



Image Courtesy of John Pils



## VOLUNTEERS IN POLICE SERVICE APPLICATION

**INSTRUCTIONS:** READ EACH QUESTION CAREFULLY AND ANSWER EACH QUESTION ACCURATELY. AS A CANDIDATE FOR A VOLUNTEER POSITION WITH THE MANCHESTER POLICE DEPARTMENT, I AM WILLING TO FURNISH INFORMATION FOR USE IN DETERMINING MY QUALIFICATIONS. I AUTHORIZE RELEASE OF ANY AND ALL INFORMATION THAT YOU MAY HAVE CONCERNING ME, INCLUDING INFORMATION OF A CONFIDENTIAL OR PRIVILEGED NATURE. I UNDERSTAND THAT FOR SECURITY PURPOSES A BASIC BACKGROUND CHECK WILL BE CONDUCTED TO DETERMINE ELIGIBILITY. PRINT IN BLUE OR BLACK INK AND SIGN WHERE INDICATED.

**RETURN COMPLETED APPLICATION TO: VIPS VOLUNTEER COORDINATOR, 14318 MANCHESTER ROAD, MANCHESTER, MO 63011**

### PERSONAL INFORMATION

Last Name:	First Name:	Middle Name:
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List all other names you have used, including maiden, nicknames or aliases:

Present Address:	Length at present address:
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Previous addresses for the past three years:

Home Phone: ( ) ( )	Business Phone: ( ) ( )	Cell Phone: ( ) ( )	E-Mail Address:
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Date of Birth:	Place of Birth:	Age:	Sex:
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Social Security Number:	Marital Status:	Driver's License Number
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Please list any languages, other than English, which you speak or write fluently:

### EMPLOYMENT HISTORY

Business Name & Address:	Occupation:
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Supervisor's Name and Title:

Employment Phone:	Ext:	FAX:	Employment Dates:
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Job Duties:

### PERSONAL REFERENCES

Give three personal references of those who have known you well during the past five years:

Name	Address	Phone
Name	Address	Phone
Name	Address	Phone

### TRAFFIC/ ARREST HISTORY

Indicate below all arrests and traffic violations you have had in the past five years (do not include parking violations):

Date	Violation	City/ State	Disposition	Agency
Date	Violation	City/ State	Disposition	Agency
Date	Violation	City/ State	Disposition	Agency

**EMERGENCY CONTACT INFORMATION**

Person to be notified in case of emergency:

Relationship:	Home Phone:	Cell Phone:	Work Phone:
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Personal Physician contact information:

**RELEVANT INFORMATION**

How did you learn about the Manchester Volunteers in Police Service Program?

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Why do you wish to volunteer with the Manchester VIPS program?

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What days/hours would you be available?

Please list any special skills, training, interests or hobbies that may be useful to the Department:

\_\_\_\_\_

List any prior law enforcement experience including military law enforcement.

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**ADDITIONAL QUESTIONS OR COMMENTS**

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*I hereby certify that all statements made in this application are true and I authorize investigation by the Manchester Police Department of all matters contained in this application. I acknowledge that any false statements or misrepresentations, either verbal or written, will be cause for refusal of placement or immediate dismissal.*

Signature	Date
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**DO NOT WRITE BELOW THIS LINE – FOR DEPARTMENTAL USE ONLY**

Date application received:	Received by:	
Background Investigator:	Unit:	Background Approved:
Applicant Interview Scheduled:	Date Applicant Notified:	Applicant Approved:

Please return completed application to:

**VIPS VOLUNTEER COORDINATOR  
Manchester Police Department  
14318 Manchester Road  
Manchester, MO 63011**