



VOLUNTEER APPLICATION CHECK LIST

NAME:

ADDRESS:

PHONE HOME:

CDL:

EXP DATE:

CELL:

E-MAIL:

DATE OF BIRTH:

VOLUNTEER SPONSOR INFORMATION

SPONSER: _____

SPONSER INFORMATION: _____

Have you ever used drugs? (No)____ (Yes- Explain)____

Are you or any family member related to or affiliated with gang members? (No)____ (Yes- Explain)____

Have you ever been in trouble with law enforcement? Yes____ / No____ If yes, please discuss:

Have you ever been convicted of a misdemeanor or felony? Yes____ / No____ If yes, please discuss:

Are you on Probation? Yes____/No____ If yes, Probation Officer's Name: _____

Are you on Parole? Yes____/No____ If yes, Parole Officer's Name: _____

Any false statement, either verbal or written, may cause the applicant's name to be removed from the eligible list or be cause for immediate rejection and/or removal from clearance status.

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Signature: _____ Date: _____

OFFICIAL USE ONLY

APPROVED/DENIED: _____ REASON: _____

APPLICATION DATE: _____ APPROVED DATE: _____

NAME ID #: _____

DATE: _____ INITIALS: _____

_____ VOLUNTEER PACKET

_____ PRINTS (Live Scan)

_____ SPILLMAN CHECK

_____ ORIENTATION PACKET, VOLUNTEER RULES

_____ I.D. ISSUE DATE _____ EXPIRES _____

ALL VOLUNTEER PERSONAL JACKETS MUST CONTAIN

CHECK OFF: DOCUMENT:

_____ CDL CURRENT PRINTOUT—Copy Of Driver's License:

_____ LIVESCAN FINGERPRINTS- BACK GROUND: DATE SCANED _____ RETURNED _____

_____ COPY OF ISSUED VOLUNTEER I.D. CARD