

Volunteer In Police Services Application

Personal Information									
Name:									
(Last) ((First)	(Middle)							
Are you at least 21 Years old?	No Da	te of Birth:							
Do you have a valid California Driver's license? Ves No Email:									
Telephone Number: () Residence	() Cell							
Resident Address:									
	-	-							
Emergency Contact: Phone #:									
How did you hear about the Volunteer program?									
□ Friend □ City of Turlock Website	\Box Co	ommunity Event Other:							
Education & Skills									
List of any special training, education, skills or hobbies that help us to better place you in the rig field		Bilingual skills- Pleas indicate language(s) and if you speak, read, and/or write the language.							
Work & Volunteer Experience									
		k). Use a separate sheet for additional information							
Employer Name & Address:	Phone:	Duties:							
Dates: FROM: TO:	Reason For Leaving:								
Employer Name & Address:	Phone:	Duties:							
Dates: FROM: TO:	Reason	For Leaving:							
Employer Name & Address:	Phone:	Duties:							
Dates: FROM: TO: Reason		For Leaving:							
Have you ever been discharged or forced to resign from any position?Has your driver's license been suspended or revoke□Yes □No		Have you ever been convicted, served a jail sentence or been placed on probation after committing a felony or misdemeanor? If yes, state <u>Nature of conviction, dates, city</u> <u>& state under remarks*</u> (You may exclude juvenile offenses and minor traffic citations.)							

Volunteer Information

- Please select the type of Volunteer work you would like to do with the Turlock Police Department 1.
 - □ In-House Work (Data entry, filing Etc.)
 - □ Patrol Work
 - \Box Emergency Call-Outs
- Please list any physical limitations that need to be accommodated to help you volunteer: 2.

Please state which days & times you are available to Volunteer 3.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
TIME:							

I understand that as a Volunteer / Intern, I am representing the City of Turlock and will adhere to the guidelines set forth by the Program.

I acknowledge that the City has extended its worker's compensation coverage to volunteers and I agree to accept that coverage. I acknowledge that loss or damage to of personal property used while providing volunteer services is not reimbursable under City regulations.

I attest, under the penalty of perjury under the laws of the State of California, that any and all of the information provided herein and any supplemental information submitted herewith, is true and correct to the best of my knowledge.

Date: _____Signature: _____

RETURN COMPLETED APPLICATION TO:

TURLOCK POLICE DEPARTMENT VIPS COORDINATOR 244 N. BROADWAY TURLOCK CA, 95380