

COMPLETED APPLICATIONS MAY BE DROPPED OFF AT THE WAHAKIYAKUM COUNTY SHERIFF'S OFFICE (64 MAIN ST, CATHLAMET). IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT AUSTIN SMITH AT EM@CO.WAHAKIYAKUM.WA.US OR 360-795-7876.

## WAHAKIYAKUM COUNTY SHERIFF'S OFFICE VOLUNTEER PROGRAM APPLICATION

### I AM INTERESTED IN JOINING:

- EMERGENCY OPERATIONS CENTER (EOC)
- SEARCH AND RESCUE (SAR)
- VOLUNTEERS IN POLICE SERVICES (VIPS)
- WAHAKIYAKUM COUNTY RADIO AMATEUR CIVIL EMERGENCY SERVICES (RACES)
- COMMUNITY EMERGENCY RESPONSE TEAM (CERT)
- OTHER: \_\_\_\_\_

### PERSONAL INFORMATION:

PLEASE FILL OUT COMPLETELY. IF ANY SECTION DOES NOT APPLY TO YOU, PLEASE INDICATE BY WRITING "N/A".

LAST NAME:                      FIRST NAME:                      M.I.:                      DATE OF BIRTH:                      SOC. SEC. #:

HOME ADDRESS:

PLACE OF BIRTH:

HOME PHONE:

ALTERNATE PHONE #

ALIAS NAMES:

PREVIOUS ADDRESSES (LAST 2 YEARS):

### CRIMINAL HISTORY AND DRIVING RECORD:

WASHINGTON DRIVERS LICENSE #: \_\_\_\_\_

HAS YOUR LICENSE EVER BEEN SUSPENDED OR REVOKED? \_\_\_\_\_ WHY? \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A CRIME? \_\_\_\_\_ IF YES, EXPLAIN: \_\_\_\_\_

PLEASE LIST TRAFFIC CITATIONS AND ACCIDENTS, FOR THE PAST 3 YEARS: \_\_\_\_\_

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**REFERENCES**

PLEASE LIST NAMES, COMPLETE ADDRESSES AND PHONE #'S FOR 3 INDIVIDUALS YOU HAVE KNOWN AT LEAST 5 YEARS: (PLEASE DO NOT USE FAMILY MEMBERS)

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**EDUCATION BACKGROUND AND MILITARY EXPERIENCE**

PLEASE CHECK HIGHEST LEVEL OF EDUCATION COMPLETED:

SOME HIGH SCHOOL  HIGH SCHOOL DIPLOMA OR G.E.D.  SOME COLLEGE STUDY   
COLLEGE DEGREE  SOME GRADUATE STUDY  GRADUATE DEGREE   
MILITARY SERVICE? YES  NO

**EMPLOYER HISTORY**

CURRENT EMPLOYER: OCCUPATION: HOW LONG?

\_\_\_\_\_  
BUSINESS ADDRESS: PHONE #:  
\_\_\_\_\_

EMPLOYMENT LAST 3 YEARS: (INCLUDE NAME, ADDRESS, PHONE #, JOB DUTIES)

- 1. \_\_\_\_\_
- 2: \_\_\_\_\_
- 3: \_\_\_\_\_

**TELL US ABOUT YOURSELF...**

WHAT ARE YOUR HOBBIES AND INTERESTS?

DO YOU CURRENTLY VOLUNTEER? WHERE?

DO YOU PREFER AN OFFICE SETTING OR A MORE ACTIVE ROLE?

PLEASE BRIEFLY STATE WHY YOU WANT TO VOLUNTEER FOR THE WAHAKIYAKUM COUNTY SHERIFF'S OFFICE:

\_\_\_\_\_  
\_\_\_\_\_

# WAHKIAKUM COUNTY SHERIFF'S OFFICE

## VOLUNTEERS

JUNE 2019 (V1.2)

### I. PURPOSE

This policy establishes this office's position on the utility and management of its volunteer program and provides guidance on its management and administration.

### II. POLICY

Volunteers can be an important part of any organization and are proven to be a valuable asset to law enforcement agencies. Volunteers help to increase police responsiveness, service delivery, and information input, and they provide new program opportunities. In addition, volunteers can bring new skills and expertise to the job and prompt new enthusiasm. It is the policy of this Sheriff's office to use qualified volunteers for specified tasks and duties that can create efficiencies for the office and improve services to the community. Volunteers are intended to supplement and support, rather than supplant, sworn officers and civilian personnel.

### III. DEFINITION

*Volunteer:* Someone who performs service for the office without promise, expectation, or receipt of compensation for services rendered. This may include unpaid chaplains, interns, persons providing administrative support, SAR(Search and Rescue), VIPS(Volunteers in Police Services), CERT(Community Emergency Response Team), HAM (Amateur Radio), among others.

### IV. PROCEDURES

#### A. Administration

1. The volunteer coordinator, or his or her designee, shall be responsible for the following:
  - a. Recruiting, selecting, and training qualified volunteers for various positions
  - b. Maintaining employment records for each volunteer
  - c. Maintaining the volunteer handbook, which outlines expectations, policies, and responsibilities for all volunteers
  - d. Maintaining a record of volunteer schedules and work hours
  - e. Completion and dissemination as appropriate of all necessary paperwork and information
  - f. Planning periodic recognition events
  - g. Administering discipline when warranted
2. All requests for volunteer services shall be routed through the designated chain of command for review and volunteer selection.

#### B. Recruitment

Volunteers shall be recruited on a continuous and ongoing basis consistent with this office's policy on equal opportunity nondiscriminatory employment. A primary

qualification for participation in the application process shall be an interest in and an ability to assist the agency in serving the public.

C. Screening

1. All prospective volunteers shall complete the volunteer application form.
2. The volunteer coordinator, or designee, shall conduct a face-to-face interview with an applicant under consideration.
3. A documented background investigation shall be completed on each volunteer applicant and shall include but not necessarily be limited to the following:
  - a. Traffic and criminal record
  - b. Employment
  - c. References

D. Selection and Placement

1. All volunteers shall be required to sign a volunteer confidentiality agreement.
2. Volunteers shall be placed only in job assignments or programs that are consistent with the knowledge, skills, abilities, and needs of the agency.

E. Training

1. Volunteers shall be provided with an orientation program to acquaint them with the office, personnel, policies, and procedures that have a direct impact on their work assignment.
2. Volunteers shall receive position-specific training to ensure they have adequate knowledge and skills to complete tasks required by the position.
3. Volunteers shall receive periodic ongoing training as deemed appropriate by their supervisor or volunteer coordinator.
4. Training shall reinforce to volunteers that they may not intentionally represent themselves as, or by omission infer that they are, sworn officers or other full-time members of the office. They shall always represent themselves as volunteers.
5. All volunteers shall comply with the rules of conduct and with all orders and directives, either oral or written, issued by the office.

F. Fitness for Duty

1. No volunteer shall report to work or be on duty when his or her judgment or physical condition has been impaired by alcohol, medication, other substances, illness, or injury.
2. Volunteers shall report to their supervisor any changes in status that may affect their ability to fulfill their duties. This includes, but is not limited to, the following:
  - a. Driver's license
  - b. Medical condition
  - c. Arrests
  - d. Criminal investigations

G. Dress Code

1. Volunteers shall conform to office-approved dress consistent with their duty assignment.
2. Uniforms authorized for volunteers shall be readily distinguishable from those worn by sworn officers.
3. No volunteer shall wear his or her uniform or identifiable parts of that uniform while off duty.

4. Volunteers shall be required to return any issued uniform or agency clothing at the termination of service.

H. Confidentiality

1. With appropriate security clearance, volunteers may have access to confidential information such as criminal histories or investigative files. Unless otherwise directed by a supervisor or office policy, all police information shall be considered confidential. Only that information specifically identified and approved by authorized personnel shall be released. Confidential information shall be given only to persons who have a need and a right to know as determined by office policy and supervisory personnel.
2. Each volunteer shall sign a confidentiality agreement. Subsequent disclosure of any confidential information, verbally in writing, or by any other means, shall be grounds for immediate dismissal and possible criminal prosecution.
3. Volunteers shall not address public gatherings, appear on radio or television, prepare any article for publication, act as correspondents to a newspaper or other periodical, release or divulge any information concerning the activities of the agency, or maintain that they represent the agency in such matters without permission from the proper agency personnel.

I. Property and Equipment

1. Volunteers shall be issued an identification card that must be worn at all times while on duty.
2. Any fixed and portable equipment issued by the agency shall be for official and authorized use only.
3. Any property or equipment issued to a volunteer shall remain the property of the agency and shall be returned at the termination of service.

J. Disciplinary Procedures/Termination

A volunteer may be removed from the volunteer program at the discretion of the DEM Coordinator or Sheriff. Termination of volunteers shall not be subject to due process considerations and volunteers shall have no property interests in their continued employment.

K. Evaluation

1. An evaluation of the overall volunteer program shall be conducted on a regular basis.
2. Regular personnel evaluations shall be conducted with volunteers to ensure the best use of human resources available, to ensure personnel problems can be identified and dealt with promptly and fairly, and to ensure optimum job satisfaction on the part of volunteers.

L. Firearms

Volunteers shall not be armed with firearms while on duty or in uniform.

**I \_\_\_\_\_ agree to abide by or comply with the provisions laid out above. I also, understand that failure to do so may be grounds for termination from all Wahkiakum County Sheriff's Office volunteer programs.**

\_\_\_\_\_  
Sign

\_\_\_\_\_  
Print

\_\_\_\_\_  
Date

# Wahkiakum County Sheriff's Office

## Sheriff John M. Mason



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P.O. Box 65/64 Main Street, Cathlamet, WA 98612  
Undersheriff Gary Howell

360-795-3242 or 360-465-2202 Fax: 360-795-3145  
Chief Civil Deputy Joannie Kuhlmeier

## Mission Statement

**The mission of the Wahkiakum County Sheriff's Office is to partner with the community to safeguard lives and property, and provide assistance to those in urgent need.**

## Core Values

**SERVICE** – acting helpfully, in aid to others.

**INTEGRITY** – adherence to moral and ethical principles; soundness of moral character; honesty.

**RESPECT** – esteem for or a sense of the worth or excellence of a person, a personal quality or ability, to hold in esteem or honor; to show regard or consideration for.

# Wahkiakum County Sheriff's Office

## Sheriff John M. Mason



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### OATH OF CONFIDENTIALITY

I \_\_\_\_\_, agree not to divulge, publish, or otherwise make known to unauthorized persons or the public any confidential information obtained as a representative or member of the Wahkiakum County Sheriff's Office. I recognize that a request for or receipt of confidential information under pretense may subject me to criminal liability which is punishable as a gross misdemeanor. I further recognize that unauthorized release of confidential information may subject me to civil liability under the provisions of state law, and treble damages of actual damages sustained.

Signature of person taking oath: \_\_\_\_\_

Print or type name: \_\_\_\_\_

Place signed: \_\_\_\_\_ Date signed: \_\_\_\_\_

Signature of witness: \_\_\_\_\_

Print or type name: \_\_\_\_\_

Place signed: \_\_\_\_\_ Date signed: \_\_\_\_\_

# Wahkiakum County Sheriff's Office

## Sheriff John M. Mason



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 Undersheriff Gary Howell

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## County Emergency Worker ID request form

**Step 1:** I am a member in good standing with (Mark all that apply):

- EOC – Emergency Operations Center
- SAR – Search and Rescue
- RACES – Radio Amateur Civil Emergency Services (HAM – Amateur Radio)
- VIPS – Volunteers in Police Services
- CERT – Community Emergency Response Team
- DRIVER – County Vehicle Endorsement
- Other: \_\_\_\_\_

**Step 2:** Please provide the below information about yourself: (Please print clearly)

|            |                |
|------------|----------------|
| First Name | _____<br>_____ |
| Last Name  | _____<br>_____ |

**Step 3:** Attach a copy of your current driver's license or state issued ID.

**Step 4:** Make arrangements to have a digital photo taken for use with this ID. You can make arrangements with Austin Smith by calling the Wahkiakum County Sheriff's Office at (360) 795-7876 or (360) 465-2202.

**Step 5:** I understand that this ID may be revoked solely at the discretion of the Sheriff or the DEM Coordinator. You are also required to return this ID upon departure from the above indicated group or upon the request of the Sheriff or the DEM coordinator.

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Print: Sign Date

**Step 6:** Obtain approval from your group's leader:

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Print: Sign Date

# **Wahkiakum County Sheriff's Office**

## **Sheriff John M. Mason**



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**P.O. Box 65/64 Main Street, Cathlamet, WA 98612**  
**Undersheriff Gary Howell**

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**Chief Civil Deputy Joannie Kuhlmeier**

**EVERYTHING AFTER THIS PAGE TO BE  
FILLED OUT BY THE SHERIFF'S OFFICE**

# Wahkiakum County Sheriff's Office

## Sheriff John M. Mason



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Undersheriff Gary Howell

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Chief Civil Deputy Joannie Kuhlmeier

## County Emergency Worker ID request form

### Supplement (page 2)

#### Step 7: Drivers Check:

- Valid operator's license
- Other, Please attach documents for review.

Check completed by: \_\_\_\_\_

Date: \_\_\_\_\_

#### Step 8: Criminal History Background (Purpose code C, ATN: ASMITH VISITOR):

- Clear
- Other, Please attach documents for review.

Check completed by: \_\_\_\_\_

Date: \_\_\_\_\_

=====  
=====

Step 9: ID # (3-digits): \_\_\_ \_\_ \_\_

Step 10: Expiration (2 years from issuance): \_\_\_ / \_\_\_ / 20 \_\_\_

Step 11: QR Code (3-digit ID#): \_\_\_ \_\_ \_\_ - (First and Last Name)

#### Step 12: Rated assignments:

- EOC – Emergency Operations Center
- SAR – Search and Rescue
- RACES – Radio Amateur Civil Emergency Services (HAM – Amateur Radio)
- VIPS – Volunteers in Police Services
- DRIVER – County Vehicle Endorsement
- Other: \_\_\_\_\_

Step 13: Card ordered by: \_\_\_\_\_

On: \_\_\_\_\_

Step 14: Record created in VDB: by: \_\_\_\_\_

On: \_\_\_\_\_

# Volunteer Personnel File Checklist:

Volunteer's Name: \_\_\_\_\_

|  |             |
|--|-------------|
| Membership:  | Start Date: |
| <input type="checkbox"/> EOC – Emergency Operations Center   |             |
| <input type="checkbox"/> SAR – Search and Rescue   |             |
| <input type="checkbox"/> RACES – Wahkiakum County Radio Amateur Civil Emergency Services (HAM – Amateur Radio) |             |
| <input type="checkbox"/> VIPS – Volunteers in Police Services  |             |
| <input type="checkbox"/> CERT – Community Emergency Response Team  |             |

|  | ITEM   | DATE COMPLETED OR REVIEWED |
|--|--|----------------------------|
| <input type="checkbox"/> Present<br><input type="checkbox"/> N/A | Application                                    | Date: _____<br>Date: _____ |
| <input type="checkbox"/> Present<br><input type="checkbox"/> N/A | Emergency Worker Card                          | Date: _____<br>Date: _____ |
| <input type="checkbox"/> Present<br><input type="checkbox"/> N/A | Copy of DL                                     | Date: _____<br>Date: _____ |
| <input type="checkbox"/> Present<br><input type="checkbox"/> N/A | Drivers Check letter                           | Date: _____<br>Date: _____ |
| <input type="checkbox"/> Present<br><input type="checkbox"/> N/A | Background Investigation letter                | Date: _____<br>Date: _____ |
| <input type="checkbox"/> Present<br><input type="checkbox"/> N/A | Digital Photo                                  | Date: _____<br>Date: _____ |
| <input type="checkbox"/> Present<br><input type="checkbox"/> N/A | Print ID                                       | Date: _____<br>Date: _____ |
| <input type="checkbox"/> Present<br><input type="checkbox"/> N/A | Volunteer Policy                               | Date: _____<br>Date: _____ |
| <input type="checkbox"/> Present<br><input type="checkbox"/> N/A | Oath of Confidentiality                        | Date: _____<br>Date: _____ |
| <input type="checkbox"/> Present<br><input type="checkbox"/> N/A | County Insurance Request letter<br>(If needed) | Date: _____<br>Date: _____ |
| <input type="checkbox"/> Present<br><input type="checkbox"/> N/A | Specialty Letter (If needed)                   | Date: _____<br>Date: _____ |

