APPLICATION TO VOLUNTEER

Please print clearly and fill in all sections. Date Received:

Personal Information

Surname			Given Names
All Other Names Since Birth			Place of Birth
Are you: ❒ Male ❒ Female ❒ Other			DOB (YYYY/MM/DD)
Street Address	City	Province	Postal Code
Home Phone	Cell Phone		Work Phone
Email Address(s) - Print Clearly			How long have you been a resident of Metro Vancouver?
Driver's Licence or BC ID #	Have you read the "Volunteering" and "Programs" sections on the website? ❒ Yes ❒ No		Do you meet the criteria to volunteer? ❒ Yes ❒ No

What CPC Programs & Activities are you interested in?

❒ Information Services | Front Office ❒ CPTED (Community Cleanup, Murals, Grafitti Paint Outs)

❒ Foot Patrol ❒ Bike Patrol ❒ Speedwatch ❒ Child Find

❒ Community Outreach ❒ Special Events ❒ Board of Directors

Other Areas of Interest (please specify): _____

General Availability

❒ Weekdays ❒ Week Nights ❒ Weekends

❒ Mornings (10 a.m. - Noon) ❒ Afternoons (Noon - 6 p.m.) ❒ Evenings (6-8 p.m.)

Grandview-Woodland Community Policing Centre • 1977 Commercial Drive, Vancouver, BC V5N 4A8
TEL 604 717-2932 • FAX 604 717-2923 • EMAIL: volunteercoordinator@gwcpc.ca • www.gwcpc.ca

Work | Education

Where do you work? _____

❒ Full Time ❒ Part Time ❒ Unemployed

What is your occupation? _____

Where do you go to school? _____

❒ Full Time Student ❒ Part Time Student

What are you studying? _____

Are you: ❒ Retired ❒ Other

Please specify: _____

About You

State the reasons for your interest in volunteering and why you consider yourself to be a good candidate to work with this community policing centre.

What do you expect to gain from volunteering with the GWCPC?

How did you hear about volunteer opportunities at GWCPC?

❒ GoVolunteer ❒ GWCPC | VPD Website ❒ JI Info Session ❒ Walk-in ❒ Word of Mouth ❒ CPC Volunteer

If you were referred through another CPC volunteer, what is thier name?

❒ Yes ❒ No Do you have access to the Internet?

❒ Yes ❒ No Do you read email at least once per day?

❒ Yes ❒ No Are you considering a career with a police force, border services, jail guard, or other law enforcement agency? If so, which one(s)

Provide 3 References

Name	Occupation	Relationship	Phone #
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CONFIDENTIALITY AFFIRMATION

I hereby affirm that in my position as a volunteer with the Grandview-Woodland Community Policing Centre I will be handling confidential information and will not discuss this information outside of the GWCPC. I will exercise due care with the information I provide to citizens. If I have questions regarding the disclosure of information to the public I will consult the Neighbourhood Police Officer or GWCPC staff.

I understand that no document is to be copied and/or removed from the Grandview-Woodland Community Policing Centre without the permission of the Neighbourhood Police Officer or GWCPC staff.

I will not discuss specific facts and/or personal data concerning victims and witnesses and any other clients I serve with members of the media, private citizens or, other victims or witnesses.

I understand that I cannot promise complete confidentiality to any victim or witness to whom I provide service, in that under rules of evidence, I may be subpoenaed to appear in Court and give testimony, and will advise clients of this fact.

I will not dicuss my services with any member of the media without prior approval of the Neighbourhood Police Officer or Office Coordinator. If I want to write about my experiences with the Grandiview-Woodland Community Policing Centre, I will seek permission from the Neighbourhood Police Officer or Office Coordinator.

I have read the above “Confidentiality Affirmation” and agree to the above statements.

Print Name	Applicant Signature	Date (YY/MM/DD)

VOLUNTEER CONTRACT

If I am approved to volunteer at the GWCPC:

Completion of this form is voluntary and it is only to be completed with the knowledge that a VPD Criminal Record and back ground check will be conducted subsequent to consideration as a volunteer.

The GWCPC needs volunteers to confidentially disclose information about any contact with police or police incident information so that it can be appropriately considered in determining continued eligibility for engagement as a volunteer.

I acknowledge that volunteer applicants are required to comply with the criminal record and background check process for consideration in all roles that involve working with at risk individuals, and/or confidential personal information. I am also aware that failure to fully disclose police interactions that may be deemed relevant could be cause for ineligibility.

The GWCPC's commitment is to ensure that only related criteria are used to evaluate applicants. Please be assured that no one will be denied volunteer engagement because of a contact with police that is not related to the prospective volunteer engagement.

I agree to complete a minimum of 4 hours volunteering per month, each month, in the community and/or at the GWCPC office, to record volunteer hours promptly and to notify the GWCPC and request to be put on the excused list if I am unable to meet the 4 hour commitment during a calendar month.

I understand that when I become a GWCPC volunteer, I will also become a member of the Grandview-Woodland Community Police Office Society, which will give me the right to vote at the GWCPC AGM. Membership will continue during the time I am volunteering and extend for 2 years after I cease being an active volunteer, unless I resign/or terminated as a member of the Society.

I understand that my name and contact information will be made available to other volunteers at the GWCPC for the purpose of scheduling shifts efficiently.

I understand that as a volunteer I may be photographed during the course of volunteer activities and that these photos may be used in promotional materials or on our website or other social media to showcase GWCPC activities.

Print Name	Applicant Signature	Date (YY/MM/DD)

GWCPC POLICY

I understand and accept that it is the Grandview-Woodland Community Policing Centre's policy to not provide feedback if my application to be a volunteer is unsuccessful.

I hereby attest that the information contained in this application is true to the best of my knowledge and I agree to submit my name for a criminal record and back ground check by the Vancouver Police Department.

Print Name	Applicant Signature	Date (YY/MM/DD)