



TRACY REECE
Chief Probation Officer

EDWARD BARRY
Assistant Chief Probation Officer

175 West Fifth Street, 4th Floor
San Bernardino, CA 92415-0460
(909) 387-6118 or Fax (909) 387-6116
volunteers@prob.sbcounty.gov
sanbernardinocountyprobation.org

Volunteers-in-Probation Application

- Internship VIP Regular Youth Accountability Board Special Programs Reach Religious NA/AA

Name: _____
(Last) (First) (Middle Initial)

Maiden name or other name used: _____

SS#: _____ D.O.B.: _____ Place of Birth: _____

Address: _____
(Number) (Street) (City)

Home Tel. #: _____ Cell #: _____

E-mail address: _____

Emergency Contact: _____
(Name) (Phone) (Relationship)

EMPLOYMENT: Occupation: _____ Employer: _____

Length of employment: _____ Work Tel. #: _____

Can you be contacted at this number? Yes No Hours: _____

EDUCATION: Highest Level of Education: _____ School: _____ City: _____

Special Courses taken and/or degrees: _____

Languages spoken fluently: _____

ARREST HISTORY:

Have you or any family member ever been arrested or convicted for any offense other than minor traffic violations?

Yes or No (If yes, please explain)

(Include juvenile, adult and military offenses and serious Vehicle Code offenses such as driving under the influence, reckless driving or hit & run.)

Date	Offense	City/State	Disposition
_____	_____	_____	_____
_____	_____	_____	_____

AUTOMOBILE INFORMATION:

Driver's license #: _____ Expiration date: _____ License plate #: _____

Has your driver's license ever been revoked or suspended? Yes No

If yes, please explain: _____

AUTOMOBILE INSURANCE INFORMATION:

Insurance coverage is necessary for your protection should you be required to transport another person:

Required minimum coverage: Public liability: \$15,000 - \$30,000 Property damage: \$10,000

Does your policy meet these requirements: Yes or No

Has your policy ever been canceled, rescinded, or lapsed? Yes or No

Name of insurance company: _____ Policy #: _____

Agent's name: _____ Telephone: _____

Address: _____

Briefly state your reasons for wanting to volunteer for the Probation Department:

INDICATE WHICH PROGRAM / AREA YOU WISH TO PARTICIPATE IN:

Detention Corrections Bureau:

Juvenile Detention and Assessment Center Gateway Treatment Services - Boys Youth Justice Center

Community Corrections Bureau:

Adult Services Juvenile Services Other: _____

Area of Preference:

San Bernardino Rancho Cucamonga/Fontana
 Victorville Morongo/Joshua Tree
 Barstow

Days and hours available: _____

TWO REFERENCES (Non-Relatives): Indicate name, **COMPLETE** mailing address and phone number.

Name	Address (City/State/Zip code)	Phone
1. _____	_____	_____
2. _____	_____	_____

VOLUNTEERS-IN-PROBATION COMMITMENT

I willingly offer my services as a volunteer to the San Bernardino County Probation Department. I agree that if any services involve transportation of any person, I will carry adequate liability insurance on my vehicle. I am willing to complete any required training courses. I will submit monthly reports to the Probation Department regarding my assigned responsibilities as required. I will keep all information concerning probation clients CONFIDENTIAL. I grant permission for the Probation Department to conduct a background, criminal, and vehicle record check, which is standard procedure for all new employees and volunteers.

I hereby certify that all statements made on this application form are true to the best of my knowledge. I understand that untruthful or misleading answers are cause for rejection of my application or dismissal.

The department retains full rights to choose or reject an application at-will and is under no obligation to disclose reasons for their decision.

SIGNATURE: _____ DATE: _____



TRACY REECE
Chief Probation Officer

EDWARD BARRY
Assistant Chief Probation Officer

175 West Fifth Street 4th Floor
San Bernardino, CA 92415-0460
(909) 387-6114 or Fax (909) 387-5827
volunteers@prob.sbcounty.gov
www.joinprobation.org

FINGERPRINT APPLICATION

Type or Print Clearly in Ink / Complete all sections. This information will remain confidential.

Name: _____ Aliases/Maiden: _____
(Last) (First) (Middle Initial)

SS #: _____ DOB: _____ Gender: M F

List any Social Security numbers, dates of birth or names by which you have been identified:

California Driver's License #: _____ Date of Expiration: _____

Ht: _____ Wt: _____ Eye Color: _____ Hair Color: _____ Race: _____

Place of Birth: _____ Country of Citizenship: _____

Address: _____
(Number) (Street) (City) (State) (Zip Code)

Home Telephone: _____ Work Telephone: _____

Cell Telephone: _____ E-mail address: _____

Except for Minor Traffic Violations:

Have you ever been arrested for any violation of the law? YES NO

Have you ever been indicted for any violation of the law,
or have you ever been a defendant in a criminal proceeding? YES NO

Have you ever been convicted of any violation of the law? YES NO

Have you, your significant other, or any members of your immediate
family ever been on Probation or Parole? YES NO

If your answer is "Yes" to any of the above questions, explain including dates, locations, and significant details:

I grant the Probation Department permission to conduct a background, criminal, and vehicle record check, which is standard procedure for all new employees and volunteers.

I acknowledge that if, for any reason, the Probation Department does not select me for volunteer work, they are under no obligation to explain why. I also acknowledge if chosen for a volunteer position, I may be terminated, or released from service at any time, without cause, and without right of appeal.

I hereby certify that all statements made on this application form are true to the best of my knowledge. I understand that untruthful or misleading answers are cause for rejection of my application or dismissal.

SIGNATURE: _____

DATE: _____