# Rochester Police Department
# Volunteer/Student Intern Application, RPD 1323

## POSITION APPLYING FOR:

☐ VOLUNTEER ☐ STUDENT INTERNSHIP

___Administrative
___Rochester Animal Services
___CVRT (Community Volunteer Response Team)
___PAC-TAC (Police and Citizens Together Against Crime)
___Clergy Response Team
___Chaplaincy Program
___Other

Name: _____ _____
first m.i. last maiden

Date of Birth: _____ Male ☐ Female ☐

Current Address: _____
street city state zip code how long at this address

Permanent Address: _____
street city state zip code how long at this address

Previous Address(es) (Last 5 years):

_____

_____

_____

Home Phone #: _____ Cell Phone #: _____

E-Mail Address: (indicate only if accessed regularly) _____

In case of emergency please notify:

_____
Name Relationship Phone #

Type of transportation you will use: _____

Have you ever been convicted of a crime? ☐ Yes ☐ No If yes, please explain: _____

_____

_____

_____
(Continue on back if necessary)

**EDUCATION BACKGROUND:**

School Attended(ing): _____ Major: _____
(if applicable)

Minor: _____ Date diploma received or expected: _____
(if applicable)

**MILITARY SERVICE:**

Branch: _____ Rank: _____ Time Served: _____ Discharged: _____

**EMPLOYMENT HISTORY:**

Employer:_____ Occupation:_____ How Long:_____

Business Address:_____ Phone #:_____

Previous Employment: (Please include firm name, address, supervisor and dates)

_____

_____

_____

_____

**VOLUNTEER BACKGROUND:** Previous Volunteer Services (include organizations and dates)

_____

_____

_____

_____

**SKILLS:**

Indicate clerical, computer (be specific), working with youth, communication-verbal, written, etc.

_____

_____

_____

**BRIEFLY state why you would like to volunteer/intern with the Rochester Police Department, and what you hope to gain from the experience.** _____

_____

_____

_____

_____

_____

**REFERENCES (Two should be work or school related. No relatives.):**

| | Name | Address | Phone # | Relationship |
|---|---|---|---|---|
| I . | | | | |
| 2. | | | | |
| 3. | | | | |

**SPECIAL LIMITATIONS AND CONDITIONS:** _____

_____

_____

**AVAILABILITY: (list time of day)**

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Saturday _____

Sunday _____

*I certify that the above information is correct to the best of my knowledge.
*I understand that a criminal background check will be performed on all student interns and volunteers.
*I understand that I may be terminated if the Department becomes aware of criminal history while I am interning/volunteering.
*I understand the commitment involved and acknowledge that my services are offered at my own risk.
*I agree to adhere to the volunteer/student intern policies, and carry out my duties as a volunteer/student intern effectively.
*I understand that my participation in this program does not make me an employee of the City of Rochester, and I release the City of Rochester, it's officers, agents, employees and any third party organization from any and all liability for any claims of injury or damage of any kind whatsoever, as a result of my participation as a volunteer/student intern.
*I understand that I am not entitled to any benefits of employment, including workmen's compensation.
***I will maintain confidentiality of police information.**
***I will not represent myself as an employee of the Rochester Police Department.**

Signed: _____ Date: _____

**And** ***(if under 16) I understand the above terms and give permission for my child to volunteer with the Rochester Police Department***

Parent Signature: _____ Date: _____

**The Rochester Animal Services recommends that volunteers be current on their Tetanus Vaccination.**

Return to: Anne Powless, Volunteer Coordinator
Rochester Police Department
185 Exchange Blvd.
Rochester, NY 14614

For office use only

Record check by: _____ Date: _____

Date of training or orientation: _____

**ASSIGNED TO:**

Section/Unit: _____ Supervisor: _____

Starting Date: _____ Ending Date: _____

Days: _____ Times: _____