



VOLUNTEERS IN POLICING

Volunteer Program Application

As a candidate for a volunteer position with the Punta Gorda Police Department, I am willing to furnish information for use in determining my qualifications. I authorize release of any and all information that the Punta Gorda Police Department may have concerning me, including information of a confidential or privileged nature.

I understand for security purposes a basic background check will be conducted to determine my eligibility and I will be fingerprinted. Further background information will be requested only if a specific volunteer assignment calls for a full security check.

If you are not completing this form electronically, please print clearly in black ink or use a typewriter. It is important that you answer all questions on this application fully and accurately.

PERSONAL INFORMATION				
Name (Last, First Middle)		Date Of Birth		Place Of Birth (City & State)
Address		City		State
Home Phone	Cell Phone	Work Phone		Social Security #
E-mail Address		Driver License #		State
Marital Status	Other Names Used In Past			

PREVIOUS ADDRESSES FOR THE PAST FIVE (5) YEARS				
Dates (From - To)	Address	City	State	Zip
Dates (From - To)	Address	City	State	Zip
Dates (From - To)	Address	City	State	Zip

EDUCATION

High School Name	City	State	Grade Completed	Final Year
College Name	City	State	Years Completed	Final Year
College Name	City	State	Years Completed	Final Year
Degree(s) Earned		Major(s)	Minor(s)	
Languages, Other Than English, Spoken Or Written Fluently				

MILITARY SERVICE

Branch	Occupation / Specialty	Dates Of Service	Rank

EMPLOYMENT

Present Employer Name		Occupation / Job Duties	Dates Of Employment		
Phone #	Address	City	State	Zip	
Previous Employer Name		Occupation / Job Duties	Dates Of Employment		
Phone #	Address	City	State	Zip	
Previous Employer Name		Occupation / Job Duties	Dates Of Employment		
Phone #	Address	City	State	Zip	

Other Special Skills, Training, Interests, Or Hobbies You Have Which May Be Useful To The Police Department

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LOCAL REFERENCES (MUST PROVIDE AT LEAST TWO)

Name	Phone #	Name	Phone #

CRIMINAL HISTORY

Arrests Or Convictions (Include City & State)

QUESTIONNAIRE

How did you learn of the Punta Gorda Police Department Volunteer Program?

What type of work / services do you wish to provide?

What days and hours would you be available?

Why do you wish to volunteer with the Punta Gorda Police Department?

Please list any current or previous volunteer activities?

I hereby authorize the Punta Gorda Police Department, its designee, or agency to investigate my past or current activities and to receive full and complete disclosure of all records relating to me and my past employment, criminal, or traffic reports or investigations.

I understand that police agencies often handle sensitive or confidential information, the disclosure of which could adversely affect a criminal investigation and in some instances may be a violation of law. I agree to not disclose any information obtained by me while engaged in my volunteer duties unless specifically authorized in advance by a Punta Gorda Police Department supervisor. I understand that my failure to comply with this paragraph will result in my removal from the volunteer program.

I hereby indemnify and hold the City and the Punta Gorda Police Department harmless, for any injury to myself or my property while engaged in volunteer activities with the Punta Gorda Police Department. I agree that the City and the Punta Gorda Police Department will not be responsible for any activities, liability, suits, or damages which may occur during or as a result of my volunteer status with the Punta Gorda Police Department, which occur outside the scope of the responsibilities and duties assigned to me.

Signature _____

Date _____

FOR OFFICIAL USE ONLY

Date Received

Date Called

Date Interviewed

Section

Date Reviewed

Duties

Comments
