



## *Volunteers In Police Service (VIPS)*

### **MIRAMAR POLICE DEPARTMENT**

**3064 North Commerce Parkway, Miramar, Fl. 33025**

**Dear VIPS Applicant:**

Thank you for your interest in becoming a Volunteer in Police Service. Enclosed is an application for you. Please return the completed application to:

**VOLUNTEER COORDINATOR**  
**3064 North Commerce Parkway**  
**MIRAMAR, FL. 33025**  
**Telephone: 954-602-4351**  
**[okidane@ci.miramar.fl.us](mailto:okidane@ci.miramar.fl.us)**

The Miramar Police Department Volunteers in Police Service Program (VIPS) emphasizes service to the community as a whole. Volunteers assist officers in tasks that are on going and necessary to the police mission. Confidentiality is imperative and all potential volunteers are subject to a background investigation prior to acceptance.

A general knowledge of office procedures is helpful but not necessary. We can utilize persons who are willing to do repetitious tasks such as filing, stapling, and data entry. Many of our positions require some level of typing. We have a number of positions for persons who have a working knowledge of computers. A volunteer should plan to commit to a six-month period with a minimum workweek of four hours.

After your application has been processed, you will be called to set up an appointment to start your background check.

(PLEASE PRINT OR TYPE)

**PERSONAL INFORMATION:**

<b>Last Name</b>			<b>First Name</b>			<b>Middle</b>		
<b>Home Address</b>								
<b>City, State</b>						<b>Zip Code</b>		
<b>Date of Birth</b>				<b>Age</b>		<b>Sex M/F</b>		<b>Social Security Number</b>
<b>Place of Birth (City, State, Country)</b>								
<b>Other names used</b>						<b>Home Phone</b>		
<b>Cell/Pager</b>						<b>Work Phone</b>		
<b>Email Address (if applicable)</b>								
<b>Previous Address(s) Last 5 years</b>								

**EDUCATION BACKGROUND AND MILITARY EXPERIENCE:**

Please circle the highest level of education completed:

High School 1 2 3 4      College 1 2 3 4 5 6 7 8

<b>High School/City, State</b>				<b>College/City, State</b>				
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**Degrees or certificates earned**

**Military Service Branch**

<b>Rank</b>		<b>Time Served</b>		<b>Date Discharged</b>				
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**Do you speak or read a foreign language? Yes No Which one(s)?**

**CRIMINAL HISTORY AND DRIVING RECORD:**

**Florida Drivers License Number**

**Has your license ever been suspended or revoked?  Yes  No**

**Traffic citations and accidents for the last 5 years:**

**Have you ever been questioned, detained, arrested, investigated, warned or issued a citation for any misdemeanor or felony, other than traffic, either as an adult or juvenile?  Yes  No**

**Have you ever been convicted of a crime?  Yes  No**

**If yes, please explain: \_\_\_\_\_**

**If yes, list the name of the agency or court, date of contact, reason for contact, charge if any, sentence if any, and disposition of incident (including deferred sentences). Provide full details on supplemental sheets when necessary.**

<b>Date</b>		<b>Agency or Court</b>			<b>Charge</b>			
<b>Sentence</b>					<b>Disposition</b>			
<b>Notes</b>								

**REFERENCE**

**DO NOT USE FAMILY MEMBERS AS REFERENCES. List 3 individuals you have known for at least 5 years. Please list name, complete address, and telephone number.**

<b>Name</b>	<b>Phone</b>
<b>Street Address, City, State, Zip Code</b>	
<b>Name</b>	<b>Phone</b>
<b>Street Address, City, State, Zip Code</b>	
<b>Name</b>	<b>Phone</b>
<b>Street Address, City, State, Zip Code</b>	

**EMPLOYER HISTORY: (Please fill out completely) List employment for the last 5 years beginning with the most recent.**

<b>Firm Name</b>	<b>From/ To (Month/Year)</b>
<b>Street Address, City, State, Zip Code</b>	
<b>Firm Name</b>	<b>From/ To (Month/Year)</b>
<b>Street Address, City, State, Zip Code</b>	
<b>Firm Name</b>	<b>From/To (Month/Year)</b>
<b>Street Address, City, State, Zip Code</b>	

**VOLUNTEER INTEREST:**

**How much time do you have to volunteer? (Please circle)**

Days Available	Time	Hours Available/week	Preferred division
M T W TH FR SAT SUN	AM PM	4 6 10 15 +	

**List any skills or interests, which would assist in placing you in an appropriate assignment. Attach additional sheets if necessary.**

**Please list any memberships in any community organizations and previous/present volunteer experience**

**Briefly, state why you wish to volunteer your time to the Miramar Police Department. (Use additional sheet if necessary) This question must be answered.**

**EMERGENCY CONTACT:**

**List persons to notify in case of an emergency.**

**Name**

**Address**

**Home Phone:**

**Work Phone:**

**Cell:**