



**LYON COUNTY SHERIFF'S OFFICE  
VOLUNTEERS IN POLICING  
APPLICATION**

**Attach Copy of  
Front and back of  
Driver's License**

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Last, First, Middle)

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Education:**

**High School:** \_\_\_\_\_ Date Graduated/GED: \_\_\_\_\_

City/Location: \_\_\_\_\_ State/Country: \_\_\_\_\_

**College:** \_\_\_\_\_ # Yrs/Degree: \_\_\_\_\_ Date: \_\_\_\_\_

City/Location: \_\_\_\_\_ State/Country: \_\_\_\_\_

Major: \_\_\_\_\_

**Trade/Military Schools:** \_\_\_\_\_ Diploma: Yes  No

City/Location: \_\_\_\_\_ State/Country: \_\_\_\_\_

Field: \_\_\_\_\_

**Military Service:** Branch & Service Dates: \_\_\_\_\_ Discharge Type: \_\_\_\_\_

**Employment:** List all employers for last 5 years. If retired for over 5 years list last employer.

**Employer:** \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ City & State/Country: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Related Duties:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Employer:** \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ City & State/Country: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Related Duties:

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Employer: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ City & State/Country: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Related Duties:

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List any current or previous Volunteer Organization affiliations: \_\_\_\_\_

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Positions held: \_\_\_\_\_

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Related Duties: \_\_\_\_\_

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**Specialty Skills and Experiences:** List skills and experiences you have that will be of special service to our citizens and the Lyon County Sheriff's Office. Include experiences as a Volunteer.

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Have you ever been charged or convicted of a Felony?  yes  no (If yes explain below)

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Have you ever been charged or convicted of a Gross Misdemeanor?  yes  no (If yes explain below)

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Have you ever been charged or convicted of a Misdemeanor?  yes  no (If yes explain below)

Have you ever been charged or convicted of Domestic Violence?  yes  no (If yes indicate when & where below)

Have you ever been charged or convicted of DUI?  yes  no (If yes indicate when & where below)

Are you now using or have you ever used an illegal controlled substance?  yes  no

If yes, when was last time and what was used?

A Nevada driver's license is required to operate county vehicles. In order to be a VIP Member you either need a Nevada driver's license or a NV Identification card.

Do you have a valid Nevada driver's license, Nevada ID card or other State driver's license or ID Card? (Indicate appropriate information below)

yes NV License # \_\_\_\_\_ Or NV ID card # \_\_\_\_\_

yes Other State (Specify): \_\_\_\_\_ License/ ID card # \_\_\_\_\_

no

Have you received a traffic citation in last 10 Years?  yes  no (If yes explain below)

Have you ever had your driver's license suspended in Nevada or any other state?  yes  no  
(If yes explain below)

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for your interest in the Lyon County Sheriff's Office VIP Program. Please also complete the next page (Volunteer Statement of Confidentiality and Waiver Form) and submit completed application to the Lyon County Sheriff's Office or any Sheriff's Office Substation.

Brad Pope

Sheriff

LYON COUNTY

"To Protect and Serve"



## Volunteer in Policing (VIP) Applicant Statement Acknowledging Confidentiality, Waiver and Policy

I understand that any material omissions and/or false information I record on the application will be sufficient reason for rejection of this application or termination of my Volunteer status. I authorize and request former employers, schools, individual agencies, organizations or law enforcement agencies to answer any and all questions that may be asked and do hereby withhold such persons harmless for giving any information within their knowledge or record.

As a condition of acceptance as a Volunteer, I agree to submit documents relating to my identity and employment authorization within prescribed time limits in accordance with the Immigration Reform and Control Act of 1986.

I understand that I do **not** have the right to continue my status or utilize appeal rights as a Volunteer if terminated. Also, I understand that I am **not** an employee of Lyon County, Nevada or any department thereof, and am **not** eligible for any remuneration or benefits of any kind or nature. Therefore I acknowledge that **I am an AT-WILL Volunteer** who may be terminated or released at any time by the Sheriff, or upon majority vote of the VIP staff.

I understand and agree that in the performance of my duties as a Volunteer with Lyon County Sheriff's Office, I will hold all names and information regarding the department in the strictest of confidence. Further, I understand that intentional or voluntary disclosure of confidential information to unauthorized sources may result in my termination.

I agree to release the County of Lyon, Nevada, its department, and employees from accountability for any accident, or other liability incurred or suffered by me while carrying out the duties of a Volunteer.

Volunteer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Applicant: Please also complete the following information needed for Sheriff's record:**

SSN: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_ Birthplace: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Aliases/Maiden Name: \_\_\_\_\_ Blood Type (If Known) \_\_\_\_\_

(Area below for VIP personnel use only)

VIP Representative \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\* NOTICE FOR VIP PROCESSOR: TAKE PHOTO OF Front and Back of DRIVER'S LICENSE OR IDENTIFICATION**