

## ERIE POLICE DEPARTMENT

PO Box 510 Erie, CO 80516

## VOLUNTEERS IN POLICE SERVICE APPLICATION



Please fill out completely or the application will not be processed. If any section does not apply to you, please indicate by writing "N/A". The Erie Police Department appreciates your interest in service and commends your spirit to volunteer. (**PLEASE PRINT**)

PERSONAL INFO	RMATION:							
Last Name	First Name	Midd	lle Initial Age S		Sc	Social Security #		Date of Birth
Home Address:			City			Zip		ace of Birth
Home Phone:		Busin	Business Phone:			Other names used:		
E-Mail Address:								
Previous Address(s):	Last Five Years							
CRIMINAL HISTO	ORY AND DRI	VING I	RECORI	):				
Colorado Drivers License Number Has your license ever been suspended or revoked:  Yes  No  No								
Have you ever been of If yes, please explain	:			No				
Traffic citations and	accidents for the	past tw	o years:					
REFERENCES:								
<u>1.</u>	ast 5 years. (Please Add	list name lress	e <u>, complete</u>		with		leph	
2. 3. 4.								

EDUCATION BACKGROUND AND MILITARY EXPERIENCE						
(Please circle highest grade completed						
High School 1 2 3 4	Colle	ege 1		6 7	8	
High School Attended:	igh School Attended: College Attended:					
Military Service Branch:	Rar	nk:	Time Served:		Date Discharged:	
EMPLOYMENT HISTORY: (Please	se fill out	compl	etely) If you'ı	e retire	d, note: "	N/A"
Current Employer:		Occupation: From Date: To Date:				
Business Address: (Including City, State, and Zip Code)			e)	Phone Number:		
Employment for past five years (Pleas	e include	firm na	me, address,	supervi	sor, dates	):
1.						
2.						
3.						
4.						
TELL US A LITTLE ABOUT YOU	<b>[</b> :					
What are your hobbies and Interests?						
Please list any volunteer experience, constudy or research and internships:	ommunit	y activit	ies, training v	worksho	pps, specia	al areas of

Do you prefer an office setting or a more a	active role?					
Please briefly state why you wish to volun	nteer your time to the Erie Po	olice Department.				
(Use another sheet if necessary) <i>This ques</i>	stion must be answered.					
AVAILABILITY:						
When are you available to work?						
Days Available:						
Times Available:						
Number of Hours per Week						
EMERGENCY INFORMATION:						
In case of an emergency, please notify:	A 7.7					
Name:	Address:					
Relationship:	Day Phone Number:	Night Phone Number:				
TERMS AND SIGNATURE:						
As a volunteer with the Erie Police Depart	tment, I am willing to furnish	n information for use in				
determining my qualifications.	1 1/1 / 6	1 1 991 1 . 1				
I understand that for security reasons, a ba and I will be fingerprinted.	ackground/clearance/reference	ce check will be conducted				
I understand that falsifying statements on	this application, or during th	e interview process is cause				
for my immediate dismissal from the Volu						
I understand that the Erie Police Department will not disclose any of my information to any						
outside entity without my written consent.		lose the reason if any for				
I understand that the Erie Police Depar not being selected to the program.	timent will not have to disc.	iose the reason, it any, for				
In signing, I do hereby certify that all information contained in this application is correct						
and accurate to the best of my knowledge. I further authorize the Erie Police Department to						
verify criminal history and driving records, as well as, personal references, and employment						
history, as part of the background process. If accepted to perform volunteer duties for the Erie Police Department, I understand I may be privy to confidential information and						
promise to respect and maintain that confidentiality whenever presented with it.						
Signature:	•	Date:				