



FRATERNAL ORDER OF POLICE › ILLINOIS STATE LODGE

ASSOCIATE MEMBER BACKGROUND CHECK

Required Information

The Illinois Fraternal Order of Police appreciates your interest in becoming an Associate member, and we understand that you have elected to undergo a background check in lieu of obtaining an eligible sponsor. The following information will allow the ILFOP to conduct a check of the Illinois criminal history record files, ensuring that we maintain the highest standards for membership. The cost for a background check is \$16, payable by the applicant.

Please complete the following fields and return via e-mail, fax or postal mail.

Supplemental Applicant Information

First Name: Middle Name: Last Name:

List Maiden Name and Any Other Previously Used Last Names (if applicable):

Gender (select one): Male Female

Race (select one): America Indian
Asian/Pacific Islander
Black
Hispanic
White
Unknown

Driver's License Number: State of Issue:

Date of Birth (example: 6/12/1953):

Additional Information or Comments?

Send completed form by e-mail, or print and submit via fax or postal mail.

[Submit by E-mail](#)

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For more information or questions, please call (217) 726-8880.