

Dear Volunteer Applicant:

Thank you for your interest in joining the Denver Police Department Volunteers in Police Service Volunteer program!

This application packet contains all the necessary documents you will need to begin the process of joining the VIPS program. Please complete and sign all of the following paperwork and return it to the VIPS office. You will receive confirmation once we have received your application. Please keep in mind that due to the sensitive and confidential nature of police work, the process is thorough, and can take four to six weeks to complete.

Applications can be returned via:

Post or in person:
Denver Police Headquarters
VIPS Unit Room 110
1331 Cherokee St.
Denver, CO 80204

Email:
dpdvip@denvergov.org
Fax:
(720) 913-7019

The following is a checklist of all materials required to successfully complete an application. If at any time you have questions, please do not hesitate to contact us.

Application Paperwork Checklist

- | | |
|--------------------------|--|
| <input type="checkbox"/> | Completed Application |
| <input type="checkbox"/> | Background Clearance Check form |
| <input type="checkbox"/> | ID Request form |
| <input type="checkbox"/> | Copy of Driver's License or Government |

**Please note: applicants must be 18 years or older to apply.*

**Applicants may be disqualified, after review, at the discretion of the VIPS Administrator.*

**There is NO appeal process for disqualification from the VIPS program.*

**Acceptance into the program does not guarantee further permanent employment.*

Overview

The Denver Police Department Volunteers in Police Service unit is designed to have police officers and community volunteers working together to adequately address the administrative, community policing, and time demand issues facing the Police Department.

The VIPs unit seeks first-rate volunteers to take on tasks in partnership with the men and women of the Denver Police Department serving the citizens of the Denver Metropolitan area. We seek to provide volunteers with rewarding and challenging positions, which enhances the capacity of the Police Department to make Denver a better and safer city.

Mission Statement

The Volunteers In Police Service Program is committed to developing a spirit of cooperation and partnership within the community to enhance the Denver Police Department's ability to serve the city of Denver.

Message from the Chief of Police

Thank you for your interest in applying to be a Denver Police Volunteer! Our volunteers are vital to the Department and contribute in significant and meaningful ways to our success. As Chief of the Denver Police Department (DPD), it is my belief that service to others makes Denver a world class city and thanks to people like you, who give of themselves to help others, our community and department will continue to prosper.

In the words of Elizabeth Andrew, "Volunteers don't necessarily have the time, they just have the heart." Please know that I, along with the members of DPD, strongly value our Volunteer in Police Services Program and know the service you provide is invaluable.

Again, thank you for considering being a part of something that has a direct and positive impact, not just on the community we serve, but also on yourself.

Sincerely,



Paul M. Pazen
Chief of Police



Please print legibly or type

*If you have questions, feel free to contact us. Applications take 4-6 weeks to be processed.
Incomplete applications will be placed on hold.*

Personal Information			
Full Name (First, Middle, Last):			
Are you over 18? Yes: _____ No: _____		Last 4 numbers of your SSI #:	
Home Address:		City:	Zip Code:
Phone #:		Alternate Phone #:	
Email Address (required):			
List any social networking sites you belong to and include the user names:			
Previous Addresses (last 5 years)			
1.			
2.			
3.			
Education Background			
Highest level of education completed:			
Personal References			
<i>Family members may not be used as references. Please do not duplicate employment references. Please make sure contact information is accurate.</i>			
Name:		Phone Number:	Relationship:
1.			
2.			
3.			
Current Employment			
Current or most recent employer:		Occupation:	From: To:
Contact Name:	Title:	Phone:	Email:

***Acceptance into the program does not guarantee further permanent employment.**

Employment for the past seven (7) years:

Attach a separate sheet if necessary. Please make sure information is accurate.

Company Name:	Contact Phone:	Supervisor:	Dates Employed:
1.			
2.			
3.			
4.			

Volunteer Profile

Please note, some positions may require additional training

Why do you want to volunteer for DPD?

What skills and qualifications can you bring to DPD?

What type of volunteer work would interest you the most and why?

Which district/unit would you prefer to volunteer in? _____

How did you hear about the program?

Are you fluent in any foreign languages? Yes ____ No ____
If yes, which? _____

Criminal History

Have you ever been found guilty of ANY law violations other than parking tickets or juvenile offenses? Records do not cause automatic disqualification but are reviewed as related to job(s) applied for. If you have any convictions, list them here:

Availability

We require 30 hours of service per year to be considered an active volunteer. Some volunteers come in several times a week, and some come in a few times a year. Please tell us what kind of time commitment you are looking for.

By signing, I do hereby certify that all information contained in this application is correct and accurate to the best of my knowledge. If accepted to perform volunteer duties for the Denver Police Department, I understand I may be privy to confidential information and promise to respect and maintain that confidentiality.

Signature: _____ **Date:** _____

Printed name: _____

****Acceptance into the program does not guarantee further permanent employment.***

CERTIFICATION, AUTHORIZATION, & WAIVER REGARDING BACKGROUND INVESTIGATION

Certification

I certify that all statements in my application, resume, and any other document I have submitted for a position with the Denver Police Department or the City and County of Denver are true, complete and correct to the best of my knowledge and belief. I further certify that all oral statements I have made or caused to be made to any representatives of the Denver Police Department or the City and County of Denver are true, complete and correct to the best of my knowledge and belief. I understand and agree that ALL statements may be investigated.

I understand that any falsification or omission of information discovered at any time during the selection process or during subsequent volunteering, may bar me from consideration for a position of volunteering or, if I have been selected, cause my dismissal from the Denver Police Department or the City and County of Denver.

Authorization

I hereby authorize the Denver Police Department and the City and County of Denver, during the application process or during the course of any subsequent volunteering with the Denver Police Department or the City and County of Denver, to obtain information from any source as to my education, experience, qualifications, driving record, criminal history, or any other aspect of my background, as such information relates to the position for which I am being considered, or in which I may be volunteering already. In order to facilitate a search for information, I hereby confirm the following:

Full Legal Name (Print) _____
First Middle Last

Other name (s) used _____

Drivers License Number _____ State _____ Expiration Date _____

Please list any other current driver's license from another state _____

Waiver

I release and waive any claim or cause of action against any person responding to any inquiries authorized herein, and against the Denver Police Department and the City and County of Denver in making such inquiries.

A photocopy or fax of this certification, authorization, and waiver shall be as valid as the original and may be used in its stead.

Signature _____ Date _____



NEW VOLUNTEER IDENTIFICATION CARD REQUEST

This Form must be completed and forwarded to or accompany the applicant to the Identification Bureau. Be advised that the identification card issued is the sole property of the Denver Police Department and may be revoked at any time. The identification card **MUST** be worn at all times while on Denver Police Property.

All requests for Identification cards will be processed through the Identification Bureau and must have the approval of a Commander or higher. The Office of the Deputy Chief of Administration reserves the right to exclude parties from entering a managed facility based upon this record check.

(Applicant) Last Name: _____ First Name: _____ MI: _____

Maiden Name, AKA or Other Names Used: _____

Race: _____ Sex: () Male () Female

Date of Birth: ____/____/____ Place of Birth: _____

Social Security Number: xxx-xx-_____

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

Glasses? ____ Yes ____ No Contact lenses? ____ Yes ____ No

Mustache? ____ Yes ____ No Beard? ____ Yes ____ No

Current Address: _____

Applicant Signature: _____ Date: _____



NONCRIMINAL JUSTICE APPLICANT PRIVACY STATEMENT

As an applicant who is the subject of a national fingerprint-based criminal history record check for a non-criminal justice purpose you have certain rights which are discussed below.

Your fingerprints will be used to check the criminal history records of the State of Colorado and the FBI and that those records will be used solely for the purpose requested and may not be disseminated outside the receiving department, related agency or other authorized entity.

If you have a criminal history record, the officials making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.

- Procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record, or decline to do so, before being denied the job, license, or other benefit based on information in the criminal history record.

The fingerprints and information reported from this request may be disclosed pursuant to your consent, and may also be disclosed by the FBI without your consent as permitted by the Federal Privacy Act of 1974 (5 USC 552a(h)). Routine uses include, but are not limited to, disclosures to appropriate governmental authorities responsible for civil or criminal law enforcement, counterintelligence, national security or public safety matters to which the information may be relevant; to State and local governmental agencies and nongovernmental entities or application processing as authorized by Federal and State legislation, executive order, or regulation, including employment, security, licensing, and adoption checks. The City and County of Denver may only release arrest records for arrests made by the Denver Police Department. All other records must be obtained from the Colorado Bureau of Investigation or the Federal Bureau of Investigation.

If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <http://www.fbi.gov/about-us/cjis/background-checks>. If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI at the same website address as provided above. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30-16.34)

If a change, correction or update needs to be made to a Colorado criminal history record, that process information is available on the Colorado Bureau of Investigation website.
<https://www.colorado.gov/pacific/cbi/identity-theft-and-mis-identification>

Your signature below acknowledges this agency has informed you of your privacy rights for fingerprint-based background checks used by the agency for non-criminal justice purposes.

_____/_____
Signature of Applicant Date