



HUMBOLDT COUNTY SHERIFF'S OFFICE VOLUNTEER APPLICATION

Office Use Only

CLETS/CLEWS: _____
 RIMS: _____
 Jail: _____
 Livescan Verify _____
 By _____
 Date _____

* Incomplete applications will not be processed.

* Knowingly providing false information on this application will result in denial of volunteer privileges

Name:			Phone:		
Street Address:			City:		State:
Mailing Address (if different):			Email Address:		
Birth Date:	Place of Birth:	SSN:	Driver's License #:	State:	Exp Date:
Age:	Sex:	Height:	Eye Color:	Hair Color:	Race:
Driving Restrictions (glasses, daytime driving only, etc.):					

Please notate which division with Humboldt County Sheriff's Office you are interested in volunteering in:

- | | |
|---|---|
| <input type="checkbox"/> Sheriff's Citizens on Patrol (SCOP)* | <input type="checkbox"/> Coroner's Office |
| <input type="checkbox"/> Neighborhood Watch Program * | <input type="checkbox"/> Animal Shelter |
| <input type="checkbox"/> Office of Emergency Services (OES)* | <input type="checkbox"/> Sheriff's Office Chaplain* |
| <input type="checkbox"/> Operations Other (specify) _____ | <input type="checkbox"/> Search and Rescue |

*** The above division applicants require a livescan to be completed at Humboldt County Sheriff's Office.**

AKA's (Also Known As - Maiden Name, Married Name, Other Name(s) not listed above)

Are you currently employed?

Yes No

Employment History (List current and/or last two previous employers, including date of employment and job description):

How did you hear about this volunteer program?

Why do you want to volunteer for our department?

Please list specific skills or training that you have which would be beneficial to the division that you are applying to be a volunteer:

Please provide two personal references whom we may contact:

Name:

Address:

Phone Number:

1)

2)

Please list previous addresses that you have lived at within the last five (5) years:

1)

2)

3)

In case of an emergency notify:

Name:

Address:

Relationship:

Phone #'s:

Volunteer Applicant Acknowledgement

Please be aware that submitting an application does not guarantee your selection for a volunteer opportunity. Additionally, if you are chosen as a volunteer, you may be required to attend trainings and adhere to specific policies.

The volunteer position may require a DOJ/FBI Criminal Background Check (Livescan).

By signing below, you are permitting the Humboldt County Sheriff's Office to contact the individuals listed as your personal references and to verify any statement made on this application by checking civil and criminal records. Your signature also confirms that you have read and agreed to the Volunteer Applicant Acknowledgment.

Signature

Date