

CITY/TOWN:	
PROVINCE:	POSTAL CODE:
CONTACT INFORMATION PRIMARY PHONE #: EMAIL:	
IN CASE OF EMERGENCY, CONTACT: $_$	
RELATIONSHIP:	PHONE #:
CONTRIBUTE TO THE SKILL SET TO POLICING CENTRE VOLUNTEER:	BECOME A GRANDVIEW-WOODLAND COMMUNITY
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HOW DID YOU BECOME AWARE OF THE VOLUNTEER OPPORTUNITIES AT GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE?

\square GWCPC STAFF/VOLUNTEER \square VISITING CENTRE \square WORD OF MOUTH
\square VOLUNTEER RECRUITMENT ORGANIZATION \square SOCIAL MEDIA/ WEBSITE \square SCHOOL
□ VPD RECRUITING/ INFO SESSION
WHAT WOULD YOU LIKE TO GAIN FROM YOUR EXPERIENCE AS A GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE VOLUNTEER?
ARE YOU LOOKING FOR: ☐ SHORT TERM (LESS THAN 6 MONTHS) OR
☐ LONG TERM (OVER 6 MONTHS) VOLUNTEER COMMITMENT?
WHICH PROGRAMS ARE YOU INTERESTED IN PARTICIPATING IN?
☐ INFORMATION SERVICES ☐ CRIME PREVENTION THROUGH ENVIRONMENTAL DESIGN (CPTED)
□OUTREACH □FOOT PATROLS □SPEED WATCH □SENIORS OUTREACH/EVENTS
□CHILD CAR SEAT EDUCATION □NEWSLETTER □WEBSITE/ SOCIAL MEDIA □BOARD MEMBER



ARE YOU CONSIDERING A CAREER WITH A POLICE FORCE, BORDER SERVICES, JAIL GUARD, OR OTHER LAW ENFORCEMENT AGENCY? IF SO, WHICH ONE(S) AND WHEN DO							
YOU ANTICIPATE APPLYING?							
WHAT IS YOUR		_		_			
COMMUNITY F YOUR GENERA		•	PLEASE CHEC	CK BOXES T	HAT CORF	RESPOND W	ТН
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDA
Morning							
Afternoon							
Evening 6-8pm							
PROFESSION GRANDVIEW-WC	ODLAND C	OMMUNITY					
REFERENCES AS							
FIRST & LAST NA				RELATIONSHI	P:		_
OCCUPATION F				00.			
PHONE NUMBER	C.		_EIVIAIL ADDRE	SS:			
FIRST & LAST NA	AME:		i	RELATIONSHI	P:		_
OCCUPATION F	POSITION:_						
PHONE NUMBER	R:		_EMAIL ADDRE	SS:			
FIRST & LAST NA	AME:			RELATIONSHI	P:		_
OCCUPATION F							
PHONE NUMBER				SS:			

APPLICANTS MUST BE: AT LEAST 18 YEARS OF AGE, CONSENT TO A BACKGROUND CHECK AND LIVE IN THE GREATER VANCOUVER AREA.



I UNDERSTAND THE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE DOES NOT PROVIDE UPDATES OR FEEDBACK ON APPLICATION STATUS UNLESS I AM CONTACTED FOR AN INTERVIEW. THE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE RESERVES THE RIGHT TO NOT DISCLOSE REASONS FOR DENIAL, ACCEPTANCE OR DELAY INTO THE VOLUNTEER PROGRAM.

APPLICANT'S SIGNATURE:	
DATE SIGNED:	
YEAR / MONTH / DATE	

BACKGROUND CONSENT FORM

IN ORDER TO OBTAIN A VOLUNTEER POSITION, I AM REQUIRED TO SHOW I AM OF GOOD CHARACTER.

BY SIGNING THIS FORM AND COMPLETING THE VPD POLICE INFORMATION CHECK FORM, I AUTHORIZE THE VANCOUVER POLICE DEPARTMENT TO INQUIRE AND DETERMINE WHETHER OR NOT I HAVE EVER BEEN INVESTIGATED, CHARGED, OR CONVICTED OF A CRIMINAL OFFENCE PRIOR TO. AND DURING MY TENURE AS COMMUNITY POLICING VOLUNTEER.

I FURTHER AUTHORIZE THE VANCOUVER POLICE DEPARTMENT TO OBTAIN A FULL AND COMPLETE DISCLOSURE OF ALL FACTS UNCOVERED.

I FURTHER AGREE THAT THE VANCOUVER POLICE DEPARTMENT MAY CONTACT MY VOLUNTEER AND PAID WORK SITES, AND THE INDIVIDUALS I HAVE PROVIDED AS REFERENCES.

IN ADDITION TO THE ABOVE, I AGREE TO ABIDE BY THE VOLUNTEER RULES AND RESPONSIBILITIES AS THEY CURRENTLY EXIST, AND TO ANY AMENDMENTS AND ADDITIONS AS THEY ARE PUBLISHED.

I UNDERSTAND THAT MY ACCEPTANCE AS A VOLUNTEER AND CONTINUED INVOLVEMENT IN THE PROGRAM WILL BE AT THE SOLE DISCRETION OF THE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE'S EXECUTIVE DIRECTOR AND/OR VOLUNTEER COORDINATOR.

I FURTHER UNDERSTAND THAT THE VANCOUVER POLICE DEPARTMENT RESERVES THE RIGHT NOT TO DISCLOSE REASONS RESULTING IN A DENIAL OR ACCEPTANCE INTO THE VOLUNTEER PROGRAM.

APPLICANT'S SIGN	ATURE:	
DATE SIGNED:		
	YEAR / MONTH / DATE	



CONFIDENTIALITY AFFIRMATION

I HEREBY AFFIRM THAT IN MY POSITION AS A VOLUNTEER WITH THE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE I WILL BE HANDLING CONFIDENTIAL INFORMATION AND WILL NOT DISCUSS THIS INFORMATION OUTSIDE OF THE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE. I WILL EXERCISE DUE CARE WITH THE INFORMATION I PROVIDE TO CITIZENS. IF I HAVE QUESTIONS REGARDING THE DISCLOSURE OF INFORMATION TO THE PUBLIC, I WILL CONSULT THE NEIGHBOURHOOD POLICE OFFICER OR GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE STAFF.

I UNDERSTAND THAT NO DOCUMENT IS TO BE COPIED AND/OR REMOVED FROM THE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE WITHOUT THE PERMISSION OF THE NEIGHBOURHOOD POLICE OFFICER OR GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE STAFF.

I WILL NOT DISCUSS SPECIFIC FACTS AND/OR PERSONAL DATA CONCERNING VICTIMS, WITNESSES, AND ANY OTHER CLIENTS I SERVE, WITH MEMBERS OF THE MEDIA, PRIVATE CITIZENS, OR OTHER VICTIMS OR WITNESSES.

I UNDERSTAND THAT I CANNOT PROMISE COMPLETE CONFIDENTIALITY TO ANY VICTIM OR WITNESS TO WHOM I PROVIDE SERVICE, IN THAT UNDER RULES OF EVIDENCE, I MAY BE SUBPOENAED TO APPEAR IN COURT AND GIVE TESTIMONY, AND WILL ADVISE CLIENTS OF THIS FACT.

I WILL NOT DISCUSS MY SERVICES WITH ANY MEMBER OF THE MEDIA WITHOUT PRIOR APPROVAL OF THE NEIGHBOURHOOD POLICE OFFICER OR GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE STAFF. IF I WANT TO WRITE ABOUT MY EXPERIENCES WITH THE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE, I WILL SEEK PERMISSION FROM THE NEIGHBOURHOOD POLICE OFFICER OR GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE STAFF.

I HAVE READ THE ABOVE "CONFIDENTIALITY AFFIRMATION" AND AGREE TO THE ABOVE STATEMENTS.

APPLICANT'S SIGNATURE:	
DATE SIGNED:	

VOLUNTEER

IF I AM APPROVED TO VOLUNTEER AT THE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE:

COMPLETION OF THIS FORM IS VOLUNTARY AND IT IS ONLY TO BE COMPLETED WITH THE KNOWLEDGE THAT A VPD CRIMINAL RECORD AND BACKGROUND CHECK WILL BE CONDUCTED SUBSEQUENT TO CONSIDERATION AS A VOLUNTEER.

THE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE NEEDS VOLUNTEERS TO CONFIDENTIALLY DISCLOSE INFORMATION ABOUT ANY CONTACT WITH POLICE OR POLICE

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INCIDENT INFORMATION SO THAT IT CAN BE APPROPRIATELY CONSIDERED IN DETERMINING CONTINUED ELIGIBILITY FOR ENGAGEMENT AS A VOLUNTEER.

I ACKNOWLEDGE THAT VOLUNTEER APPLICANTS ARE REQUIRED TO COMPLY WITH THE CRIMINAL RECORD AND BACKGROUND CHECK PROCESS FOR CONSIDERATION IN ALL ROLES THAT INVOLVE WORKING WITH AT-RISK INDIVIDUALS, AND/OR CONFIDENTIAL PERSONAL INFORMATION. I AM ALSO AWARE THAT FAILURE TO FULLY DISCLOSE POLICE INTERACTIONS THAT MAY BE DEEMED RELEVANT COULD BE CAUSE FOR INELIGIBILITY AND/OR DISMISSAL.

THE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE COMMITMENT IS TO ENSURE THAT ONLY RELATED CRITERIA ARE USED TO EVALUATE APPLICANTS. PLEASE BE ASSURED THAT NO ONE WILL BE DENIED VOLUNTEER ENGAGEMENT BECAUSE OF A CONTACT WITH POLICE THAT IS NOT RELATED TO THE PROSPECTIVE VOLUNTEER ENGAGEMENT.

I AGREE TO COMPLETE A MINIMUM OF 4 HOURS VOLUNTEERING PER MONTH, EACH MONTH, IN THE COMMUNITY AND/OR AT THE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE OFFICE, TO RECORD VOLUNTEER HOURS PROMPTLY AND TO NOTIFY THE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE OFFICE AND REQUEST TO BE PUT ON THE EXCUSED LIST IF I AM UNABLE TO MEET THE 4 HOUR COMMITMENT DURING A CALENDAR MONTH.

I UNDERSTAND THAT WHEN I BECOME A GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE VOLUNTEER, I WILL ALSO BECOME A MEMBER OF THE GRANDVIEW-WOODLAND COMMUNITY POLICE OFFICE SOCIETY, WHICH WILL GIVE ME THE RIGHT TO VOTE AT THE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE ANNUAL GENERAL MEETING. MEMBERSHIP WILL CONTINUE DURING THE TIME I AM VOLUNTEERING AND EXTEND 2 YEARS AFTER I CEASE BEING AN ACTIVE VOLUNTEER, UNLESS I AM TERMINATED AS A MEMBER OF THE SOCIETY.

I UNDERSTAND THAT MY NAME AND CONTACT INFORMATION WILL BE MADE AVAILABLE TO OTHER VOLUNTEERS FOR THE PURPOSE OF SCHEDULING SHIFTS EFFICIENTLY.

I UNDERSTAND THAT AS A VOLUNTEER I MAY BE PHOTOGRAPHED DURING THE COURSE OF VOLUNTEER ACTIVITIES AND THAT THESE PHOTOS MAY BE USED IN PROMOTIONAL MATERIALS, ON THE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE OFFICE WEBSITE, OR OTHER SOCIAL MEDIA TO SHOWCASE GRANDVIEW-WOODLAND COMMUNITY POLICING CENTRE ACTIVITIES.

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DATE SIGNED:		