

WATERTOWN POLICE DEPARTMENT

2016 CAMP CHANCE VOLUNTEER APPLICATION

The position you are applying for requires a local background check.

"Inspiring Our Youth To Achieve By Building Rapport And Self-Esteem Through Community Support"

Name: _____
Last
First
MI

Maiden or Former Name: _____

Circle: Male Female

Address: _____
Street
City
State
Zip

Telephone: _____
Home
Work
Cell

E-Mail Address: _____

Date of Birth: _____

Place of Work: _____ Title: _____

If student, list school and grade level: _____

List any Special Skills or Talents: _____

Work Address: _____ Phone Number: _____

School Address _____

List any Special Needs: _____

When can you volunteer? <small>(circle dates that Apply)</small>	July 12th _____	July 19th _____	July 26th _____
	July 13th _____	July 20th _____	July 27th _____
	July 14th _____	July 21st _____	July 28th _____

Beside each day that you can volunteer, please write in what time choice you will be working.

Volunteer time choices are:

- All Day (8 am – 5 pm)
- Morning (8 am – noon)
- Afternoon (noon – 5 pm)

T-shirt size	Adult: S	Adult: M	Adult: L	Adult: XL	Adult: XXL	Adult: XXXL
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Breakfast is for youth only	Will you be eating lunch: (circle one)	Yes	No
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List two references: _____
Name
Phone Number

Name
Phone Number

I AGREE TO ABIDE BY THE RULES SET FORTH BY CAMP CHANCE AND THAT I HAVE COMPLETED THE APPLICATION TO THE BEST OF MY KNOWLEDGE. BY SIGNING BELOW, I UNDERSTAND THAT A BACKGROUND CHECK WILL BE CONDUCTED.

Signature of Volunteer Applicant: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

(minimum volunteer age is 16 yrs old)

Return completed applications to: Watertown Police Department ATTN: Connie Cutler

128 N Maple St Watertown SD 57201

Phone: 882-5237

Fax: 882-6216

or email: ccutler@watertownpd.com

DEADLINE TO RETURN APPLICATION: MAY 31ST, 2016