



Sarnia Police Service

Community Volunteer Application

Personal Information

Last Name:		First Name:		Middle Name:	
Address (Street/Apt. No./P.O. Box No./R.R. No.):				Date of Birth (yy/mm/dd):	
City or Town:	Province:	Postal Code:	Telephone Number(s):		
Email Address(es):					
Driver's License Number:					

Education and Training

Secondary School:		Level Completed:			
Post-Secondary Education:		Course Name:		Present Status:	

Community and Volunteer Involvement

Organization:	Duties/Responsibilities:	Length of Time Volunteered:
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Employment History

Present Employer:	Job Title:	Supervisor Name:	Telephone Number:
Employer:	Job Title:	Supervisor Name:	Telephone Number:

Previous Police Involvement

Have you ever been charged with a Criminal Code of Canada offence?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please describe:	
Have you ever been convicted of an offence under the Provincial Offences Act? (i.e. Highway Traffic Act, Liquor License Act, Trespass to Property Act)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please describe:	

I hereby declare that the foregoing information is true and complete to the best of my knowledge. I understand that false statements may disqualify me from this position or be considered cause for dismissal.

Signature:	Date:
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