

JUVENILE JUSTICE and DELINQUENCY PREVENTION COMMISSION (JJDPC) VOLUNTEER APPLICATION AND PERSONAL HISTORY

Print or Type

Department:	Positi	on Desired: COMMISSIONER			
Location: COUNTYWIDE	Days and Hours Available As needed				
Full Name:					
A 1.1					
Number and Street If you have used any other name:	City s and or aliases	Zip Code please list on the back of Application.			
Length of Residence in California:					
If Less Than 4 Years, List Previous Addre	esses:				
Cell Phone:	E-mail Address:				
Date of Birth:	Social Secui	rity Number:			
Driver's License No.:(List any known restrice	Driver's License No.: State: Class: Expiration Date: (List any known restrictions on the back of Application)				
EMPLOYER INFORMATION: List Curr	ent or Most Rec	ent Employer First			
1) COMPANY NAME:		PHONE:			
ADDRESS: Number and Street	Oit.	7'n Oada			
	•	Zip Code			
FROM:					
JOB TITLE/DUTIES:					
2) COMPANY NAME:		PHONE:			
ADDRESS:					
Number and Street	,	Zip Code			
FROM:					
JOB TITLE/DUTIES:					
3) COMPANY NAME:		PHONE:			
ADDRESS:					
Number and Street	City	Zip Code			
FROM:	TO				
JOB TITLE/DUTIES:					

EDUCATIONAL BACKGROUND:

HIGH SCHOOL			
NAME:			
ADDRESS:			
YEAR:		Graduated Yes	No
COLLEGE OR UNIVERSITY			
NAME:			
ADDRESS:			
MAJOR:	DEGREE/YE	AR:	
GRADUATE WORK			
NAME:			
ADDRESS:			
MAJOR:	DEGREE/YE	AR:	
PLEASE LIST ANY OTHER S photography, computer, machi NAME OF CERTIFICATE		ge spoken fluently.)	DATE
PLEASE LIST BELOW: All ce			

ALI	APPLICANTS V	VILL BE SI	UBJECT TO A CR	IMINAL BACKGRO	DUND CH	ECK	
1.	. Are you currently on any form of Probation or Parole?					No	
2.	Are any of your relatives/anyone residing in your home currently on probation/parole? Yes No						
3.	Have you ever been (A conviction reco	convicted of	an offense other than utomatically disquali	a minor traffic violation	? Yes er position)	_ No	
4.	Has your driver's lice	ense ever bee	en suspended or revok	xed?Yes _		_ No	
5.	If you answered "Ye	s" to any of q	uestions 1-4, provide t	the following information	ո:		
	DATE OF OFFENSE	OFFENSE	SENTENCING DATE	DISPOSITION	CITY/STA	ΛΤΕ	
6.	Can you perform the	e essential fur	nctions of the position(s)?Yes No			
 Do you currently have medical insurance?YesNo If "Yes," please provide the following: 							
	Carrier		Policy Number	Cover	age Period	I	
The follo 8. 9.	Are you minimally cove (If yes, please prov	ered for auto lia vide a copy o	bility insurance as require of your current auto in	ervice requires the use of a by the State of California nsurance declaration of the decla	?Yes page.)	s No	
10.	Why do you want to	volunteer an	d what do you expect	to gain personally from	this experie	nce?	
11.	What are your hobb	ies, interests,	clubs and organizatio	n involvement?			

Place of Birt	h:				
Height:	Weight:	Sex:	Hair Color: _	Eye (Color:
Have you ev	er been terminated	or asked to re	sign?	YES _	NO
	e and when: references, other the				
Full Name	Address	City	//State/Zip	Phone #	Relationship to You & Occupation
Have you ev	er applied for a pea	ice officer posi	tion?	_YES	NO
Volunteer po	ositions you are inte	rested in:			
Volunte	eer JJDPC Commis	ssioner (4 year	appointment)	JJI	OPC Youth Commissioner (18-21 years old)
Studer	nt Intern (3 month co	ommitment)			
Class f	for Internship:		Instr	uctor monitoring	Internship:
			Ph	one number	
COMMITTIN REIMBURSE APPLICABL COMMISSIC CHECK IS N THE SOLE CONTINUE QUALIFICAT MINIMUM Q OF CONFI CONSCIENT	IG MYSELF TO YOU ED FOR ANY OU E BY THE RIVER ON BYLAWS. IT MADE ON ALL VO PURPOSE OF EN PROVIDING VOLU TIONS TO BECOME DENTIALITY COME TIOUSLY ADHER	OUR PROGR T OF POCKE SIDE COUNT IS ALSO MY LUNTEERS A /ALUATING T JINTEER SER ME A VOLUM OR PAID POS NSTITUTES EE TO THE IND CODE O	AM FOR THE INTERPRISES TY JUVENILE OF THE SUITABILITY THE SUITABILITY THE SUITABILITY THE SHOULE SITIONS. I A MISDEMEALE F ETHICS. I HE	PERIOD AGRE EXCEPT THOS JUSTICE AND ING THAT A F LTS OF SUCH TY OF A VOLU ERSTAND THAT D NOT BE CO LSO UNDERST NOR CRIMINAL COUNTY PI JEREBY CERT	UNDERSTAND THAT I AMED UPON. I WILL NOT BESTED UPON. I WILL WAS ARE UTILIZED FOR INTEER TO COMMENCE OF THE MINIMUM INSTRUED AS MEETING THE TAND THAT A VIOLATION. OFFENSE AND I AGREE TO ROBATION DEPARTMENT'S UPON. I WILL STATEMENT'S UPON. I WILL WAS AND THAT ALL STATEMENT'S UPON.
SIGNATURE	<u> </u>			D/	ATE

Riverside County Juvenile Justice and Delinquency Prevention Commission

Contact Information:

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JJDPC Support Secretary
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