

Mesa County Sheriff's Office Volunteer Application



Thank you for your interest in donating your time and skills to our community. Before completing this application, please consider the following about the Mesa County Sheriff's Office selection process:

In the Citizen's view, Volunteers within the Office represent the Sheriff, the Office, and the County Commissioners.

The Office has established the personnel standards, which are higher than encountered in most employment situations, this is also true in volunteer positions.

The higher standards are necessary because of the nature of the work and the legal obligations of the Sheriff.

While it is not our intent to discourage applicants, it is important that you understand why we require the level of personal information this application requests.

Again, Sheriff Todd Rowell and the members of the Sheriff's Office appreciate your interest and willingness to help us in our efforts toward partnerships between citizens and law enforcement for a better community.

PLEASE COMPLETE EVERY SECTION. IF QUESTIONS DO NOT APPLY TO YOU, WRITE IN N/A. IF MORE SPACE IS REQUIRED, PLEASE ATTACH A PAGE. ALL INFORMATION IS SUBJECT TO VERIFICATION. COMPLETE AND THOROUGH BACKGROUND CHECKS WILL BE PART OF EVERY APPLICATION.

Release of Claims, Indemnity, Agreement, and Covenant Not to Sue

1. I am aware that the work of the Mesa County Sheriff's Office is inherently dangerous and that I may be subject to the risk of death, personal injury, or damage to my property by accompanying and/or providing support to members of the Sheriff's Office during the performance of their official duties. I freely, voluntarily and with such knowledge, assume the risk or risks associated with such activities, including but not limited to: death, personal injury, property damage arising from or in any way connected with the use of weapons, unlawful acts or forcible resistance, law violators, or suspected law violators, assault, riot, breach of peace, fire, explosives, gas, electrocution, the escape of hazardous substances, or the sustaining of injury in any other way while engaged with the Mesa County Sheriff's Office in volunteer activities.
2. I release Mesa County, its public officials and employees and their sureties, all members of the Mesa County Sheriff's Office and their sureties, and each of them from any and all liability, claims, demands, or actions or causes of actions whatsoever arising out of any damage, loss or injury to me or my property while accompanying members of the Mesa County Sheriff's Office during the performance of their official duties or while on the premises of the Sheriff's Office, whether such loss, damage, or injury results from the negligence of Mesa County, its public officials and employees and their sureties, any members of the Mesa County Sheriff's Office and their sureties and each of them, or from any other cause.
3. For myself, my heirs, personal representatives, executors, administrators and assigns to defend, indemnify and covenant not to sue the county of Mesa, its employees, any members of the Mesa County Sheriff's Office, sureties and each of them, against any and all manner of actions causes of actions, suits, debts, claims, demands, damages or liability or expenses of every kind of nature incurred or arising by reason of actual or claimed negligent and wrongful act or omission by me or by them while engaged in a volunteer activity or while accompanying any member or members of said Mesa County Sheriff's Office during the performance of their duties.

I hereby represent that I have carefully read and understand the content of this document and sign the same of my own free will.

CAUTION: READ THIS DOCUMENT BEFORE SIGNING!

Signature of Volunteer

Date

Signature Coordinator of Volunteer Services

Date

Applicant Information

Name: _____

Date of Birth: _____ Social Security Number: _____

Personal Phone: _____ Work Phone: _____

Address: _____

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

Educational History (check one):

High School/GED Some College College Degree or Above Specialized Program

Work History: Please list Employer, Job Title, and Dates Employed

Volunteer History: Please list Organization, Role, and Dates

Specialized Skills and/or Hobbies: Please list skills such as clerical, second language, public speaking, or working with special populations. Please also list HOBBIES and/or things you enjoy doing.

Personal Response

Please describe your reasons for desiring a volunteer position with the Mesa County Sheriff's Office.

References

Please list FOUR (4) references, including at least one employment or professional, that we may contact.

Name: _____

Mailing Address: _____

Phone: _____

Nature of Relationship: _____

Name: _____

Mailing Address: _____

Phone: _____

Nature of Relationship: _____

Name: _____

Mailing Address: _____

Phone: _____

Nature of Relationship: _____

Name: _____

Mailing Address: _____

Phone: _____

Nature of Relationship: _____

Driver's License and Vehicle Information

Driver's License Number: _____ State of Issue & Expiration Date: _____

Have you ever had a license revoked or suspended or been denied auto insurance? Yes No

If yes, please explain including dates, reasons, etc.:

Do you own a car? Yes No

Do you have current auto insurance? Yes No

Traffic and Criminal Arrest Information

List each occurrence for which you received a traffic or criminal summons and/or that you were arrested. Please include date, location, offense, and disposition:

Civil Litigation

Have you ever been a defendant of a lawsuit or received notice of a claim to be sued? If yes, please detail:

Health and Medical Information

Please describe any disabilities, handicaps, chronic illnesses or physical limitations which might affect your ability to perform volunteer work.

Liquor and Drug Use

Please describe your use of intoxicating liquor: _____

Please describe your most current use of marijuana and/or any drugs not prescribed by a physician:

Emergency Contacts

At least one emergency contact is required. Emergency contact(s) will be notified in the case of an emergency.

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Volunteer Name: _____ Signature: _____

Confidentiality Release

I agree to refrain from repeating to any outside sources any confidential information obtained while I am engaged as a volunteer. Details concerning victims, suspects, or crimes investigated are privileged information and not to be shared with anyone other than a current employee of the Mesa County Sheriff's Office.

I understand breaching either the confidentiality of the victim or the office would be cause for immediate discharge from the volunteer program.

Signature of Volunteer

Date

MCSO Staff Member

Date