

VIP OFFICE
868.5814

Volunteers In Policing Application Process

VIP OFFICE
868.5703

(Please fill out completely or the application will not be processed)

Participation in other Gulfport Police Department programs does not guarantee acceptance to the VIP program.

Step 1: Application

Complete application (Release of Personal Information Form must be notarized) and return to:

**Volunteers In Policing
Gulfport Police Department
P.O. Drawer " S "
Gulfport, MS 78283**

Step 2: Application Review

Your application will be reviewed by the VIP staff. All areas must be completed or have a N/A placed for Not Applicable Information in order to be processed.

Step 3: Character Reference

Four (4) reference forms will be mailed to the individuals you have provided on the application. Failure to provide complete address information will result in the application being denied. *Character references must be returned within thirty (30) days from the date of mailing by VIP staff. Contact the VIP office at 868.5703 to check on the status approximately 2 1/2 weeks after you submit your application.*

Step 4: Interview and Fingerprint

Upon receipt of three completed and positive character reference forms, applicant will be contacted by VIP staff to establish a time for an interview with the coordinator and fingerprinting in the Identification and Latent Print Unit.

Step 5: Acceptance or Non-Acceptance

All applicants will be notified of their acceptance or non acceptance to the program.

Please note under "Terms and Signature" section of the application, an applicant will release the Gulfport Police Department from providing a reason for denial to the program.

Upon acceptance you will be required to attend a one (1) hour Orientation Class



**Gulfport Police Department
Volunteers in Policing
Application**



Please fill out completely or the application will not be processed. If any section does not apply to you, please indicate by writing "N/A". The Gulfport Police Department appreciates your interest in service and commends your spirit to volunteer.

PERSONAL INFORMATION:

Last Name		First Name	Age	Social Security #	Date of Birth
Home address:		City	Zip		Place of Birth
Home Phone:		Business Phone:		Other names used:	
Previous Address(es) Last Five Years					

CRIMINAL HISTORY AND DRIVING RECORD:

Mississippi Drivers License Number		Has your license ever been suspended or revoked: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you ever been convicted of a crime? Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, please explain:	
Traffic citations and accidents for the past two years:			

REFERENCES

References: **NO NOT USE FAMILY MEMBERS AS REFERENCES.** List four (4) individuals you have known for at least 5 years. (Please list name, complete address with zip code, and telephone number)

Name	Address	Zip Code	Phone #
1.			
2.			
3.			
4.			

EDUCATION BACKGROUND AND MILITARY EXPERIENCE

Please check highest level of education completed:

Some High School	<input type="checkbox"/>	High School Diploma	<input type="checkbox"/>	Some College Study	<input type="checkbox"/>
College Degree	<input type="checkbox"/>	Some Graduate Study	<input type="checkbox"/>	Graduate Degree	<input type="checkbox"/>

High School Attended:		College Attended:	
Military Service Branch:	Rank:	Time Served:	Date Discharged:

EMPLOYER HISTORY: (Please fill out completely) If you are retired please note "Not Applicable"

Current Employer:	Occupation:	From Date:	To Date:
Business Address: (Including city state, and zip code)		Phone Number:	
Employment for past five years (Please include firm name, address, supervisor, dates):			
1.			
2.			
3.			
4.			

Tell us a little about you...

What are your hobbies and interests?
Have you volunteered before? If so, what did you do and where?
Do you prefer an office setting or a more active role?

Please briefly state why you wish to volunteer your time to the Gulfport Police Department. (Use other sheet if necessary) ***This question must be answered.***

EMERGENCY INFORMATION:

In case of emergency, please notify:

Name:

Address

Relationship:

Day Phone and Night Phone

D:

N:

TERMS AND SIGNATURE

As a volunteer with the Gulfport Police Department, I am willing to furnish information for use in determining my qualifications.

I understand that for security reasons a basic clearance check/background will be conducted and I will be fingerprinted. Further background information will be requested only if a specific volunteer assignment calls for a full security check.

I understand that falsifying statements on this application or during the interview process is cause for my immediate dismissal from the Volunteers In Policing program.

I understand that the Gulfport Police Department will not disclose any of my information to any outside entity without my written consent.

I understand that the Gulfport Police Department will not have to disclose the reason, if any, for not being selected to the program.

In signing, I do hereby certify that all information contained in this application is correct and accurate to the best of my knowledge. I further authorize the Gulfport Police Department to verify criminal history and driving records as part of the background process. If accepted to perform volunteer duties for the Gulfport Police Department, I understand I may be privy to confidential information and promise to respect and maintain all that confidentiality whenever presented with it.

Signature:

Date:

VOLUNTEERS IN POLICING

AGREEMENT INCLUDING RELEASE AND INDEMNIFICATION

WHEREAS, the City of Gulfport (hereinafter referred to as "CITY") consents and agrees to permit _____ (hereinafter referred to as "VOLUNTEER"), to participate in the Gulfport Police Department's Volunteer In Policing Program subject to the adherence of the VOLUNTEER to any provisions set out in the rules and regulations of the Gulfport Police Department.

NOW, THEREFORE, for and in consideration of the premises and the mutual promises, covenants, and agreements set forth in this Agreement, the CITY and VOLUNTEER agree that the CITY, its agents or employees, shall not be liable or responsible for, and shall be **SAVED, HELD HARMLESS, RELEASED and INDEMNIFIED** by VOLUNTEER from and against any and all suits, actions, losses, damages, claims, or liability of any character, type, or description, including but not limited to all expenses of litigation, court costs, and attorney fees for injury or death to any person, or damage to any property received or sustained by any person or persons or property arising out of, or occasioned by, directly or indirectly, the participation of VOLUNTEER in the Gulfport Police Department's Volunteer In Policing Program including claims and damages arising in whole or in part from the negligence of the CITY, its agents or employees.

IT IS THE EXPRESS INTENT OF THE PARTIES TO THIS AGREEMENT THAT THE INDEMNITY PROVIDED FOR IN THIS AGREEMENT IS AN INDEMNITY EXTENDED BY VOLUNTEER TO INDEMNIFY AND PROTECT THE CITY FROM ANY AND ALL CLAIMS OR ACTIONS, AS SET FORTH ABOVE, OF ANY KIND, ARISING DIRECTLY OR INDIRECTLY FROM THE PARTICIPATION OF VOLUNTEER IN THE PROGRAM, REGARDLESS OF WHETHER SUCH CLAIMS OR ACTIONS ARE FOUNDED IN WHOLE OR IN PART UPON ALLEGED NEGLIGENCE OF CITY, ITS REPRESENTATIVES, AGENTS OR EMPLOYEES.

It is further understood and agreed that the VOLUNTEER will participate solely as an individual on a voluntary basis and not as an employee, contractor or agent of the CITY or its agents or employees.

In making this Agreement, VOLUNTEER relies wholly upon his/her judgment, belief and knowledge and has not been influenced to any extent whatsoever by any representative or statements not contained in this Agreement.

VOLUNTEER SIGNATURE

DATE

ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE NUMBER

EMERGENCY NUMBER

SIGNATURE OF PARENT OR GUARDIAN IF VOLUNTEER IS A MINOR