



City of Lino Lakes/Department of Public Safety
 640 Town Center Parkway
 Lino Lakes, MN 55014
 (651) 982-2300

VOLUNTEER APPLICATION FORM

Volunteer Group Applying for: Reserve Unit CERT Internship/Service Learning
 Administration (Office Help/Investigations) Chaplain Public Safety Citizens Commission

Thank you for your interest in volunteering for the Lino Lakes Department of Public Safety. Your application will be used to verify eligibility for a volunteer position with the Police Department. It is our policy to provide equal employment opportunities to all. Individuals are evaluated and selected solely on the basis of their qualifications.

Please furnish complete and accurate information so that we can properly evaluate your application. Be aware that the use of false or misleading information or the omission of important facts may be grounds for immediate dismissal. Also note that information you provide herein may be subject to later verification, background investigation and/or testing. You may attach to this application any additional information that helps explain your qualifications. (Please print clearly or type). The City of Lino Lakes considers applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, sexual preference, the presence of a non-job related medical condition or disability, or any other legally protected status. EOE/AA/ADA

Personal Information

 (Last Name) (First Name) (Middle Initial)

 (Address) (City) (State) (Zip Code)

 (Home Phone) (Work Phone) (Cell Phone)

 (Email Address) Are you 18 years of age or older? Yes No

What day(s) of the week and time are you available to volunteer?

Briefly explain your interest in volunteering for the Police Department:

Emergency Information

In case of emergency, the person to contact should be:

 (Name) (Relationship) (Phone Number) (Alternative Phone #)

 (Address) (City) (State) (Zip Code)

Education and Training

(Location)	(Course of Study)	(No. of Years Completed)	(Did you Graduate?)	(Degree or Diploma?)
High School:			Yes No	
College:			Yes No	
Technical/Trade/Business:			Yes No	
Other special training or skills (computer skills, GIS experience, etc.)				

Work or Volunteer Experience

Fill in information on your 2 most recent work or volunteer positions (you may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, sexual orientation, handicap or other protected status). You may also attach a resume.

(Organization Name)	(Telephone Number)
(Address)	(Month and Year) From: To:

List your duties/responsibilities:

(Organization Name)	Telephone
(Address)	(Month and Year) From: To:

List your duties/responsibilities:

References

Please provide the name, address and telephone number of three references who are not related to you and are not previous employers.

(Name)	(Address)	(Phone)
1.		
2.		
3.		

Conviction Information

This question must be answered before your application will be considered

If the answer to this question is "Yes", please attach a separate sheet of paper giving full particulars. This information will not be used to bar you from volunteering but may be used to direct your interest to areas less related to the area of your conviction.

You may answer "No" to this question if the conviction or records thereof have been annulled, sealed, set aside, or purged, or if you have been pardoned pursuant to law.

During the past five years have you served a sentence in a jail or prison or been convicted of a misdemeanor or felony for which a jail sentence could have been imposed? Yes_____ No_____



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AUTHORIZATION FOR RELEASE OF INFORMATION

The Department of Public Safety, Police Department requires a check of the criminal history for all potential employees, volunteers, agents of the city, and independent contractors who have direct access to or management of public funds; substantial contact with juveniles in a setting where adults are not present; and/or access to confidential and private data.

The Department of Public Safety is offering to the undersigned, volunteer employment, subject to positive results of various investigations. Please complete the below required information authorizing the Lino Lakes Police Department to conduct the background check in the following areas: Criminal History Check, Local Police Record Check, Warrant Checks and Driver's License Check. You will be informed of your status when your investigation is complete. The undersigned further release the City of Lino lakes and the State of Minnesota from any claims or damages which the undersigned might incur as a result of the police department obtaining this information from the State of Minnesota.

This information is being requested by the police department to determine whether the undersigned is disqualified from being a volunteer for the Lino Lakes Police Department. Under Minnesota State Law, the City can disqualify a person from employment because of a criminal conviction only if the conviction directly relates to the proposed job. This information is classified as private personnel data and will be provided only to those employees or agents who have a need to review it. The police department does not intend to release the information to any other party, but may be required to do so by subpoena or court order. The undersigned may refuse to authorize the release of this information, but refusal will result in disqualification as a volunteer.

Name _____
(Last) (First) (Middle)

Date of Birth(mm/dd/yyyy)____/____/____ Race_____

Sex M F

Driver's License #_____

State of Issuance_____

Signature_____ Date_____

Important Facts about Information on Your Application

In accordance with the Minnesota Government Data Practices Act, Minnesota Statute 13.04, Subd.2, the City of Lino Lakes is required to inform you of your rights as they pertain to private data you have provided. The following data is public information and accessible to anyone: veteran's preference status, relevant test scores, rank on eligibility list, job history, education and training, and work availability. All other personal identifiable information is considered private, including but not limited to your name, home address and phone number. Private data is information which is available to you, but not the public.

1. I hereby certify that all statements herein are true and complete and authorize investigation of all information contained in this application. I understand that my present employer will not be contact for employment verification until I have become one of the finalists for the position for which I am applying.
2. Organizations and persons named herein are authorized to give information regarding me and they are hereby released from all liability for issuing such information.
3. I understand that misrepresentation or omission of facts called for herein will be sufficient cause for cancellation of consideration for volunteerism or dismissal if I have been accepted as a volunteer.

Applicant's Signature

Date

To be completed by Volunteer Coordinator

____ Interview completed Date _____

____ Criminal Background completed Date _____

____ Reference Check completed Date _____

____ Approved Date _____

____ Policies and Procedures: Discuss/Acknowledgement
