## DEPARTMENT OF STATE POLICE **VOLUNTEER SERVICE APPLICATION**

Name:			Social Security No	O
Last	First	Middle	<i>,</i>	
Address:		Home Telephone: ( )		
Street	City/County	ZIP Code	~	
Are you currently employed	Part T	ime W	ork Telephone: ()	
Current or most recent emp				
Position:	Supervisor's N	Name and phone #		West of the second seco
Education: (List high school	, college, advance degrees):			
Work History (Provide a brid	ef summary of previous emp	oloyment):		
Special Skills (Indicate any s	oecial skills you have or equi			
Indicate the types of volunte How often are you available: Circle days that you are avail Indicate times of the day you Have you ever been convicted If you answered "yes" to the additional paper if necessary acceptance in the volunteer p	DailyWeeklyMorable: Sunday Monday are available: Morning: d of any law violations (includabove question, please list algorogram.	onthly Other Tuesday Wed After uding moving traff Il violations and exp	nesday Thursday noon: ic violations)? Yes plain Use the back o	Friday Saturday Evening:No f this application or
How did you hear about this	volunteer opportunity?			
Please list three references:	Λddrass		Talanh	one:
			Telephone:	
			Telephone:	
3) Name:	Address	S:	Telephone:	
a standard backgro	at before I am assigned to und investigation will be ation is true and correct.	conducted. I her	<del>-</del> -	
Please return this comp	(	Signature)		(Date)

riease return this completed application to:

**Volunteer Service Coordinator** Virginia Department of State Police Post Office Box 27472 Richmond, Virginia 23261-7472