

## EMPLOYMENT

Name and contact information for present employer, if applicable.

Name

Tel. No.

May we contact your employer?  Yes  No

## EDUCATION

### HIGH SCHOOL

Completed:  Yes  No

(if no, indicate highest level obtained)

### POST SECONDARY

University Program:

Completed:  Yes  No (if no, indicate highest level obtained)

College/Institute Program:

Completed:  Yes  No (if no, indicate highest level obtained)

Other

## REFERENCE INFORMATION

List two references who may be contacted.

References may be of a personal, business, educational or volunteer nature.

Name | Relationship

Tel. No.

Name | Relationship

Tel. No.

## CONDITIONS, RELEASE, AND WAIVER

As a volunteer, I fully understand and agree to the following:

- The RCMP will carry out a security screening to a level and degree as required by my volunteer position and activities. I may be required to provide additional information to facilitate this security screening.
- I will respect and be guided by the expectations found in the Values and Ethics Code for the Public Sector, the RCMP Organizational Values and Ethics Code, and Conflict of Interest.
- My participation in any and all RCMP volunteer programs and activities is at the discretion of the RCMP and the RCMP can terminate my participation at any time.

**ATTENTION:** Any false information given in this application will be grounds for denial, or, if accepted, immediate dismissal.

I, \_\_\_\_\_, give permission to the RCMP to obtain all information necessary to qualify me as a volunteer with the RCMP Volunteer Program that I am applying for. It is understood that the RCMP will have a final authority in the approval or rejection of the application. This decision will be final. I may request an explanation for the decision but, depending on the circumstances, the criteria and method of arriving at the decision may not be subject to disclosure.

By signing this form, I acknowledge that I have read, understand and agree to the above conditions, release and waiver. I also authorize the RCMP to contact the references provided concerning my suitability as a volunteer. I acknowledge I was given the opportunity to ask questions and received satisfactory answers to these questions.

Signature of Applicant

Date

For more information, visit us on the web at  
[www.bc.rcmp.ca](http://www.bc.rcmp.ca)  
or visit your local detachment

# RCMP IN BC



## Get Connected



[www.bc.rcmp.ca](http://www.bc.rcmp.ca)

## RCMP VOLUNTEER APPLICATION

All information contained in this pre-screening application, provided by the volunteer, will be protected by the Royal Canadian Mounted Police (RCMP) in accordance with applicable legislation. Information collected is used only to determine eligibility and suitability of the volunteer.

Surname

Given Name(s)

Home Address

City Prov. P.C.

Home Tel. No. Alternate Tel. No.

Email Date of Birth (if under 19)

Valid Driver's License?  Yes  No

Emergency Contact

Tel. No. Alternate Tel. No.

## LANGUAGES

### LANGUAGE(S) SPOKEN

French  English

Other - specify: \_\_\_\_\_

### LANGUAGE(S) WRITTEN

French  English

Other - specify: \_\_\_\_\_

## APPLICANT INFORMATION

The Nanaimo RCMP detachment operates two volunteer programs:

The **Auxiliary Constable program** requires a minimum commitment of two years and 160 hours per year, ability to maintain a police security clearance, and successful completion of a 140 hour training program.

The **Community Policing volunteer program** requires a minimum commitment of six months and 4 hours per month, ability to maintain a successful pass with a basic police information check and successful completion of a 9 hour training program and a 3 month probation period. Please check one or both of the programs that are of interest to you.

Auxiliary Constable Program

Community Policing Program

## AVAILABILITY

When are you available to volunteer? Please number one or more boxes in order of preference.

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
Morning							
Afternoon							
Evening							



## COMMITMENT TO DIVERSITY

The RCMP is committed to developing inclusive, barrier-free selection processes and environments. If contacted in relation to a volunteer opportunity, you should advise the RCMP in a timely fashion of the accommodation measures that must be taken to enable you to be assessed in a fair and equitable manner. Information received relating to accommodation measures will remain confidential.

## SUITABILITY QUESTIONNAIRE

Please describe why you would like to become a volunteer with the RCMP.

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What are your expectations for your experience as an RCMP volunteer?

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Please describe any volunteer or work experience you have that may be relevant.

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Please describe any special skills, training, interests or hobbies that may be relevant. You may list any organizations, clubs, etc. to which you belong that you feel are relevant to this application.

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