



Reno Police Department
“Your Police, Our Community”

Jason Soto
Chief of Police

Dear SAVE Candidate:

Thank you for your interest in our Senior Auxiliary Volunteer Effort (SAVE). The SAVE Program is an important part of our effort to provide excellent service to the Reno Community. Volunteers now perform many tasks previously assigned only to paid police personnel. Some of these tasks include enforcing handicapped parking violations, posting notices on abandoned vehicles, documenting graffiti locations, assisting officers at scenes of vehicle accidents and providing visible patrol in school and park areas. This collaboration allows paid personnel to concentrate on proactive enforcement and other crime prevention matters.

SAVE members are provided with a uniform, badge and other necessary equipment to perform a variety of tasks upon successful completion of a training period. You may work under the direction of Police Officers and experienced SAVE members depending on your assignment at the time. Your personal safety is paramount and as such, you will always be paired up with a partner and instructed to avoid confrontational situations.

You will be expected to work four 4-hour shifts and attend one 2-hour training session per month. You may always select your own work schedule, including shift hours and days. Shift hours normally consist of 6:30am to 10:30am and 12:00pm to 4pm, Monday - Friday. Your extended travel plans, personal and health needs will, of course, take priority over SAVE assignments.

You can expect interesting new challenges in your role as a SAVE member and become a valuable asset to our organization. Additionally, you will have the opportunity to meet new friends who may have similar interests as yours. You will also provide an important service to your community as well.

Please complete and return the attached application forms. You can use Email, US Mail, or drop them off at the Reno Police Station’s front desk at 455 E. Second St. You will be contacted at a later date once all the submitted documents have been reviewed. Interviews are held at the Reno Police Station, 455 E. Second St.

If you have any questions regarding your application process, feel free to contact our SAVE office at the phone number shown below.

Respectfully,

Chairman
Senior Auxiliary Volunteer Effort
Reno Police Department



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Senior Auxiliary Volunteer Effort
Personal History Statement Instructions
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Instructions to the Applicant:

The information you provide in the Personal History Statement will be used to assist in determining your suitability for membership in the SAVE Program. Your statement will be reviewed by SAVE Executive Board Members and a records check will be completed by the Reno Police Department.

The contents of this packet will be considered **confidential** and will be used only for background investigative purposes.

There is one exception to the confidentiality of your background investigation. Should it be discovered that you are currently involved in criminal activity, or have committed an undiscovered felony, the law enforcement agency having jurisdiction WILL BE NOTIFIED.

Any negative factor in your background will be evaluated in terms of the circumstances surrounding its occurrence, and consideration will be given regarding its relevance to this position.

All statements are subject to verification and your signature is required on pages 1, 3 and 4 of this application.

Upon completing this application packet, you can return it to us via US Mail (We've enclosed a self-addressed envelope), via Email, or drop it off at the Reno Police Station's front desk at 455 E. Second St.

Additional questions may be referred to the SAVE office at (775) 348-6925. Please leave a message and a SAVE member will return your call.

I have read and completely understand the above information and agree to this process.

Applicant Signature

Date

Printed Name



Reno Police Department
Senior Auxiliary Volunteer Effort
Personal History Statement/Application
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1. Name: (please print in ink): _____
Last First Middle

2. List other names you have used or been known by.
 Include maiden, married, adopted, and nicknames: _____

3. Date of Birth: ___/___/___ Age: ___ Height: ___ Sex: ___ Place of Birth: _____
M/F City/State

4. S.S. Number: _____ - _____ - _____ (verification for background purposes only) 5. Ethnicity _____
Disclosure is voluntary

6. Operation of a motor vehicle will be part of the position for which you have applied. An investigation of your driving history will be made through a records check. Please supply the following information:

Driver's License Number	Driver's Lic. Expiration	State	Name as Printed on License
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7. Home Address: _____
Street City State Zip

8. List your mailing address **if different** from above:

Mailing Address: _____
Street City State Zip

9. How can we contact you: Home phone: _____ Cell phone: _____

Email Address: _____ Cell phone carrier: _____

10. List place(s) of residence, if different than above, for the past ten (10) years, including address, city and State:

11. List places of employment for past ten (10) years (Attach additional sheets if necessary):

12. List any identifying marks, i.e. tattoos, scars, etc.:

13. Have you ever been: Arrested /Convicted of a crime or traffic offense/Received a moving vehicle ticket? ___ Yes ___ No
If yes, please provide details on a separate sheet of paper, even if you were not convicted.

14. Have you ever been convicted on a charge of domestic violence? ___ Yes ___ No

15. Do you have a Concealed Weapons Permit? ___ Yes ___ No

16. Do you have Military/Law Enforcement service? ___ Yes ___ No If yes, Branch: _____

Type of Discharge: _____ Retired from Military? (Yes/No): _____



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Senior Auxiliary Volunteer Effort

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AUTHORIZATION TO RELEASE INFORMATION

As a candidate for security clearance with the Reno Police Department, I am required to furnish information for use in determining my qualifications and suitability. I realize that the Reno Police Department will not release the information provided to them to any person, including myself. However, information may be release to another law enforcement agency pursuant to NRS 239B, Disclosure of Person Information to Government Agencies. The information submitted to these agencies is confidential and will be used only for investigating my suitability for participation in the programs previously identified.

Toward this end, I authorize release of any and all information that you may have concerning me, including information of a confidential or privileged nature. I hereby authorize all of my previous employers, physicians, and professionals who may have treated me, friends, acquaintances, credit reporting services, public agencies and all others to furnish to the Reno Police Department and all information they may have concerning me.

I hereby release you, your organization, or others from liability or damage, which may result from furnishing the information requested. I further authorize that a photocopy of this form shall be for all intents and purposes as valid as the original. I authorize you to retain a copy of this form for your files.

CERTIFICATION AND PENALTY

I hereby declare that all statements and information provided to the Reno Police Department in the Personal history statement as well as any other statements and information provided for my pre-employment (volunteer) background investigation or any other phase of my security clearance screening, are true and complete to the best of my knowledge and belief. I understand that any misstatement of material fact, willful omission of the material fact, or willful deception will be cause for disqualification and rejection as a candidate for security clearance without appeal. I further understand that these aforementioned misstatements, omissions, or deceptions are also grounds for termination after the security clearance, without notice and without any right of appeal.

SECURITY CLEARANCE INVESTIGATION DISCOVERY WAIVER

As a candidate to the Reno Police Department, I recognize that an employing law enforcement agency has a legal as well as moral obligation to take every reasonable effort to ensure that persons provided security clearance by them as police officers or in other positions conform to the highest standards.

Therefore, I release and hold harmless the Reno Police Department, and their officers, agents, or assigns, now and in the future, from any claim or damages in law of equity on behalf of myself, my heirs and assigns, for their refusal to make available any organization(s) which may have supplied information in the course of this investigation, as well as the substance of the information supplied.

I hereby, waive my right, now and in the future, to examine, review and otherwise discover the contents of this investigation and all related documents thereto.

I hereby grant permission to the Police Department to conduct an inquiry into my background to determine my suitability for appointments.

Dated this _____ day of _____, 20_____

Date of Birth and Social Security Number: _____

Signature of person waiving rights

Name Printed

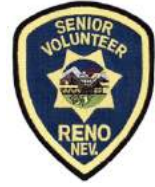
Witness Signature

Name Printed



Reno Police Department
Senior Auxiliary Volunteer Effort
Medical Statement

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Dear Applicant,

The basic physical responsibilities of being a SAVE Officer involve driving a motor vehicle, being a passenger in a motor vehicle, using a police radio, and completing various forms and reports. Plus, you must have a valid and current Nevada Driver's License.

SAVE members are expected to be physically capable of performing the following functions:
 Read and Write, Drive, Sit, Walk, Hear, Speak, and Lift.

Please answer the questions listed below. Also, please note that having any "Y" answers on this form will **not** automatically disqualify you from being accepted into the SAVE program.

- 1) Do you have any physical balance problems? Y N
- 2) Do you have any limited range of motion? Y N
- 3) Are you unable to grasp and hold objects? Y N
- 4) Are you unable to lift and carry objects weighing less than 10 pounds? Y N
- 5) Do you have less than a full range of vision, that can't be corrected with glasses or contacts? Y N
- 6) Are you restricted from night time driving? Y N
- 7) Do you have less than a full range of hearing, that can't be corrected with hearing aids? Y N
- 8) Do you have a physical condition, which in your judgment, would affect your ability to sit in a vehicle for extended time periods or to frequently enter/exit the vehicle? Y N
- 9) Have you recently demonstrated any limited or diminished abstract thinking? Y N

I believe that I am physically capable and have the cognitive skills to participate in the SAVE Program with the following exceptions:

Applicant's Signature

Date