



Chelan County Sheriff's Office

Brian Burnett, Sheriff

Law and Justice Bldg ★ 401 Washington Street #1 ★ Wenatchee, WA 98801
Phone: (509) 667-6851 ★ Fax: (509) 667-6860

Dear Applicant:

I would personally like to thank you for your interest in the Chelan County Sheriff's Office Volunteer Services Division. The attached applications must be filled out completely and signed, including the waiver form. Included in this packet are descriptions of duties assigned to Volunteer Services as well as minimum qualifications, and reasons for disqualification. Please take the time to review this information and if you choose to apply, mark on the top of the application the division(s) you are most interested in based on your abilities and skills.

After a successful background investigation has been completed, and requirements have been fulfilled, you will be contacted by e-mail or telephone and added to the appropriate call out lists.

Please mail your applications to:

Eileen Ervin
Chelan County Sheriff's Office Emergency Management
408 N. Western
Wenatchee, WA 98801

Again, thank you for applying, and welcome to Chelan County Sheriff's Office Volunteer Services.

Sincerely,

Mike Bryant
Volunteer Services Coordinator

Integrity ★ Teamwork ★ Excellence

John Wisemore
Chief of Operations



Roxanne Giffin
Chief Civil Deputy



Jan Brincat
Executive Assistant



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WAIVER AND AUTHORIZATION TO RELEASE INFORMATION

I respectfully request and authorize you to furnish any law enforcement agency any and all information that you may have concerning me, my employment record, school record, military history, criminal record, and general reputation. Please include any and all medical, physical and mental records or reports, including all information of a confidential or privileged nature, and photocopies of the same if requested. This information will be used for the purpose of determining my eligibility for a volunteer position in the Chelan County Sheriff's Volunteer Services.

This waiver and authorization shall supersede any prior waiver, authorization, release or direction that I may have given you to the contrary concerning my records.

I understand my rights under Title 5, U.S.C., Section 552a, the Privacy Act of 1974, and waive those rights with the understanding that information furnished will be used by a law enforcement agency in conjunction with the volunteer process.

I hereby release you, your organization or others from any liability or damage which may or could result from furnishing the information requested above or from any subsequent use of such information in determining my qualifications as a volunteer within the Chelan County Sheriff's Volunteer Services.

_____	_____	_____
Print Your Full Name	Date of Birth	Social Security Number
_____	_____	_____
Signature	Address	

If you are under 18 years of age, please have your parent or guardian sign below.

By signing for my son or daughter, I understand he/she will be required to commit time to this program in Chelan County. I also understand a background check will be completed by the Chelan County Sheriff's Office.

_____	Parent of: _____
Signature	Date: _____

Integrity ★ Teamwork ★ Excellence

John Wisemore
Chief of Operations



Roxanne Giffin
Chief Civil Deputy



Jan Briucat
Executive Assistant

Chelan County Sheriff's Office Citizen Corps Volunteer Services Division Descriptions

Chaplain Service	Volunteer Chaplains provide ministerial support and counseling to Chelan County Sheriff's Office employees, family members and the community.
ADCOM	Communications - Volunteers may assist in with Communications functions on a detail. Office/Record Services - Volunteer members assist with clerical/records needs for the Volunteer Services Division of the Chelan County Sheriff's Citizen Corps. Support – Volunteers serve in a variety of ways to support ground units during a detail (food preparation, equipment check in/check out, etc.)

Special Operations – Search and Rescue:

Back County SAR	Sustained backcountry travel without external support (a minimum of three days) during search and rescue operations. Must have knowledge of basic backcountry travel, advanced navigation, wilderness survival and use of personal equipment.
Canine SAR	Search and/or tracking dog use in a variety of search and rescue operations. Must possess or have access to a dog capable of SAR Certification.
Dive Team SAR	Technical dive operations in situations requiring the use of SCUBA equipment during rescues, recoveries, and evidence searches. Members must have a demonstrated technical ability in the disciplines required for these situations.
Ground SAR	Search and rescue operations on the ground/urban areas with support services assistance. Must have knowledge of basic and urban search and rescue operations and use of personal equipment.
Initial Response SAR	A first response search and rescue team which will be ready to go at a moment's notice with "hasty" packs stocked for basic needs. Must have knowledge of basic search and

rescue operations and use of personal equipment. Also referred to as the **HASTY TEAM**.

Marine Patrol

A limited commissioned marine patrol deputy while volunteering in uniform. Performs boat patrol, marine law enforcement, search and rescue and assists the dive team. Should be capable of handling a boat in a variety of marine-related scenarios.

Nordic SAR (Snowshoes/Ski)

Ski and snowshoe use and travel in a variety of winter conditions for use in search and rescue. Must have knowledge of basic backcountry travel, advanced navigation, wilderness survival, and use of personal equipment.

Special Operations – Support Operations:**Equipment
Maintenance**

Volunteer members will be required to ensure that all SAR equipment is kept in good condition and report any problems to the Captain-Special Operations. Scheduling and coordination of regular maintenance may also be a part of the volunteer's duties.

**ORV Team
(Motorcycle/4x4/ATV)**

ORV (off road motorcycles, all terrain vehicles, or specialized four wheel drive vehicles) use and travel in a variety of conditions for conducting search and rescue. Must possess or have access to an off road vehicle capable of search and rescue operations.

Snowmobile Team

Snowmobile use and travel in a variety of winter conditions for use in search and rescue. Familiarity with basic-advanced riding skills, maintenance and use of personal equipment.

Citizen's Advisory Committee (CAC)**Town Meetings**

The CAC would conduct a certain number of community meetings that would be advertised as "town meetings". The communities and locations to be determined by the Sheriff. These meetings would always be open to the Public.

MINIMUM REQUIREMENTS:

16 years of age

Clear, Unrestricted Driver's License (May be waived for Adcom positions)

Completion of ICS 100 and ICS 700 prior to receiving Department ID Card

Completion of First Aid/CPR prior to receiving Department ID Card

Satisfactory Criminal History Check

Chelan County Sheriff's Volunteer Services Membership Application

Applying for: Marine Patrol Special Operations Administrative Services

Special Ops. Includes: Equip. Maint., MC/4x4/ATV Team, Snowmobile Team, Special Ops Training, Backcountry SAR, Canine SAR, Dive Team SAR, Ground SAR, Initial Response SAR, Nordic SAR, Swiftwater Rescue Team.

Admin. Svcs. Includes: ADCOM (Office/Records and/or Communications) and Chaplain Service.

Please check/circle the units that you are interested in.

INSTRUCTIONS

This form must be completed in your own handwriting and signed in ink. If a question does not apply to you, write "N/A" (Not Applicable) as your response to that question. **If additional space is needed for any questions on this form, entries should be continued on a separate sheet of paper and numbered to correspond with the number of the question on this form.**

Information we have about you may be given to Federal, State, and local agencies for checking on law violations or other lawful purposes.

PERSONAL DATA

1. NAME: LAST			FIRST			MIDDLE			2. NICKNAMES OR ALIASES (including Maiden Name)			
3. HOME ADDRESS: NUMBER, STREET, STATE, ZIP CODE			4. Email address			5. HOME PHONE # - ALTERNATE PHONE #						
Mailing address if different:												
6. BIRTHDATE			7. PLACE OF BIRTH			8. SEX		9. Height	10. Weight	11. Hair Color	12. Eye Color	
Month	Day	Year				<input type="checkbox"/> Male <input type="checkbox"/> Female						
13. HIGHEST SCHOOL GRADE ATTAINED			14. U.S. CITIZEN			15. NATURALIZATION CERTIFICATE NO.						
			<input type="checkbox"/> Yes <input type="checkbox"/> No									

EMPLOYMENT DATA

16. CURRENT EMPLOYER			17. HOW LONG?			18. OCCUPATION					
19. EMPLOYMENT ADDRESS						20. EMPLOYMENT PHONE # AND SUPERVISOR'S NAME					
21. HOURS OF EMPLOYMENT			22. DAYS OFF			23. SOCIAL SECURITY NUMBER					
24. EMPLOYMENT HISTORY (Include last ten years)											
25. Have you ever been fired, discharged or asked to resign from any position? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain:											
26. Would you have difficulty in working or dealing with members of the opposite sex, different origin, race, religion, or nationality? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain.											
27. Would you be able to follow direct orders, even though you may not agree with them?											
28. Would any problem result if your present employer were contacted during the course of the background investigation? <input type="checkbox"/> Yes <input type="checkbox"/> No											
If "no", when should such contact be made? _____											

29. If you have had no prior employment, please explain in the space below:

MILITARY AND OTHER DATA

30. Have you ever served in the Armed Forces, National Guard, or military reserves of the United States? No Yes If Yes, please complete questions 31-35:

31. BRANCH OF SERVICE	32. SERVICE NUMBER	33. DATES OF SERVICE ____/____ to ____/____	34. TYPE OF DISCHARGE
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35. Have you ever been the subject of any judicial or non-judicial disciplinary action while in the military, National Guard or military reserves? No Yes If yes, please give details (include branch of service, when, where, circumstances).

36. Have you ever been placed on court supervision or probation? No Yes If Yes, please explain:

DRIVING RECORD DATA

37. DRIVER'S LICENSE NUMBER(S) AND ISSUING STATE:

38. Has your privilege to operate a vehicle ever been suspended, revoked or been refused by an issuing agency? No Yes If yes, please explain:

SPECIAL INTERESTS/SKILLS, TRAINING & EXPERIENCE

39. List any special licenses you hold (such as pilot, radio operator, scuba, etc.) showing licensing authority, original date of issue, and date of expiration.

40. List any specialized machinery or equipment that you can operate, e.g., 4x4, snowmobile (including office machines and typing speed), or talent (computer programmer, electrician, locksmith, mechanic, etc.) or other skills you have that you are willing to assist the Sheriff's Office with:

41. If you are fluent in any foreign language that may be useful, indicate the language and your degree of fluency (excellent, good, or fair) in each area:

Language	Reading	Speaking	Understanding	Writing
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42. Explain any search and rescue related training or experience. Please provide documentation, if available:

43. List any specialized training or experience. Include any experience in the medical field, military, forest service, emergency services, climbing, extended hiking, etc.

EMERGENCY NOTIFICATION

44. NAME	45. PHONE NUMBER
46. ADDRESS	47. RELATIONSHIP

THREE REFERENCES

48. NAME	49. ADDRESS	50. PHONE NUMBER

PERSONAL STATEMENT/WAIVER & AUTHORIZATION TO RELEASE INFORMATION

51. I understand that by signing this application, I will be required to commit time to this program. Also, I am giving authorization to the Chelan County Sheriff's Office to make inquiries into my background, employment history, school record, military history, criminal history, driving records, and general reputation. I understand my rights under Title 5, U.S.C., Section 552a, the Privacy Act of 1974, and waive those rights with the understanding that information furnished will be used by a law enforcement agency in conjunction with the volunteer process. I hereby certify that the entries made by me on this statement are true, complete, and correct to the best of my knowledge and belief. Further, I do hereby release you, your organization, your agents, and others from any liability or damage which may result from furnishing information to the Chelan County Sheriff's Office pursuant to this waiver and authorization to release information.

Signed: _____ Date: _____

If you are under 18 years of age, please have your parent or guardian sign below. (MUST BE AT LEAST 16 Years of Age to APPLY.)

By signing for my son or daughter, I understand he/she will be required to commit time to this program in Chelan County. I also understand a background check will be completed by the Chelan County Sheriff's Office.

Signed: _____ Date: _____

Parent or Guardian of: _____

FOR OFFICIAL USE ONLY

Date Received:

Spillman Information:

Employee #:

NCIC III/WASIS:

Liaison Deputy Signature:

Captain ADCOM Signature:

Date Completed: