Sumter County Sheriff's Office
Application for Volunteer Services

Name: _____
Last First Middle

Address: _____
City State Zip

Telephone: ( ) ____-_____ Date of Birth___/___/____ SSN ____-____-_____

Occupation: _____ Employer: _____

In Case of Emergency Notify: _____ Telephone: _____-_____

Volunteer Experience:_____
_____

Have you ever been convicted of a crime other than a minor traffic offense? Yes_____ No_____
If Yes, Explain: _____
_____
_____

References: _____
Name Telephone

_____
Name Telephone

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For Office Use Only:
Criminal History Run_____ Fingerprints: _____
Interview Completed _____ Interviewer: _____
Comments: _____
_____
Approval: _____ Disapproval: _____
Volunteer Coordinator: _____
Additional Comments:
_____
_____
_____

Signature: _____

The collection of your Social Security Number is for the purpose of your identification