



FRESNO POLICE DEPARTMENT VOLUNTEERS IN POLICE SERVICE (VIPS) APPLICATION

Please print or type; you may include a resume or additional pages, as needed

Name: Mr. or Ms. _____
(Last) (First) (Middle)

Previous Names (if applicable) _____

Address: _____
(Street) (City) (State) (Zip Code)

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Date of Birth: _____

California Drivers License Number: _____ Expires: _____

Home Email Address: _____

List residences for the last five years. List your current address first:

1. _____
(Street, city, state, zip code and length of time at residence)

2. _____
(Street, city, state, zip code and length of time at residence)

Employment history for the last five years, beginning with the most recent position:

1. _____
(Company name, your position, employer telephone number and length of employment)

2. _____
(Company name, your position, employer telephone number and length of employment)

Work Email Address: _____

Are you bilingual? Yes _____ No _____ If yes, what is your second language? _____

Second language proficiency - **Speak:** (Circle one) Fair Good Excellent; **Read:** (Circle one) Fair Good Excellent

***A RESUME MAY BE SUBMITTED IN LIEU OF, OR IN ADDITION TO, THE EDUCATION AND EXPERIENCE SECTIONS BELOW**

Education and training: _____
(List highest level of education and any specialized training received, including military)

_____ If you are a current student, what is your expected graduation date: _____

Describe specific skills and/or experiences you have that would be helpful as a volunteer (include information such as knowledge of administrative/office functions, software programs, financial management, event planning, translation, etc.):

I am applying for *any* opportunity relevant to my skills, or: _____
(List specific position)

Approximate number of hours per week you can volunteer: _____

List days/hours available: _____

List one personal or professional reference: _____
(Full Name)

(Address) (City) (State) (Zip Code) (Phone)

Background Check: I authorize the Fresno Police Department to conduct a background investigation; including a check of criminal records and other information that may be of a confidential or privileged nature. I authorize the Police Department to use a copy or facsimile of this form to be considered the same as the original for the purposes of the background investigation. List any arrests—describe the charges, date(s) of arrest, and disposition of the case—*excluding* traffic tickets:

How did you hear about Volunteers In Police Service (VIPS)? () Citizen Corps () Referral () C.P.A. () If other, explain:

In case of emergency, contact: _____
(Name, address, phone number and relationship)

Signature: _____ Date: _____



FPD Volunteer Services – FPDVolunteerUnit@Fresno.gov
Fresno Police Department
P. O. Box 1271
Fresno, California 93715
(559) 621-2328 – FAX (559) 621-6348

FRESNO POLICE DEPARTMENT VOLUNTEER RELEASE

Name: _____
(Last) (First) (Middle)

Background Check: I authorize the Fresno Police Department to conduct a background investigation; including a check of criminal records and other information that may be of a confidential or privileged nature. The Department may also require a polygraph exam, interviews and other methods to evaluate applicants at its discretion. I authorized the Police Department to use a copy or facsimile of this form to be considered the same as the original for the purposes of the background investigation.

Check any that apply. I have been: (____) Arrested (____) Convicted of a felony (____) Convicted of a misdemeanor

On a separate page, provide details related to any arrest (charges, dates of arrest, and disposition)—*excluding* traffic tickets.

Release of Liability: I, the individual named above, hereby request permission to participate in the Fresno Police Department's Volunteer program. I understand that training and/or assignments may involve physical activities, which include a potential risk of personal injury and/or personal property damage; and I make this request with full knowledge of these risks. I certify that I am able to perform the assignment I am applying for, and will disclose any medical conditions which may affect my safety, the safety of others, or my ability to perform my duties. I agree to hold the City of Fresno, FPD, Fresno Citizen Corps Council and its directors, and their agents and personnel, harmless from any and all claims, actions, suits and/or injury that I may suffer which may arise as a result of my participation in any volunteer program.

At-Will Status: I agree to follow the rules established by my supervisor(s), and to exercise reasonable care while participating in the volunteer program. I understand that I am an at-will volunteer, without vested property rights in my position as a citizen volunteer and I may be released at any time without cause and without right of appeal. If I am released, all program identification cards and other equipment, uniforms, keys, etc. provided by the program must be surrendered immediately.

Photographs and Contact Information: I authorize the use of any photograph taken in connection with my participation in the program without prior approval or compensation. My phone numbers, email address and/or other contact information may be entered into record-keeping and/or automatic notification systems for program management and emergency purposes.

By executing this form, I certify that I have read this release in its entirety, understand all of its terms and have had any questions regarding the release or its effect satisfactorily answered. I understand that my submission of this application, whether mailed; or sent electronically via email or faxed, shall have the same force and effect as an original. I sign this release freely and voluntarily.

Signature: _____ Date: _____

Parental approval is *mandatory* for those under 18 and must be indicated by a signature below. Parents are responsible for the transport and safety of their minor children before and after the hours of their volunteer assignment.

Signature of parent/guardian: _____ Date: _____

FRESNO POLICE DEPARTMENT VOLUNTEER CONFIDENTIALITY AGREEMENT

1. Volunteers shall not disclose or allow access to information contained in or obtained from Local Summary Criminal History Information, records maintained by State Department of Justice, or material, documents and information received from the Federal Bureau of Investigation or any other agency of State or Federal government, unless such disclosure or access is authorized by law and approved by the appropriate supervisor(s).
2. Volunteers shall not use *any* information derived from Fresno Police Department sources or records for personal gain or use, except as authorized by law or Department policies and procedures.
3. Volunteers shall not permit any person to receive information connected with the operation of the Fresno Police Department without permission of the Police Chief or as otherwise provided by law or Department policies and procedures.
4. Volunteers shall not disclose to anyone the fact or the nature of any investigation, except as provided by law or Department policies and procedures.
5. Volunteers shall not give any unauthorized person any information concerning the location of records, weapons, ammunition, the number of officers on duty, shift assignment or patrol beat areas.
6. Serving the public provides each of us with a great responsibility. Consequently, there can be no compromise in the requirement for all volunteers to follow the Fresno Police Department policies and procedures on records and information and this "Notice of Confidentiality of Department Information." Any violations of said requirements shall subject volunteers to disciplinary action or termination—all volunteers serve at the pleasure of the Department.
7. Penal Code Section 13303, relating to State Summary Criminal History Information, provides as follows:
Any person authorized by law to receive a record, or information obtained from a record, who knowingly furnished the record or information to a person who is not authorized by law to receive the record or information is guilty of a misdemeanor.
8. Penal Code Section 13302, relating to Local Summary Criminal History Information, provides as follows:
Any person of the local criminal justice agency who knowingly furnishes a record, or information obtained from a record, to a person who is not authorized by law to receive the record or information is guilty of a misdemeanor.
9. Penal Code Section 13304. *Unauthorized person who buys, receives or possess information is guilty of a misdemeanor.*

I have read, understand and agree to abide by the terms of the above "Notice of Confidentiality of Department Information."

Volunteer's Full Name (Print): _____

Volunteer Signature: _____ Date: _____

Name of Witness (Print): _____

Witness Signature: _____ Date: _____

FRESNO CITY RELEASE, WAIVER AND INDEMNITY AGREEMENT FOR VOLUNTEER SERVICE

NAME: _____ DATE: _____

PROGRAM AFFILIATION: _____ VOLUNTEERS IN POLICE SERVICE (VIPS) _____

Volunteer is providing voluntary services to the City of Fresno pursuant to his/her volunteer application. In consideration of permitting Volunteer to serve, the Volunteer agrees to indemnify, hold harmless and defend City of Fresno and its officers, officials, agents, employees and other volunteers from and against any and all loss, liability, costs and damages (whether in contract, tort or strict liability, including but not limited to personal injury, death at any time and property damage) incurred by City of Fresno or any other person, and from any and all claims, demands and actions in law or equity (including attorney's fees and litigation expenses), arising or alleged to have arisen directly or indirectly out of the negligence or willful misconduct of Volunteer related to his/her voluntary service to the City of Fresno. IT IS THE INTENTION OF VOLUNTEER (INCLUDING THAT OF PARENT/GUARDIAN) BY THIS DOCUMENT, TO HAVE AGREED TO THE ASSUMPTION OF THE RISK FOR PERSONS SERVING AS VOLUNTEERS TO THE CITY OF FRESNO AND HE/SHE DOES HEREBY VOLUNTARILY RELEASE THE CITY OF FRESNO, AND ITS OFFICIALS, OFFICERS, EMPLOYEES, AGENTS AND VOLUNTEERS FROM, AND DOES WAIVE ANY RIGHT OF ACTION OR CLAIM FOR, ANY LIABILITY FOR PROPERTY DAMAGE CAUSED BY ANY OF THEIR NEGLIGENCE.

The Volunteer, for him/herself, his/her heirs, executors, administrators or assigns agrees and understands that he/she has been designated a "Volunteer" in accordance with City of Fresno Resolution No. 2005-157 and is deemed to be an employee of the City of Fresno solely for the purpose of Workers' Compensation coverage, and agrees and understands that his/her sole and exclusive remedy for personal injury or death while performing services as a volunteer shall be a claim for Workers' Compensation benefits in accordance with the laws of the State of California. Further the Volunteer, for him/herself, his/her heirs, executors, administrators or assigns waives and relinquishes any interest or right to claim any interest in any other City of Fresno employment benefits offered employees of the City by reason of any common law employee rights theory or similar employment entitlements of any kind. The Volunteer agrees that the contents of this document shall be binding upon his/her heirs, executors, administrators and assigns.

The Volunteer acknowledges that he/she (i) has read and fully understands the content of this Release, Waiver and Indemnity Agreement; (ii) has been fully and completely advised of the potential dangers incidental to providing the voluntary service to the City of Fresno; (iii) has had the opportunity to consult with his/her attorney, in his/her discretion; and (iv) is fully aware of the legal consequences of signing this document.

Signature of Volunteer

Date

Signature of Volunteer's Parent or
Legal Guardian (if minor)

Date

Witness

Date