

# SPOKANE POLICE DEPARTMENT - C.O.P.S. VOLUNTEER APPLICATION

**Your completed application should be returned to your local substation.**

**GREATER SPOKANE** ..... 120 N. Stevens ♦ 99201 ..... 755-2677  
**EAST CENTRAL** ..... 3001 E. 5<sup>th</sup> ♦ 99202 ..... 625-3330  
**LEWIS & CLARK** ..... 521 W. 4<sup>th</sup> ♦ 99204 ..... 354-6941  
**LOGAN** ..... 802 E. Sharp ♦ 99202 ..... 625-3333  
**MISSION AVE.** ..... 1810 N. Greene ♦ 99217 ..... 625-3301  
**NEVA-WOOD** ..... 4705 N. Addison ♦ 99207 ..... 625-3353

**NORTH CENTRAL** ..... 630 W. Shannon ♦ 99205 ..... 625-3348  
**NORTH HILL** ..... MOBILE UNIT ..... 625-3336  
**NORTHEAST** ..... 5208 N. Market ♦ 99207 ..... 625-3343  
**NORTHWEST** ..... 2215 W. Wellesley ♦ 99205 ..... 625-3336  
**SOUTHEAST** ..... 2809 E. 29<sup>th</sup> ♦ 99223 ..... 625-3326  
**WEST** ..... 1901 W. Boone ♦ 99201 ..... 625-3340

Last Name	First Name	Middle Initial
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Address	Zip Code	Phone Number
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Driver's License Number	Has your driver's license ever been revoked or suspended? <input type="checkbox"/> NO <input type="checkbox"/> YES    If yes, give date _____
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Date of Birth	Primary Source of Transportation
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State Where Born	Other States Lived In
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How Long At Present Address?	If Less Than 1 Year, Give Previous Address
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Person To Notify In Case of Emergency	Relationship To You (Spouse, Relative, Friend)	Phone Number
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Please check all of the following that pertain to you:

Student     
  Employed     
  Retired     
  First Aid Certified     
  Hold Current C.P.R. Card

Employer	Work Phone Number
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Please mark all the items that interest you:

<input type="checkbox"/> Administrative Support	<input type="checkbox"/> Computer Data Entry	<input type="checkbox"/> Neighborhood Observation Patrol
<input type="checkbox"/> Bike Registration	<input type="checkbox"/> Crime Free Multi-Housing	<input type="checkbox"/> Operation Family I.D.
<input type="checkbox"/> Bicycle Rodeos	<input type="checkbox"/> Front Desk Operations	<input type="checkbox"/> Operation I.D.
<input type="checkbox"/> Block Watch	<input type="checkbox"/> Fundraisers	<input type="checkbox"/> Paint Over Graffiti
<input type="checkbox"/> Building Maintenance	<input type="checkbox"/> Graffiti Reporting	<input type="checkbox"/> Property Pick-Up
<input type="checkbox"/> Business Watch	<input type="checkbox"/> Marketing/Public Relations	<input type="checkbox"/> Registered Sex Offender Program
<input type="checkbox"/> Crime Prevention Through Environmental Design	<input type="checkbox"/> McGruff Safe House	<input type="checkbox"/> Victim Call-Back
	<input type="checkbox"/> Newsletter	<input type="checkbox"/> Other

How did you hear about C.O.P.S.?

Why do you want to be a C.O.P.S. Volunteer?

List skills you feel would benefit C.O.P.S.



List any organizations of which you are a member.			
Are you or any member of your household currently involved in any neighborhood disputes that may have to be mediated by police?			<input type="checkbox"/> NO
☐ YES – explain:			
Are you or any member of your household the subject of a criminal investigation being conducted by any law enforcement agency?			<input type="checkbox"/> NO
☐ YES – explain:			
Would you have any problem with or providing service to any person because of race, religion, culture or sexual orientation?			<input type="checkbox"/> NO
☐ YES – explain:			
Are you a member of any organization that advocates the overthrow of the U.S. Government?			<input type="checkbox"/> NO
☐ YES – explain:			
Have you ever been convicted of a crime in a court of law, civilian or military?			<input type="checkbox"/> NO
☐ YES – explain:			
Location		Date	
<b>REFERENCES</b> (Other Than Relatives or Past Employers)			
Name		Phone Number	
Address	City	State	Zip Code
Name		Phone Number	
Address	City	State	Zip Code
Name		Phone Number	
Address	City	State	Zip Code

### SPOKANE POLICE DEPARTMENT - AUTHORIZATION TO RELEASE INFORMATION

I, \_\_\_\_\_ authorize Spokane C.O.P.S. to furnish the Spokane Police **Applicant's Name (Please Print)** Department with any and all information it may need concerning my reputation and criminal history, including non-conviction data and intelligence information not prohibited by the Washington State Law against discrimination RCW 49.60 and regulations concerning fair pre-employment inquiries. Information of a confidential nature may be included. My reply will be used to assist the Spokane Police Department in determining my qualifications and fitness for the position I am seeking. I hereby release you, your organization and others from any liability or damage which may result from furnishing the information requested.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Note: A photocopy reproduction of this document shall be for all intents and purpose as valid as the original.  
You may retain a copy of this form for your files.