# DeKalb County Police Department's Volunteers In Patrol (VIP) Application

Name (Last, First, Middle)	Race/Sex	Date of Birth
Home Address (*You must live in DeKalb County)		Home Phone/Mobile Phone
How long have you lived at the ab		Police Precinct do you live within?
EMPLOYMENT: [List all for th	ne last five (5) years]	
Present Employer	Supervisor	Your Title
Address	Phone	Date Hired
Previous Employer	Supervisor	Your Title
Address	Phone	Dates of Employment
Previous Employer	Supervisor	Your Title
Address	Phone	Dates of Employment
EDUCATION.		

**EDUCATION:** 

List the names and addresses of schools you have attended, the year of completion, degree earned, and address of the institution. (GED, high school, college, and/or graduate school) [If necessary, use a separate sheet of paper.]

### **BACKGROUND:**

List any traffic violations that you have been convicted of in the last two (2) years. [If necessary, use a separate sheet of paper.]

List any and all arrests, convictions, or citations, other than traffic violations, that you have ever experienced. [If necessary, use a separate sheet of paper.]

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## **EMERGENCY CONTACT:**

Name, Address, Relationship, Home and Work Phone Numbers [If necessary, use a separate sheet of paper.]

## MEDICAL HISTORY:

Medical information is needed in the event of an emergency. List any medications you are currently taking and the reason for which they are used, and any other medical information you feel the DeKalb County Police Department should now.

[If necessary, use a separate sheet of paper.]

### **CERTIFICATION & SIGNATURE:**

#### Please review your answers carefully and read the statement below before signing this application!

I hereby certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers to questions. I understand and acknowledge that any omission or false statement on this application shall be sufficient cause for rejection or dismissal from the DeKalb Police Department's Volunteer Program. I further understand and acknowledge that the purpose of the Volunteer Program is not to train the public to perform as police officers and that all Volunteer Programs are **NON-CONFRONTATIONAL.** I acknowledge that through my participation I may be privy to confidential information that is not available to the general public and any release of that information may result in civil suit and/or criminal charges and/or jeopardize the activity and safety of law enforcement officials. I shall abide by the policies, procedures, rules and regulations set forth by the DeKalb Police Department to govern participation in the Volunteer Program. I hereby grant the DeKalb Police Department and its agents my express permission to conduct a thorough background investigation that may include, but not be limited to fingerprinting, criminal history, employment history, personal references, and otherwise personal and confidential information.

Signature

Date