless on official business.
6. Listen and follow instructions.
7. **ALL** information observed, read and handled while working in the Police Department is **CONFIDENTIAL** and **NOT TO BE SHARED** with anyone outside the Police Department.



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8. Insubordination towards Police Personnel, Department Civilian Personnel, Criminal/Vehicle Code Violations, infractions of Police Department or Township Rules & Regulations, may result in termination of your Internship and notification will be given to your school/college advisor/sponsor.
9. Make recommendations/suggestions to improve the Intern Program and/or the Police Department.
10. If you will be late or absent, for any reason, you must call Sgt. Mark Stead at 610-635-3571.
11. If you have any questions or problems concerning your Internship, contact Sgt. Mark Stead.

**We Look Forward To Working With You**

**And Hope You Enjoy**

**Your Internship!**



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## Internship Application

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

Address: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Cellphone: ( ) \_\_\_\_\_

Contact In Emergency: \_\_\_\_\_

Phone Number: ( ) \_\_\_\_\_

Date Of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

Education:

High School: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

College: \_\_\_\_\_ Major: \_\_\_\_\_

Name Of Career Development Supervisor: \_\_\_\_\_

Phone Number: ( ) \_\_\_\_\_

Give a brief overview of your career objectives: Police, Parole, etc.

\_\_\_\_\_

\_\_\_\_\_

Are you currently employed? Yes \_\_\_\_\_ No \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

If yes, describe: Hours \_\_\_\_\_ Days \_\_\_\_\_ Worked \_\_\_\_\_

Employer's Name: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Employer's Phone Number: ( ) \_\_\_\_\_

Have you ever been arrested? Yes \_\_\_\_\_ No \_\_\_\_\_



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If Yes, Give specific details: \_\_\_\_\_

\_\_\_\_\_

Disposition: Plead Guilty \_\_\_\_\_ Not Guilty \_\_\_\_\_

Have you ever been cited for a traffic offense? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, Give specific details: \_\_\_\_\_

\_\_\_\_\_

Has your driver's license ever been suspended? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, Give specific details: \_\_\_\_\_

\_\_\_\_\_

Disposition of violation: Paid Fine: \_\_\_\_\_ Costs: \_\_\_\_\_

What is the desired starting date for your Internship? \_\_\_\_\_

What is the anticipated completion date of your Internship? \_\_\_\_\_

Give the days & hours you have been authorized by your school/college to complete:

\_\_\_\_\_

\_\_\_\_\_

Polo Shirt Size: \_\_\_\_\_

Interviewed On: \_\_\_\_\_ By: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Recommended: ☐ Yes ☐ No