



Volunteers In Police Service (VIPS)

Centralia Police Department ▪ P.O. Box 609, Centralia, Washington 98531 ▪ (360) 330-7680

Dear VIPS Applicant:

Thank you for your interest in our volunteer program. Enclosed is an application for you. Please return the completed application and signed agreements to:

In Person: 118 W. Maple St. Centralia, WA 98531

**By Mail: Centralia Police Department/Volunteer Coordinator
P.O. Box 609, Centralia, WA 98531**

Centralia Police Department's volunteer program emphasizes service to the community as a whole.

Our mission: To work in partnership with our community to protect life and property, reduce crime, and enhance the security and quality of life in our city.

Civilian Volunteers: Duties may include but are not limited to: clerical support, event staffing, flyer distribution, and information gathering.

- **Amateur Radio Emergency Services (ARES):** Volunteers may choose to become certified ham radio operators. They assist during public events and disasters.
- **Event Staffing:** Our agency puts on several large events throughout the year. These events take a lot of planning and require people to pull it all together. If you enjoy working with the public, we could use your help.
- **24/7 Sobriety Testing:** • 7 days/week, 365 days/year
The 24/7 Sobriety Program requires participants to submit two (2) **breath tests** at two (2) **separate testing times daily**. The first test will be between **6:30a.m.-7:30a.m.** and the second test will be between **6:30p.m.-7:30p.m.**
Program participants have been court ordered into the 24/7 Sobriety Program as a condition of bond or pretrial release, or as a condition of a suspended sentence (probation/parole) or by a judgment and sentence. **Testers will receive additional training** on using the Personal Breath Tester (PBT) and the computer program used to track participants.

Police Reserves: Volunteers who are trained part-time commissioned officers. They have arrest authority; and must meet the same eligibility criteria and undergo the same hiring process as full-time, sworn officers of this agency.

All potential volunteers are subject to a background investigation prior to acceptance. Most positions involve contact with the community and add a police presence to local events. Confidentiality is imperative. After your application has been processed, you will be called to set up an appointment for an interview.



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MISSION & ETHICS

As a member of the Centralia Police Department (CPD) volunteer program, my fundamental duty is to serve my community in the capacity of an observer. As an observer, I will be the added eyes and ears that aid Centralia Police Officers in working in partnership with our community to protect life and property, reduce crime, and enhance the security and quality of life in our city.

- I will be ever mindful of my safety, my partner's safety, the safety of those in the community, and the police officers who serve the community.
- I will not, by any act or omission of my own, deliberately place in jeopardy my life, the lives of those in my community, or the lives of the police officers that serve my community.
- As a volunteer, I believe we can accomplish this mission by performing assigned tasks wherever needed.
- I will be under the direction of the officer or employees responsible in the respective work area.
- I agree to hold in complete confidence any and all information that is observed or given to me in my capacity as a volunteer. It is my understanding that it is possible I could be called as a witness in a legal investigation or a court hearing and that confidential information may be pertinent to such proceedings.
- Our goal is to perform our duties in such a way that we are able to gain and maintain the approval and trust of those with whom we work.
- Volunteers, in agreement with CPD, will respect and practice sensitivity and understanding of the cultural and ethnic diversity of the City of Centralia and of those with whom we work.
- As a Volunteer, I will not at any time act, speak, or even give the appearance of being a vigilante. I will keep myself from being in the association of or in the company of those who practice any acts which may be viewed as vigilantism.
- Unless I am a duly commissioned Reserve Officer in good standing, I will not carry any type of weapon on my person or in my vehicle while I am engaged in Centralia Police Department, volunteer program activities.
- I will conduct my private life in such a way that my character is beyond reproach so that I can be a credit to the program and the police department.
- As a volunteer, I will be cognizant of the needs of my family, my employer and my personal well-being and keep these needs a priority over my volunteer work.
- I will not engage in gossip and I will encourage others to refrain as well.



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GUIDELINES

PURPOSE:

To specify procedures, rules, and regulations that guide the overall operation of the Centralia Police Department's Volunteers In Police Service (VIPS) program.

POLICY:

Volunteers provide valuable and necessary additional services to the Centralia Police Department on a daily basis. In order to maximize the productivity of this program, the following procedures and regulations are established.

ELIGIBILITY:

Volunteers must be at least eighteen (18) years of age and pass a background check. VOP and ARES volunteers must have a clear driving record, a current driver's license, and pass the appropriate training.

APPLICATION:

Volunteer applicants must complete an application/background questionnaire and submit it to the Volunteer Coordinator.

- Background investigations will be conducted on each applicant.
- The Volunteer Coordinator and/or the supervisor for whom the volunteer will be working may interview applicants.

ASSIGNMENTS:

Volunteers are not expected to work on days that have been designated as holidays, other than Summer Fest on July 4th, by the City of Centralia.

- Those volunteers who wish to terminate their status are requested to provide written notification to the VIPS Coordinator at least fourteen (14) days prior to the effective date.
- A copy of the notification should be directed to the volunteer's immediate supervisor. The volunteer's identification badges and uniform shall be turned in to the Volunteer Coordinator.

VIPS assignments may include:

- Disseminating Sex Offender Flyers
- Staffing booths at local events
- Adding police presence to local events
- Evidence runs
- Office help
- Graffiti abatement/Community Clean-up project help
- With appropriate training: VOP and ARES



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CONDUCT IN PERFORMING:

All organizations have guidelines they follow to provide for order and management. A volunteer's work for the Centralia Police Department (CPD) entails the same responsibilities as required of all Centralia Police Department employees.

- Volunteers will conduct themselves in a manner that brings respect to themselves and to CPD. Volunteers will perform their duties in an impartial manner consistent with the department's policies as outlined in the volunteer policy handbook.
- Volunteers shall treat all information that they receive from reports, officers, or victims as confidential.
- Volunteers shall not use their association with CPD to seek favors for themselves or others.
- Volunteers shall not discuss any aspect of a crime or an investigation with any person unless directed to do so by their immediate supervisor. People seeking information or advice on a criminal case shall be referred to the investigating officer or a supervisor.
- Volunteers who observe apparent misconduct by employees or volunteers shall report that misconduct to their immediate supervisor. Grave infractions shall be brought to the direct attention of the Chief of Police.
- State RCW 446-20-170 states: Secondary dissemination. (1) Criminal justice agencies that receive state criminal history record information from the identification section of the Washington state patrol may disseminate them further, "but only to the same extent to which the identification section itself would be authorized to make a dissemination in the first instance." (2) Agencies certified to receive criminal history record information from whatever source may use it only for the specific purpose for which the agency is certified and shall not disseminate it further.
- Volunteers shall not give any unauthorized person any information concerning the location of records, weapons, ammunition, the number of officers on duty, shift assignment or patrol beat areas.
- Volunteers are expected to dress in compliance with other CPD employees and their guidelines or as required by their supervisor.



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APPEARANCE

During public events, volunteers should wear their appropriate uniform to be easily identified. The department will issue one shirt for CPD volunteers. Jackets will be made available for those working outside. Photo ID badge is required for all volunteer duties.

VIPS: Volunteer polo shirt (Academy Blue) with agency patches. Shirt should be tucked in or tailored as a blouse. Pants should be long, dark blue or black if blue cannot be purchased. A white t-shirt should be worn under the uniformed shirt. Black belt and black shoes are preferred. Uniforms are required for events involving increased police presence, disseminating sex offender flyers, and driving VOP car.

Uniforms are not required during clean-up events or for those working on special projects or in the CPD office (office attire is required).

ARES: Weather-appropriate clothing and assigned ARES vest to identify members.

DISMISSAL

Volunteers, like all Centralia Police Department employees, are subject to dismissal for failure to follow the guidelines for behavior set forth by the department.

• Volunteers are subject to removal from the program at the discretion of the Chief of Police, the Commander in charge of Volunteers, or the Volunteer Coordinator. Reasons for removal include, but are not limited to, the following:

- Committing a felony or misdemeanor.
- Reporting for service in an intoxicated state or possession of intoxicants on the job.
- Improperly releasing confidential information.
- Failure to report for service assignment without a justifiable cause.
- Misconduct (to include profane or abusive language).

• Volunteer identification badges and uniform/clothing shall be returned to the Volunteer Coordinator upon dismissal.

RIDE ALONG PRIVILEGES:

Volunteers may participate in the Citizen's Ride Along Program twice a year upon completion of a *Citizen Ride Along Hold Harmless Agreement*. Ride Alongs are limited to four hours or shorter depending on circumstances.

Please keep this information for review. Return the application only.



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APPLICATION

(Please print or type)

PERSONAL INFORMATION:

Last Name _____ First Name _____ Middle _____

Home Address _____

City _____ State _____ Zip _____

Date of Birth _____ Other names used _____

Home Phone _____ Cell _____

Work Phone _____ Message _____

Email Address _____

EDUCATION BACKGROUND AND MILITARY EXPERIENCE:

Please circle the highest level of education completed:

High School 1 2 3 4

College 1 2 3 4 5 6 7 8

Degrees or certificates earned _____

Military Service Branch _____ Rank _____ Time Served _____

Date Discharged _____

Do you speak or read a foreign language? Yes No Which one(s)? _____

CRIMINAL HISTORY AND DRIVING RECORD:

Washington Drivers License Number _____

Has your license ever been suspended or revoked? Yes No

Traffic citations and accidents for the last 5 years: _____

Have you ever been questioned, detained, arrested, investigated, warned or issued a citation for any misdemeanor or felony, other than traffic, either as an adult or juvenile?

Yes No

Have you ever been convicted of a crime? Yes No

If yes, please explain:

REFERENCES:

DO NOT USE FAMILY MEMBERS AS REFERENCES. List 3 individuals you have known for at least 5 years. Please list name, complete address, and telephone number.

1. Name _____

Phone _____

Street Address, City, State, Zip _____

2. Name _____

Phone _____

Street Address, City, State, Zip _____

3. Name _____

Phone _____

Street Address, City, State, Zip _____

CURRENT EMPLOYER: (Please fill out completely)

Firm Name _____ Supervisor _____

Street Address, City, State, Zip _____

Phone _____

VOLUNTEER INTEREST:

How much time do you have to volunteer? (Please circle)

Hours per week

Hours available

Days available

5 10 15 20 +

M T W Th F Sat Sun

Areas interested in volunteering in _____

List any skills or interests, which would assist in placing you in an appropriate assignment (attach additional sheets if necessary)

List any memberships in any community organizations and previous/present volunteer experience.

Briefly, state why you wish to volunteer your time to the Centralia Police Department. (Use additional sheet if necessary) This question must be answered.

EMERGENCY CONTACT:

List persons to notify in case of an emergency.

Name _____ Relationship _____

Street Address, City, State _____

Home Phone _____ Work Phone _____

Cell Phone/Pager _____

Name _____ Relationship _____

Street Address, City, State _____

Home Phone _____ Work Phone _____

Cell Phone/Pager _____

Name _____ Relationship _____

Street Address, City, State _____

Home Phone _____ Work Phone _____

Cell Phone/Pager _____

In addition to this application, please submit the enclosed Hepatitis Vaccination Form and Hold Harmless Agreement. If you have questions please call Jennifer Krueger, CPD Volunteer Coordinator, (360) 330-7680, ext. 1362.



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HEPATITIS B VACCINATION FORM

As a CPD volunteer, you should be aware that you may come into contact and/or be exposed as a result of your occupation or volunteer services to blood or other potentially infectious materials and may be at risk of Hepatitis B virus (HBV) infection.

You have the opportunity to be vaccinated with Hepatitis B vaccine, at no charge to you, through a series of three shots given by the Lewis County Health Department. Although you are encouraged to take part in this program, you have the right to decline the Hepatitis B vaccination. You should realize that by declining vaccination, you continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future you decide to be vaccinated with the Hepatitis B vaccine, you may receive the vaccination series at no charge.

YES, I wish to receive the Hepatitis B vaccination and understand there is no charge to me.

Signature _____ Date _____

Name (printed) _____ Witness _____

OR

I **DECLINE** the Hepatitis B vaccination at this time because I have elected to not receive the injection or I have previously received the complete Hepatitis B vaccination series, or antibody testing has revealed that I am immune or the vaccine is contraindicated for medical reasons.

Signature _____ Date _____

Name (printed) _____ Witness _____



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CONFIDENTIALITY AGREEMENT

I have read the CPD Volunteer Guidelines and agree that I shall treat all information I receive from reports, officers, or victims as confidential. I understand that I could jeopardize the ultimate investigation of a crime by revealing information. I will not discuss any aspect of a crime or investigation with any person unless directed to do so by my supervisor. I agree that I will not use my association with the Centralia Police Department to seek favors for others or myself.

Signature: _____ Date: _____

INFORMATION AUTHORIZATION

I hereby authorize any city, county, state, former employer, or any other agency to furnish to any member of the Centralia Police Department any information considered necessary for the purpose of processing this questionnaire. A copy of this authorization shall be considered as valid as the original. I consent to the City of Centralia performing a background check into my history in accordance with RCW 43.43.834, and waive any right of privacy I may have in such information for the limited purpose of the City of Centralia considering it for determining my suitability as a volunteer.

Signature: _____ Date: _____

LETTER OF UNDERSTANDING AND HOLD HARMLESS AGREEMENT

I understand that I am not an employee of the City of Centralia. I am not entitled to payment for services rendered, nor am I entitled to compensation or fringe benefits other than set out below. I further acknowledge that I am a volunteer for purposes of the Fair Labor Standards Act. I wish to volunteer my services to the City of Centralia Police Department and/or observe members of the Centralia Police Department perform their duties. I understand that my status as a CPD volunteer (VIPS, VOP, CERT, ARES or BlockWatch Captain) may be revoked at any time. In consideration of the above granted authority to observe and other good and valuable consideration, I, my assigned heirs, executors, or agents hereby agree to hold the City of Centralia and the Centralia Police Department harmless. I agree to indemnify the City of Centralia, the Centralia Police Department, and their agents and employees from any and all claims, damages, losses, and expenses arising out of the above described observations, volunteer work, and related activities, which is for bodily injury, illness or death, or property loss of use.

Signature: _____ Date: _____

SUBSCRIBED AND SWORN TO BE ME on this date, the ___ day of _____, 20__.