

HOPEWELL POLICE VOLUNTEER APPLICATION

When you have completed the application, contact George Baker at 895-4724 or bakerhaus2@comcast.net for return instructions.

NAME _____

ADDRESS _____

Home Phone _____ Mobile or Other Phone _____

Email address _____

Present place of employment _____

Date of Birth _____ Place of Birth _____

Race ____ Sex ____ Height ____ Weight ____ Hair Color ____ Eye color ____

Did you serve in the Military? _____ Are you a United States citizen? _____

Social Security Number _____ (for use in background check)

Valid Virginia Driver's License Number _____

Do you have physical conditions that will limit your Police Volunteer participation? _____
If yes, please explain briefly:

Have you ever been charged with any criminal offense? _____ If YES, please explain _____

Have you been charged with a traffic violation within the last five years? _____ If YES, please explain _____

Have you ever attended a citizens' police academy? _____ If so, please describe: _____

How did you hear about the Hopewell Bureau of Police Volunteers? _____

Why do you wish to become a Hopewell Bureau of Police Volunteer?

(Use reverse side of this page if necessary)

I certify that the information I gave on Page One is truthful and accurate:

SIGNATURE

DATE

AUTHORIZATION FOR RELEASE OF INFORMATION
Hopewell Police Volunteer Academy

I, _____, do hereby authorize a review of and full disclosure of all records concerning me to any authorized agent of the Hopewell Bureau of Police, whether said records are of public, private or confidential nature.

The intent of this authorization is to give my consent for full disclosure of any and all records concerning criminal activity. This may include, but is not limited to: criminal histories, driving records, traffic accidents, arrest reports, offense reports and any official documents.

I understand that any information obtained by a background investigation which is developed directly or indirectly, in whole or in part, upon this release of information will be considered in determining my suitability for the Hopewell Police Volunteer program. I also certify that whoever may furnish such information concerning me shall be held harmless for giving this information; and I hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

I also authorize the release of my name and full disclosure of all records concerning me to verify my past and future applications with other law enforcement agencies.

A photocopy of this release will be valid as an original thereof, even though said photocopy does not contain my original signature.

SIGNATURE

DATE