Volunteers In Police Service Introduction What are V.I.P.S.

We are the eyes and ears of the Cedar Lake Police Department and the officers. If we see something, we say something. We do not get involved.

We are an all-volunteer unit. That means we do not receive payment or compensation for our services.

We are not police officers. We CANNOT make arrests, pull vehicles over for any kind of violations or enforce any laws. We must abide by all federal, state and local laws, as well as all road laws and regulations while in VIPS vehicles. In addition, we are not awarded any exemptions given to law enforcement officers.

We are not allowed to carry weapons of any kind, this includes, and is NOT limited to, firearms, defensive sprays, edged weapons or blunt weapons. This applies regardless of any other certifications, licenses, training or military service who may have.

We are not an accredited education facility. Meaning that, whatever training you receive while on the unit will not be credited towards any type of certification, license or degree. Such as, and not limited to, college credit, Law Enforcement Academy credit or internship credit.

Note: Please include a copy of your driver's license with this application.

Application For Membership

Date:			VIIS
Name:		1	POLICE
Address:			IN
State/Province:			
Zip/Postal Code:		VOLUNTEER	RS IN POLICE SERVICES
SS Number:			(VIPS)
Email Address:			nteer division of the
Home Phone:			E POLICE DEPARTMENT
Cell Phone:			Constitution Ave.
Date you can start w	vork:	(21 (21	ar Lake, IN 46303 9) 374-5416 Ph. 9) 374-9231 Fx. v.cedarlakein.org
Do you have a drivers License #:	State of issue:		
	. , , , ,	no How many?	
Do you had any movi	ng violations in the past 3 years? yes	no How many?	
If yes, please explain	onvicted of a crime: yes no		
Education			
Type of School	Name of School and Complete Mailing	Address No. Years Com	pleted Major or Degree
High School			
College Bus. or Trade School			
Professional School			
Other			
Veteran of U.S. Mi	litary service?	es, Branch:	

Previous Employment (list up to 3)

1.	
Name of Employer:	
Name of last supervisor	4
Dates of employment:	
From:	То:
Complete Address:	
Phone #:	
Last job title:	
Reason for Leaving (be	specific):
List the jobs you held, d	uties performed, skills used or learned, advancements, or promotions while you worked at this company:
May we contact your en	aployer: () yes () no
2.	
Name of Employer:	
Name of last supervisor	
Dates of employment:	
From:	To:
Complete Address:	
Phone #:	
Last job title:	·
Reason for Leaving (be	specific):
List the jobs you held, d	uties performed, skills used or learned, advancements, or promotions while you worked at this company:
May we contact your en	nployer: () yes () no

5.	_						
Name of Employer:							
Name of last supervis	sor:						
Dates of employmen	t:						
From:		То:					
Complete Address:				_			
Phone #:							
Last job title:							
Reason for Leaving (b	oe specific):						
List the jobs you held	l, duties perforr	med, skills used	or learned, adv	ancements,	or promotions while y	ou worked at this co	mpany:
May we contact your	employer:	yes () no					
•	. ,), ₍					
Skills:							
Typing:							
Computer: OPC	○ Mac	Both					
Applications (list all t	that apply):						
Other Skills:							
Please list 2	reference	es other	than rela	atives a	nd previous	employers	
Name							
Position							
Company							
Telephone							
Use this space to add	l any additional	information ne	cessary to desc	ribe your ful	l qualifications for the	position which you	are applying:

I CERTIFY THAT ALL ANSWERS GIVEN BY ME ARE TRUE, ACCURATE, AND COMPLETE. I UNDERSTAND THAT THE FALSIFICATION, MISREPRESENTATION OR OMISSION OF FACT ON THIS APPLICATION (OR ANY OTHER ACCOMPANYING OR REQUIRED DOCUMENTS) WILL BE CAUSE FOR DENIAL OF EMPLOYMENT OR IMMEDIATE TERMINATION OF EMPLOYMENT, REGARDLESS OF WHEN OR HOW DISCOVERED.

Questions regarding this statement should be directed to the Human Resources Director before signing. The application will be given every consideration, but its receipt does not imply that the applicant will be employed.

It is the policy of the Town of Cedar Lake to afford equal opportunity to all employees and applicants for employment without regard to age, race, religion, color, sex, national origin, marital status, pregnancy, and to afford equal opportunities to disabled veterans, veterans of the Vietnam era, and individuals with a disability, and any and all other characteristic protected by Federal, State, or Local law.

I authorize the investigation of all statements and information contained in this application. I release from all liability anyone supplying such information and I also release the Town of Cedar Lake from all liability that might result from making an investigation.

If hired, I agree to abide by all Town employment rules and regulations, and understand that if employed, my employment may be terminated with or without cause, and with or without notice, at any time, at the option of either the Town or me. I further understand that no representation, whether oral or written by any representative or agent of the Town, at any time, can constitute a contract of employment. I understand that the Town and its administrators shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies, procedures, benefits or other terms or conditions of employment. No representative or agent of the Town, has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

I acknowledge that I have read and understand the above statements and hereby grant my permission to confirm the information supplied by me on this application.

Applicant Signature:	Date:	