



City Of Lima Volunteer Application Citizen Block Patrol

Please complete the following Application Form, answering all questions completely.
Applications that are incomplete will not be considered.

Applicant Information

Last Name		First Name		Middle Initial	
DOB	Other names used		Place of Birth		
Address		City/State/Zip			
Previous Address		Previous Address			
Home Phone		Cell Phone			
Email Address					
Driver License Number		Has your license ever been suspended or revoked? Y N			
Employer		Address/Phone			
Occupation		How long?			
Have you ever been arrested?				Yes	No
Any traffic citations or accidents in the last 2 years?				Yes	No
Have you ever been convicted of a crime?				Yes	No
If yes, please explain?					

References

References must not be family members. List at least 2 people you have known for at least 2 years.

Name		Address			
Telephone		Email			
Name		Address			
Telephone		Email			
Please explain why you wish to volunteer your time for Citizen Block Patrol?					

Have you volunteered before? If so, what did you do and where?

Is there a Community Policing Substation in your neighborhood? If so where?

Is there a Neighborhood Association in your area and are you a member?

Circle what you are most interested in: Block Watch Block Patrol School Patrol

Citizen Block Patrol Agreement

Carefully read each statement below and initial. Sign and date the bottom.

I understand that the following terms of participation are designed with the safety of all Block Patrol volunteers in mind, and that any violation of these terms will result in my removal from the Citizen Block Patrol.

I understand that I have a right to consult with an attorney prior to executing this agreement and liability release.

I understand that I am never to carry, conceal, or use any type of weapon-like object while with the Block Patrol. This includes any item that could be used to inflict pain or injury to persons or animals.

I agree to attend all required training sessions for voluntary participation in the Citizen Block Patrol.

I agree to make every effort to attend the Quarterly Citizen Block Patrol Meetings.

I understand and accept that there are potential risks to voluntarily participating in the Citizen Block Patrol, and I will do everything I can to minimize these risks to myself and others.

I hereby agree to hold harmless and release the City of Lima, including any of its departments, divisions, officers, officials, employees, and agents, of all demands, actions, damages, and causes of action whatsoever arising or resulting from my participation in the Citizen Block Patrol.

I hereby declare that the terms of this agreement have been provided and fully explained, and that I understand them. I have freely and voluntarily entered into this agreement and liability release with the City of Lima.

I agree to fully comply with all rules, regulations, policies, and instructions given to me during Citizen Block Patrol orientation, training, actions, or functions.

Printed
Name

Signature

Date

City of Lima

VOLUNTEER PROGRAM

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I, _____, do hereby authorize a review of and full disclosure of all criminal records concerning myself to any duly authorized agent of the City of Lima, whether the records are of a public, private, or confidential nature.

I understand that any information obtained by a personal history background investigation that is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for citizen block patrol volunteer work by the City of Lima. I also certify that any person(s) who may furnish such information concerning me shall not be liable for giving this information, and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even if the said photocopy does not contain an original writing of my signature.

Printed Name		Signature	
Other Names Used			
Current Address			
Previous Address			
Date of Birth			
Social Security Number			
Phone			
Date Signed			