

San Bernardino County Sheriff's Department

http://cms.sbcounty.gov/sheriff/Home.aspx

Volunteer Program Preliminary Application



PRINT OR TYPE ALL INFORMATION

Give application to a unit coordinator at a meeting or send to Volunteer Forces, 199 N. Hangar Way, San Bernardino, CA 92415 Fax (909) 252-4109 Email: volforces@sbcsd.org

CHOOSE ONLY O	NE PROGRAM				
Citizen Voluntee	r/Citizen Patrol				
Search & Rescue	e Citizen Volunteer				
☐ Explorer					
☐ Reserve Deputy	Sheriff	-			
Name				DOB	
	LAST		FIRST		DATE OF BIRTH
Address					
	STF	REET	CITY	STATE	ZIP
Mailing Address	STREET		CITY	STATE	ZIP
E-mail Address					
Cell Phone			Home Phone		
Driver's License #		State			
Have you ever app	lied to this Departm	ent for a position before	e? 🗌 Yes 🗌 No		
If yes, what position	າ?	What year?	<u></u>		
Have you ever bee	n?	☐ Convicted of a Fe	lony Convicted of a	Misdeme	anor
Check completion of the following: High School Diploma GED Certificate					
Re	eserve Training:	Level I Level I	Basic Post Certific	ate	
		MINIMUM REQUIRE	<u>MENTS</u>		
No felony convictions No pending misdemear Valid driver's license or	<u>-</u>	High school diploma or GED (explorer scouts excluded) Legal resident of the United States			
•	k reputation, medic	· · · · · · · · · · · · · · · · · · ·	partment to conduct a b al records, including info	•	•
Signature			Date		
Siç	gnature not required if subr	nitting via email.			

Sheriff's Division Use Only Interview of Volunteer Applicant

Interviewing Personnel			
Coordinator:	Unit Member:		
Coordinator:	Unit Member:		
 Interview Topics Attendance and participation requirements Purchase of uniforms and equipment Department standards (Criminal History, Drug III) Program standards (Training, Certifications, etc. Division/Unit Specific standards, requirements and account of the control of th	2.)		
Interviewer's Comments:			
Volunteer Unit	Recommendation		
Citizen Volunteer and Explorer Scout Applicants			
☐ Continue with Processing Place this form into completed application pack	ret .		
☐ Disqualify Coordinator letter to the applicant Forward this completed form to Volunteer Force	es		
Reserve Deputy Sheriff Applicants			
 Continue with Processing Requires division commander's approval Attach copy of qualifying certifications Submit to Volunteer Forces 			
☐ Disqualify Coordinator letter to the applicant Forward this completed form to Volunteer Force	es		
Division Con	nmander Review		
RESERVE DEPU	TY APPLICANTS ONLY		
☐ Accept for Additional Processing ☐ Disqua			
Division Commander Name:	Received Sent On		
Signature:	0.47		