

SPOKANE COUNTY SHERIFF'S OFFICE
Sheriff's **C**ommunity **O**riented **P**olicing **E**ffort [S.C.O.P.E.]

Volunteer Application for S.C.O.P.E. Mounted Patrol

Please complete the following information and return to your SCOPE substation. All information is needed to complete a criminal background check.

Last Name, First Name, Middle Name: _____

Any other names by which you have been known:

Current Address: _____

Telephone: Home: _____ Work: _____ Cell (Required): _____

E-Mail Address (Required): _____

Date of Birth: _____ Last 4 #s of Social Security ID: _____

Driver's License #: _____ State Issued: _____

Truck/Trailer License #s: _____ State Issued: _____

Vehicle Insurer: _____ Policy Number: _____

I would like to volunteer at (SCOPE substation): S.C.O.P.E. Mounted Patrol

Authorization to Release Information

I authorize the Spokane County Sheriff's Office to check my criminal history and access any files, reports, or information which they may have concerning me not prohibited by the Washington State Law Against Discrimination (RCW 49.60). Information of a confidential or privileged nature may be included. The purpose of accessing such information is to determine my qualifications and fitness for the position I am seeking with the Spokane County Sheriff's Office Volunteer Service Program.

I hereby release you, your organization, and others from any liability or damage which may result from furnishing the information requested.

Signature of Applicant

Date

Questions or Comments?
9226

Telephone: 509-951-9225 or 509-951-

Mail application to S.C.O.P.E. Mounted Patrol, P.O. Box 1643, Airway Heights, WA 99001

For Administrative Use Only

Accepted: YES / NO

Initials: _____

S.C.O.P.E.

VOLUNTEER OPPORTUNITIES

The following is a list of opportunities needed in the S.C.O.P.E. station. Please check all of the areas you are interested in participating in.

- | | |
|--|---|
| <input type="checkbox"/> Chairperson/Leadership | <input type="checkbox"/> Clerical |
| <input type="checkbox"/> Reception or Desk | <input type="checkbox"/> Neighborhood Watch Captain |
| <input type="checkbox"/> Clean-up (Janitorial) | <input type="checkbox"/> Fund Raising |
| <input type="checkbox"/> Computer Work | <input type="checkbox"/> Activity Planning |
| <input type="checkbox"/> Newsletters | <input type="checkbox"/> Family Skills |
| <input type="checkbox"/> Work with Children | <input type="checkbox"/> Dispute Arbitration |
| <input type="checkbox"/> Work with Youth | <input type="checkbox"/> Information Services |
| <input type="checkbox"/> Work with Seniors | <input type="checkbox"/> Public Relations |
| <input type="checkbox"/> Citizens on Patrol | <input type="checkbox"/> Sheriff Front Desk |
| <input type="checkbox"/> School Patrol | <input type="checkbox"/> Work at Public Safety Building |
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> Report Taking |
| <input type="checkbox"/> Radar Reader Board | <input checked="" type="checkbox"/> S.C.O.P.E. Mounted Patrol |
| <input type="checkbox"/> Gang Graffiti | <input type="checkbox"/> McGruff |
| <input type="checkbox"/> Centennial Trail Patrol | <input type="checkbox"/> Operation Family ID |
| <input type="checkbox"/> Pawn Data Entry | <input type="checkbox"/> Victim Call Back (for Detectives) |

Any other, not listed : _____

Volunteer's Name: _____