Volunteer Program – General Requirements

Applications are accepted for Volunteer/Intern positions within the City of Citrus Heights and the Citrus Heights Police Department. Applicants will be working in a highly confidential environment and would need to abide by the following requirements:

- Be at least 18 years old
- Make a one (1) year commitment to the City of Citrus Heights
- Be able to volunteer for a minimum of twelve (12) hours a week
- Volunteer for at least two (2) community events representing the City or Police Department
- Must be in good health and without physical condition(s) that will endanger themselves or another member of the City of Citrus Heights
- Be of good character and possess good moral habits
- Successfully pass a background investigation including but not limited to a criminal history check, DMV history check, and references

Additional information:

- Volunteers are not eligible for salaries, benefits, or other compensation
- Volunteers are covered under the City's workers' compensation insurance program and must sign an acknowledgement they have received this information
- The Citrus Heights Police Department generally disqualifies any individual who has:
 - Been convicted of a felony or any offense that would qualify as a felony under California statutes
 - Used illegal marijuana in the past three years
 - o Sold any illegal drug or substance or prescription medication illegally
 - Used illegal or dangerous drugs in the past ten years
 - o Been arrested for any crime or charged with a major traffic offense
 - Had a suspension of a license or been convicted of driving without insurance during the past year
 - Lied during any part of the application process
 - Had regular association and/or contact with family or friends who have a criminal background
 - Been determined to be detrimental due to any other factors to the City of Citrus Heights by the Volunteer Coordinator or Support Services Manager
- There is no appeal process for applicants who are not selected for the program

By signing below, you are attesting you have reviewed the above general requirements and would like to continue with the process. Please return this document with your completed application packet. Once we receive your completed application packet, we will be in contact with you.

Statement of Confidentiality and Hold Harmless Waiver

| Statement of Confidentiality and Hold Harl | illiess walvel |
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| I, | con for rejection of this application equest former employers, personal agencies to answer any and all position and do hereby hold such cord. I further hold harmless and |
| I understand I do not have the right to continue my volunteer status or Volunteer/Intern if terminated. I understand I am not an employee of the department thereof and am not eligible for any compensation or benefits of a | City of Citrus Heights or any |
| I understand and agree that in the performance of my duties as a Volunte Heights and/or Citrus Heights Police Department, I will hold all names department in the strictest confidence. I understand there can be no comp Volunteers/Interns to follow the City of Citrus Heights or the Citrus Heights procedures on records, information and this "Volunteer/Intern Statement of | and information regarding the romise in the requirements for all solice Department policies and |
| I understand I will be provided with copies of all Departmental policies on cosuch policies. | onfidentiality, and I must abide by |
| Any violations of this agreement shall subject the Volunteer/Intern to terprosecution. | mination and possible criminal |
| I shall not permit any person to receive information connected with the opera Department without permission of the Police Chief or as otherwise provided by procedures. | |
| I shall not disclose to anyone the fact or the nature of any investigation except policies and procedures. | as provided by law or Department |
| I shall not give any unauthorized person any information concerning the I ammunition. | ocation of records, weapons, or |
| I hereby voluntarily release, discharge, waive, and relinquish all claims again officials, governing bodies, officers, employees, personnel, volunteers, and demands that I, my heirs, guardians, legal representatives or assignees not bodily injury, negligence, personal injury, accident, emotional distress, proresulting from my participation in these volunteer activities or services. | agents from all actions, claims, ow have or may hereafter have |
| Applicant Signature: | Date: |
| Volunteer Coordinator Signature: | Date: |

Volunteer/Intern Qualifications

- 1. Interested citizens must complete a Volunteer/Intern application and submit it to the Volunteer Coordinator at the Citrus Heights Police Department.
- 2. Applicants must be at least 18 years of age and possess an education equivalent to a high school diploma.
- 3. Applicants must complete the Citizen's Police Academy within 12 months of obtaining volunteer status. Exceptions may be made at the discretion of the Chief of Police or designee. (This is for applicants for the Citrus Heights Police Department.)
- 4. Applicants must be willing to commit to a minimum of twelve (12) hours per week.
- 5. Applicants must be willing to commit to a minimum of one (1) year of service.
- 6. Applicants must participate in at least two (2) "special events" per year.
- 7. Applicants must fill out a Personal History Statement to allow the Citrus Heights Police Department to conduct a background investigation. Applicants will not be considered if they have been convicted of a felony, a crime of violence, or any misdemeanor (except minor traffic violations) in the past three (3) years and comply with Lexipol Policy #1000, Recruitment and Selection requirements. Applicants will be fingerprinted to check for criminal history.
- 8. Applicants should be of good moral character and reputation.
- 9. Applicants must be able to demonstrate good judgment and possess skills and abilities which will benefit the functions of the City of Citrus Heights to the satisfaction of the city designee or the Citrus Heights Police Department to the satisfaction of the Chief of Police or designee.
- 10. Applicant selection is focused on those who live in the City of Citrus Heights. However, exceptions may be granted at the discretion of the Support Services Manager and/or the Chief of Police.
- 11. Applicants may be required to submit a letter from their physician stating they are qualified to perform assigned tasks. Applicants may be considered if their doctor so stipulates, depending on the needs of the city or the police department. Applicants will also submit an emergency contact information form.
- 12. Applicants must successfully pass an oral exam administered by a panel consisting of personnel from the Citrus Heights Police Department. All members will serve at the discretion of the Police Department.

Please sign below to acknowledge your understanding of the requirements for being a City Volunteer/Intern or a Citrus Heights Police Department Volunteer/Intern.

| Signature: | Date: |
|------------|-------|

Volunteer/Intern Application

Please complete the following application by legibly printing answers to all the questions. If additional space is needed, you may attach additional pages. Any false statements made on this application may disqualify the applicant from eligibility for the City of Citrus Heights or the Citrus Heights Police Department Volunteer/Intern program.

| POSITION APPLYING FOR (Volunteer or Intern) Volunteer Intern Volunteer Intern NORKNAMES/ALIASES | Volunteer Intern | Volunteer Intern | Volunteer Intern | LIASES Volunteer Intern ADDRESS (Number, Street, Apt. No.) (City, State, Zip Code + 4) |
|--|--|--|--|---|
| ADDRESS (Number, Street, Apt. No.) PRIVER'S LICENSE State Number Expiration Date Class HOME PHONE () (City, State, Zip Code + 4) Class WORK PHONE DATE OF BIRTH () EMAIL ADDRESS Preferred Contact Method Have you had any contacts with police? Are you retired from a PERS agency? Phone Email Yes No Person No DUCATION AND TRAINING HIGHEST GRADE COMPLETED Name and Location of High School Did You Graduate? HIGH SCHOOL COLLEGE Years Altended Prom/To Person No Trade School From/To Person No Trade School From/To Person No Trade School Person No Subject Majors | ADDRESS (Number, Street, Apt. No.) PRIVER'S LICENSE State Number Expiration Date Class HOME PHONE CELL PHONE () Expiration Date Class Home PHONE () Expiration Date Class Preferred Contact Method Have you had any contacts with police? Are you retired from a PERS agency? Phone Email Yes No Person No DUCATION AND TRAINING HIGHEST GRADE COMPLETED Name and Location of High School Did You Graduate? HIGH SCHOOL COLLEGE STORM IT 1 2 3 4 1 2 3 4 1 2 3 4 1 2 3 6 1 7 7 7 7 8 1 8 1 1 1 1 1 1 1 1 1 1 1 1 | ADDRESS (Number, Street, Apt. No.) PRIVER'S LICENSE State Number Expiration Date Class (City, State, Zip Code + 4) (City, State, | ADDRESS (Number, Street, Apt. No.) ORIVER'S LICENSE State Number Expiration Date Class | ADDRESS (Number, Street, Apt. No.) ENSE (City, State, Zip Code + 4) |
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| all current certificates of professional competence, licenses, and memberships in professional associations: | | | | |

Volunteer/Intern Application Page 2 of 3

EMPLOYMENT HISTORY- This section must be completed. List all paid and non-paid positions and periods of unemployment held within the last ten (10) years. Attach a separate sheet if necessary. Please list most current positions first.

| positions nist. | | | | |
|---------------------------------------|------------------------------|-----------------------|------------|----------|
| Dates Employed (mm/yyyy) | Employer | | Title | |
| Total Years/Months Worked | Address (Number, Street, C | ity, State, Zip Code | 1 | |
| Hours Worked Each Week | Name and Title of Supervisor | or | Phone Numl | ber \ |
| Type of Business | | Reason for Leaving | | 1 |
| Job Duties | | | | |
| | | | | |
| | | | | |
| Dates Employed (mm/yyyy) | Employer | | Title | |
| Total Years/Months Worked | Address (Number, Street, C | City, State, Zip Code | | |
| Hours Worked Each Week | Name and Title of Supervis | or | Phone Numb | per |
| Type of Business | | Reason for Leaving |] (|) |
| Job Duties | | | | |
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| Dates Employed (mm/yyyy) | Employer | | Title | |
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| Hours Worked Each Week | Name and Title of Supervis | or | Phone Numb | per |
| Type of Business | | Reason for Leaving | (|) |
| Job Duties | | | | |
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| | | | | |
| May we contact your present employer? | | ☐ Yes ☐ No | | |
| If not, Explain | | | | |
| | | | | |
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Volunteer/Intern Application Page 3 of 3

| SPECIAL SKILL | | | | | | |
|------------------------------|---|---------------------------------|---|--------------------|----------------|--------------|
| Do you have an | ny special skills | ? (i.e. computer, ty | ping, bilingual, etc.) |) Please explain. | | |
| | | | | | | |
| CYAL ADII ITV | | | | | | |
| Can you comm | it to twelve (12) | hours of service p | er week? | □ No | | |
| - | | er of hours you ar | e available under one put an X in the b | each day. If not a | available on a | certain day, |
| SUNDAY | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY | SATURDAY |
| | | | | | | |
| | | | | | | |
| Indicate any ex | cceptions (i.e. no | ot available on the | third Thursdays of e | each month, etc.) | | |
| Indicate any ex | | | third Thursdays of e | each month, etc.) | | |
| INFORMATION By signing belo | VERIFICATION Dow, I affirm the in | N nformation contains | third Thursdays of e | n is complete and | | |

Volunteer / Intern Interest Form

| | mplete this form and return this form with your contion you would like to volunteer: | ompleted application packet. Please check |
|---|---|--|
| ☐ City H | Community Center | ☐ Police Department |
| Please che | eck the boxes below if you: | |
| | Can commit to a minimum of twelve (12) hours pe | er week |
| | Can commit to a minimum of one (1) year of serv | ice |
| | Can participate in at least two (2) "special events" | ' per year |
| | Have a 3.0 GPA (if applying for an intern pos | ition and are currently enrolled in school) |
| are interest do not find and any re | volunteer needs for the following positions. Please of sted in volunteering and detail any applicable expe If any areas that may be of interest to you, please we elated experience under "Other." It can be a combine dd additional information in the "Additional Comme | rience you may have in those areas. If you rite down what you would like to contribute ation of knowledge, skills and abilities. You |
| Interest | <u>Position</u> | <u>Experience</u> |
| | Vehicle washing (taking vehicles to the car wash) | : |
| | Field work (includes writing parking citations and some clerical work) | : |
| | Grant writing | : |
| | Scanning and archiving documents | : |
| | Facility cleaning (dusting, vacuuming, etc.) | : |
| | Organizing supplies, tidying cupboards, etc. | : |
| | Brochure and flyer design | : |
| | Administrative work | : |
| | Yard clean-up | : |
| | Front counter and Livescan | : |
| | Information Technology | : |
| | Utility Building Shop | : |
| | Community Center Front Desk Administration | : |
| | Senior Center Program | : |
| | Other: | : |
| Signa | ture: | Date: |

Volunteer/Intern Applicant Questionnaire

| 1. | Please tell us why you would like to be a Volunteer/Intern with the City of Citrus Heights |
|----|---|
| | or the Citrus Heights Police Department. |
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| 2. | How long of a commitment are you willing to give our Volunteer/Intern Program (i.e. 6 months, 1 year, etc.)? |
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| 3. | Can you please provide any additional information on the areas of interest you noted on |
| 0. | the Volunteer/Intern Interest Form and what you are interested in doing (field work vs. |
| | office work)? Please also describe any other talents or interests you have that may be of |
| | interest in helping us with community involvement. |
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| 4. | Have you done volunteer/intern work for any other organization or community? If so, |
| | please describe. |
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| | |
| 5. | When can you begin volunteer/intern services? |
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| 6. | Is there anything in your personal or professional life that would cause us any concerns when doing a background check? |
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