



STANTON POLICE SERVICES

Volunteer in Policing – VIP

APPLICATION PACKAGE



Thank you for your interest in the City of Stanton Police Services “Volunteer’s In Policing” (VIP) Program. By working hand in hand with community members, we can improve communications with Stanton residents and create a stronger police presence throughout the city of Stanton.

There are many different reasons to volunteer. Some people may enjoy the camaraderie of working with others who want to do something to help fight crime, some want to give something back to the community, while others want to make a difference and have a positive impact on their community.

By joining VIP, you will be joining a special group of volunteers working together with Sheriff Deputies and Sheriff Professional Staff to improve the City of Stanton while giving something back to the community.

VOLUNTEER REQUIREMENTS

- Good moral character
- No felony convictions
- Ability to get along with others
- Current US citizen
- Dependable

ADDITIONAL REQUIREMENTS FOR “VIP” MEMBERS INCLUDE:

- At least 50 years of age
- Good physical condition. Provide letter of satisfactory health
- Valid California driver license or California ID
- Must commit to a Minimum of 4 hours per week
- Pass a background investigation

WHAT WE WILL PROVIDE YOU

- VIP Identification Card
- Polo Shirt
- Opportunity to work with others in law enforcement
- Sense of satisfaction from serving the community
- Annual recognition event for all volunteers

PLEASE RETURN COMPLETED APPLICATION, MEDICAL WAIVER, VOLUNTEER AGREEMENT, AND ALL REQUIRED DOCUMENTS TO: **STANTON POLICE SERVICES, 11100 CEDAR ST., STANTON, CA 90680**

Application Package Con't

APPLICATION PROCESS

Because there are a limited number of volunteer positions, selection will be based on qualifications and skills. To ensure that our volunteers meet the high standards of the Orange County Sheriff Dept. and the City of Stanton, we ask that you complete the attached application and forms and return them to Stanton Police Services, Attn: VIP Coordinator, 11100 Cedar St., Stanton, CA 90680. Upon the satisfactory preliminary review of your application you will be contacted to schedule an oral interview.

After the successful completion of your oral interview, you will be scheduled for a background investigation and fingerprinting. Upon the successful completion of your background investigation, VIP will receive an orientation and training. If you have any questions about the application process, please call 714-889-7860.

We appreciate your interest in volunteering at Stanton Police Services. We look forward to forging a new relationship between our citizens and law enforcement through the VIP Program.



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REQUIRED DOCUMENTS



The following should be mailed or brought to our office, 11100 Cedar St., Stanton, CA 90680. If you have any questions, please feel free to call our office at 714-889-7860.

- Completed Employment Application
- A copy of your birth certificate
- A copy of your social security card
- A copy of your valid CA driver's license or CA ID card
- Proof of automobile liability insurance (if operating a motor vehicle in CA)
- Volunteer Medical Waiver
- Volunteer Agreement

ACKNOWLEDGEMENT

I have received a copy of this form and understand that it is my responsibility to arrange for all of the documents above which apply to me. Failure to promptly arrange for these documents will result in my application being dropped from consideration for this position.

Volunteer Applicant Signature

Date



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EMPLOYMENT APPLICATION

Please **PRINT** or **TYPE** your answers legibly.

NAME (LAST, FIRST, MIDDLE)

ADDRESS CITY ZIP CODE HOME PHONE

CELL PHONE E-MAIL ADDRESS

DRIVER'S LICENSE/CAL ID # / EXP DATE

Have you ever been convicted of a felony? Yes _____ No _____. If yes, please attach a written explanation.

Do you have any physical condition, which may limit your ability to perform the job you a applying for? Yes _____ No _____. If yes, please list.

How did you learn about the VIP Program? Please circle: Friend Newspaper Other _____

College Attended If any _____

Degree Earned or Course Study _____

Fields of Employment/Positions Held _____

Previous Volunteer Experience _____

Social Organizations or Clubs _____

Special Interests or Hobbies _____

Employment Application Con't

EMERGENCY CONTACT INFORMATION

| | | | |
|------|--|--------------|--|
| NAME | | RELATIONSHIP | |
|------|--|--------------|--|

ADDRESS

| | | | |
|------------------|-------------|--------|----------------|
| HOME TELEPHONE # | CELL PHONE# | WORK # | E-MAIL ADDRESS |
|------------------|-------------|--------|----------------|

| | | | |
|-------------------------|--|--------------|--|
| ALTERNATE CONTACT: NAME | | RELATIONSHIP | |
|-------------------------|--|--------------|--|

| | |
|-------------|----------------|
| TELEPHONE # | E-MAIL ADDRESS |
|-------------|----------------|

I am aware that the City of Stanton and the Orange County Sheriff Department may obtain public records regarding me for employment/volunteer purposes including but not limited to evaluation for employment/assignment as well as conducting investigations into possible misconduct. I acknowledge the term public record as used herein is limited to records of: arrest, citations, indictment, convictions, civil judicial action, tax lien or outstanding judgment.

I have read the above statement and agree to participate. _____ (Please Initial)

I hereby waive the right to make any claim against the City of Stanton, the Orange County Sheriff-Coroner Department, its officials, employees, or volunteers for any injuries, damages, charges, or expenses, including attorney's fees which might be sustained as a result of my participation or transportation therewith in the above activities. This waiver is given in partial consideration for permission granted by the City of Stanton to participate in the activity or activities. I hereby grant the City of Stanton and the Orange County Sheriff Department the right to use my photograph (s) or such likeness in connection with any City affiliated publication or promotion. I understand that I will receive no compensation for this Permission to Use Photographs and that this Permission is free of any limitations on the City or County to use my likeness for City or County business.

I understand that as long as I am acting as a volunteer for the Volunteers in Policing Program (VIP) or any of its related programs, I will perform my assignments in a professional manner, including speech, driving regulations and personal actions. **I will not disclose any confidential information given to me by any staff member. I realize that a violation of these ethics will result in my termination as a volunteer for the City of Stanton and Orange County Sheriff Department.**

| | |
|----------------------------------|------|
| SIGNATURE OF VOLUNTEER APPLICANT | DATE |
|----------------------------------|------|



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VOLUNTEER AGREEMENT

I agree and understand that any work I perform on behalf of Stanton Police Services will be provided on a voluntary basis and that I do not expect payment or other compensation for performing such work. I understand and agree that a volunteer position does not constitute an employee-employer relationship with Stanton Police Services, Orange County Sheriff Department or City of Stanton and the Stanton Police Services may terminate my volunteer status at any time. Stanton Police Service, Orange County Sheriff, and The City of Stanton are under no obligation to reimburse me for training or work related expenses. I realize the Stanton Police Services has certain expectations of me as a volunteer and if I cannot keep my volunteer commitment I will notify my supervisor in advance of my agreed upon reporting time.

I acknowledge and accept the obligation to serve the public while maintaining the highest ethical standards in personal and official conduct.

I have read and understand and will comply with Stanton Police Services and Orange County Sheriff policies regarding the following areas:

Confidential Information: Official business of this department is confidential. The names, nature of crimes, investigative discussions, and casual remarks regarding persons or incidents are not to be discussed outside of the department. Volunteers shall discuss or give official information only to persons for whom the information is intended and as directed by supervisors or as required by law. No information shall be provided to the public or the press except within the guidelines of the department. Failure to respect confidentiality will result in immediate termination.

Fraternization: Members of the department are prohibited from fraternizing with, engaging in the service of, accepting services from, or performing favors for any person in the custody or recently released from the custody of the department. Any member contacted by, or in behalf of, a recently discharged prisoner shall immediately report this to a supervisor.

Identification: You will be issued an identification card. You will be held responsible for and must report its loss to your supervisor immediately.

Injuries: You should report any injuries on the job to your supervisor.

Volunteer Applicant Signature

Date



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MEDICAL WAIVER

I, _____, understand that I must be in satisfactory physical condition to perform the duties of the Stanton Police Services VIP Program. These duties include but are not limited to a 4 hour shift with:

- Sitting for long periods of up to 4 hours
- Light Lifting (20lbs.)
- Moderate walking
- Driving a vehicle
- Standing for extended periods (copying, faxing)

By signing this medical waiver, I acknowledge that I am in adequate physical condition and have no medical limitations that would prohibit my participation in the VIP Program.

Volunteer Applicant Signature

Date

I, _____, M.D., am unaware of any conditions or restrictions which would prohibit my patient from participating in any of the activities listed above.

Physician Signature

Date

Address

Phone