

Tillamook County Sheriff's Office
Application For Individual Volunteer Services

It is the standard procedure of the Tillamook County Sheriff's Office to do a criminal record check on all applicants. We reserve the right to decline the services of an applicant or to terminate the services of a volunteer. Any checks we make into your background will be confidential. Please feel free to discuss this with us before you complete this form. It is our goal to give you a rewarding volunteer experience, while giving the people we serve quality service.

Please provide the following information (Print or Type) for placement as a Tillamook County Sheriff's Office Volunteer.

NAME (Last, First, Middle): _____

CONTACT NUMBERS: HOME: _____ CELLPHONE: _____

STREET & MAILING ADDRESS (City, State, Zip): _____

Social Security Number: _____ Date of Birth: _____

Drivers License Number: _____ State: _____ Expiration Date: _____

Do you have reliable transportation: (Circle One) YES NO

Current Employer: _____

Supervisor: _____ Job Title: _____

From: _____ To: _____ Describe your duties: _____

Education: Please check all that apply: [] Grade School, [] High School, [] G.E.D., [] College

If College, Degree Received: _____

References: Please list three non-relative contacts.

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Have you ever had any contact with the Police: _____

Describe Physical Limitations (if any): _____

What type of Volunteer work would you prefer to do?
Please check all that apply: Office Work, Corrections/Jail Reserve, Patrol Deputy Reserve,
 Other: _____

What times are you available to perform volunteer work?
Please check all that apply: Mornings, Afternoons, Evenings, Nights
 Monday, Tuesday, Wednesday, Thursday, Friday, Saturday, Sunday

Please list any previous volunteer experience, if any: _____

Do you have any special training, interests or skills: _____

In case of Emergency, who do you want notified:
Name: _____ Relationship: _____
Telephone: _____

I, _____, hereby volunteer my services to assist the Tillamook
County Sheriff's Office in the accomplishment of its authorized services. I understand that my services
as a volunteer will be governed by the "Agreement for Voluntary Services" which will be provided to
me.

Signature of Volunteer: _____ Date: _____

Sheriff's Office Representative: _____ Date: _____

Complete Application and mail to:
Dayshift Sergeant, Tillamook County Jail, 5995 Long Prairie Rd, Tillamook, OR 97141