# SACRAMENTO POLICE DEPARTMENT VOLUNTEERS IN POLICE SERVICES (VIPS)



# Application of Interest

The Sacramento Police Department thanks you for expressing an interest in the Volunteers In *Police Services Program (VIPS)*. The VIPS provide a valuable service to the Police Department and community in promoting public safety. The department offers excellent opportunities in many areas of the department for citizens who are interested in Volunteering.

Volunteers are trained to perform duties that do not require the presence of a sworn Police Officer. This allows the sworn officers the ability to perform other public safety duties.

Typical duties of Volunteers include, but are not limited to; taking non-emergency reports, providing a visible presence during special events, work in administrative support positions, and patrolling neighborhoods in the official VIPS vehicle. Volunteers are placed in positions that best suit their area of experience and interests.

Volunteers often work with police reports or other confidential documents. As a result, all applicants are required to complete official application forms including a detailed background questionnaire. A background investigation is performed and applicants are fingerprinted.

Completing and returning the Volunteer Application is the first step to becoming a Volunteer for the Sacramento Police Department. Your application will be reviewed and a department representative will contact you with additional information on the next phase of the application process

Please complete the attached forms and return them to:

Sacramento Police Department Attn: Volunteer Coordinator 5770 Freeport Blvd. Ste. 100 Sacramento, Ca. 95822

Or, you may email the completed application to: volunteer@pd.cityofsacramento.org

#### SACRAMENTO POLICE DEPARTMENT VOLUNTEERS IN POLICE SERVICES (VIPS) APPLICATION

| SECTION 1: PERSONAL  |                           |               |                    |                      |                    |  |
|--|---------------------------|---------------|--------------------|----------------------|--------------------|--|
| YOUR FULL NAME   |                           |               |                    |                      |                    |  |
| LAST   |                           | FIRST         |                    | MIDDLE               |                    |  |
| OTHER NAMES, INCLUDING NICKNAMES, YOU HAVE USED OR BEEN KNOWN BY |                           |               |                    |                      |                    |  |
| ADDRESS WHERE YOU  | RESIDE                    |               |                    |                      |                    |  |
| STREET   |                           |               |                    | APT / UNIT           |                    |  |
| CITY   |                           |               |                    | STATE                | ZIP                |  |
| MAILING ADDRESS, IF D  | DIFFERENT FROM ABOVE      |               |                    |                      |                    |  |
| CONTACT NUMBERS  |                           |               |                    |                      |                    |  |
| номе ( ) -   | work( ) -                 | EXT           | MOBILE (           | -                    |                    |  |
| EMAIL ADDRESS  |                           |               |                    |                      |                    |  |
| HOME   |                           |               | BUSINESS           |                      |                    |  |
| BIRTHDATE  |                           |               |                    |                      |                    |  |
| Do vou have anv p  | hysical conditions, whi   | ch would prev | ent vou from perfo | rming the specific ( | duties of the job? |  |
|  | <b>0</b>                  | ľ             | <b>, 1</b>         | 8                    | 9                  |  |
|  |                           | _             |                    |                      |                    |  |
|  | portation? Yes 🗌 No 🗌     |               |                    |                      |                    |  |
| -  | Division or Unit in the I |               | iere you are       |                      |                    |  |
| interested in volun  | teering? If so, please    | describe.     |                    |                      |                    |  |
|  | SE                        | CTION 2: A    | VAILABILIT         | Y                    |                    |  |
| What Days and Hou  | ırs are you available     |               |                    |                      |                    |  |
| MONDAY   |                           | FROM          | Т                  | °O                   |                    |  |
| TUESDAY  |                           | FROM          |                    | °O                   |                    |  |
| WEDNESDAY  |                           | FROM          |                    | °O                   |                    |  |
|  |                           |               |                    |                      |                    |  |
| THURSDAY   |                           | FROM          |                    | °O                   |                    |  |
| FRIDAY   |                           | FROM          |                    | °O                   |                    |  |
| SATURDAY   |                           | FROM          | Т                  | ĨO.                  |                    |  |
| SUNDAY   |                           | FROM          | Т                  | O.                   |                    |  |
| Comments:  |                           |               |                    |                      |                    |  |

# **SECTION 3: SKILLS**

List any skills (i.e. typing, public speaking, telephones) you possess that would help us to place you in an appropriate volunteer position. If typing is listed, indicate net words per minute.

Computer Experience: List computer software programs where you have experience.

### **SECTION 4: WORK EXPERIENCE**

| PRESENT/MOST RECENT EMPLOYER | Title:              |
|------------------------------|---------------------|
| Name:                        | Duties:             |
| Address:                     |                     |
| City/State/Zip:              |                     |
| Phone:                       |                     |
| Dates Worked: TO             |                     |
| Supervisor:                  |                     |
| May We Contact: YES NO       | Reason for leaving: |
|                              |                     |
| FORMER EMPLOYER              | Title:              |
| Name:                        | Duties:             |
| Address:                     |                     |
| City/State/Zip:              |                     |
| Phone:                       |                     |
| Dates Worked: TO             |                     |
| Supervisor:                  |                     |
| May We Contact:              | Reason for leaving: |

## **SECTION 5: VOLUNTEER EXPERIENCE**

Do you have any previous volunteer experience?

If "Yes", indicate your volunteer experience.

| ORGANIZATION &<br>ADDRESS | DATES WORKED      | APPROX.<br>HRS./WK | DUTIES |
|---------------------------|-------------------|--------------------|--------|
|                           | / / to / /        |                    |        |
|                           | / / to / /        |                    |        |
|                           | / / to / /        |                    |        |
|                           | / / <b>to</b> / / |                    |        |

| SECTION 6: EDUCATION AND TRAINING  |                              |  |  |  |  |  |
|--|------------------------------|--|--|--|--|--|
| Are you a High School Graduate or passed a GED test? YES NO                          |                              |  |  |  |  |  |
| NAME OF COLLEGE, UNIVERSITY<br>BUSINESS, CORRESPONDANCE,<br>TRADE, OR SERVICE SCHOOL | MAJOR COURSE OF STUDY        | DIPLOMA, CERTIFICATE, DEGREE<br>RECEIVED |  |  |  |  |
|  |                              |  |  |  |  |  |
|  |                              |  |  |  |  |  |
|  |                              |  |  |  |  |  |
| Additional information you feel is r   | elevant to your application: |  |  |  |  |  |
| I heard about the Sacramento Police Department Volunteer program through:            |                              |  |  |  |  |  |
| I hereby certify that all statements and answers on this form are true and complete  |                              |  |  |  |  |  |
| Signature:   | <b>Date:</b> / /             | /  |  |  |  |  |