

## **RIVIERA BEACH POLICE DEPARTMENT'S** **VOLUNTEERS IN POLICE SERVICE PROGRAM**

The City of Riviera Beach Police Department (RBPB) is seeking enthusiastic persons to join the Department's volunteer program, the Riviera Beach Volunteers in Police Service (RBVIPS) program. The RBVIPS program is a distinguished program that enhances manpower and embodies the community-oriented philosophy of the RBPB. It is the fundamental premise of the RBPB that through a partnership with our community, criminal activities can be reduced subsequently improving the quality of life in our historic community. RBVIPS program members can make a difference by volunteering just eight (8) hours or more a month.

RBVIPS program members assist the RBPB by performing a variety of important assignments such as:

- Crime Prevention Presentations
- Critical Incidents Assistance (severe weather, accidents, etc.)
- Special Events Assistance
- Traffic Monitoring
- Special and Supplemental Patrols
- Support Services

If you are dedicated to the betterment of your community with an ardent interest in law enforcement, or simply desires to assist the sworn members of RBPB, you should consider joining the RBVIPS program. RBVIPS program members must meet the following minimum qualifications:

- Be at least eighteen (18) years old.
- Be eligible to work in the United States.
- Have no criminal record.
- Have a valid driver's license or ID.

If accepted, RBVIPS members attend training for their volunteer assignment that may include courses in computer applications, crime scene procedures, parking enforcement, patrol techniques, radio procedures, report writing, traffic control and direction, traffic monitoring, etc.

If interested, please contact Carolyn Goddard, RBPB Volunteer Coordinator, at (561) 561-632-5377 or via e-mail at: [cgoddard@rivierabch.com/](mailto:cgoddard@rivierabch.com/).

**City of Riviera Beach Police Department  
Volunteers in Police Service Program Application**

FULL NAME: \_\_\_\_\_  
Last                      First                      Middle                      Nickname

ADDRESS: \_\_\_\_\_  
Street                      City                      State                      Zip Code

PHONE NUMBERS: \_\_\_\_\_ E-MAIL: \_\_\_\_\_  
Home                      Cell

DATE OF BIRTH \_\_\_\_\_ CITIZENSHIP/PLACE OF BIRTH \_\_\_\_\_

SEX \_\_\_ HEIGHT \_\_\_ WEIGHT \_\_\_ EYES \_\_\_ HAIR \_\_\_\_\_

DRIVER'S LICENSE/ID# \_\_\_\_\_ STATE \_\_\_\_\_

**HAS YOUR DRIVER'S LICENSE EVER BEEN SUSPENDED OR REVOKED?**  
YES \_\_\_ NO \_\_\_ CIRCUMSTANCES \_\_\_\_\_

**Have you EVER been CHARGED, CONVICTED or PLED GUILTY to or entered a plea of nolo contendere to a violation of ANY city, county, state, federal or other criminal offense?** YES \_\_\_ NO \_\_\_ CIRCUMSTANCES \_\_\_\_\_  
(continue on back if needed)

Are you able to perform the essential functions of the volunteer role with or without a reasonable accommodation? YES \_\_\_ NO \_\_\_

**I DO HEREBY CERTIFY AND SWEAR THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.**

\_\_\_\_\_  
Volunteer Application Signature                      Date

**City of Riviera Beach Police Department  
Volunteer in Police Service Program Application  
Personal History**

NAME: \_\_\_\_\_  
                    Last                    First                    Middle

EMPLOYER: \_\_\_\_\_ Occupation: \_\_\_\_\_

Retired? \_\_\_\_\_ (if YES, please list former occupations) \_\_\_\_\_

\_\_\_\_\_  
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**VOLUNTEER INFORMATION:**

Special Skills: \_\_\_\_\_

Available: Days\_\_\_ Evenings\_\_\_ Weekdays\_\_\_ Weekends\_\_\_ Varies\_\_\_

Year Round Resident? YES\_\_\_ NO\_\_\_

Additional information and/or desired assignment: \_\_\_\_\_

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

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**City of Riviera Beach Police Department  
Volunteers in Police Service Program Application  
Confidentiality Agreement**

I \_\_\_\_\_ (applicant’s full name) certify that I am applying to be a volunteer for the City of Riviera Beach Police Department (“Police Department”) Volunteers in Police Service program. I realize in the course of my volunteer work that I may be exposed to names and other confidential information regarding the Police Department and the citizens it serves. I understand that the majority of information regarding certain criminal acts, victims of crimes and certain arrest information is confidential under Florida law. Release of certain information without authorization may carry both a civil and criminal penalties.

I further understand that no reports of any kind may be removed from the Police Department without prior authorization in writing.

By signing my name below to this Confidentiality Agreement I understand and agree to abide by all confidentiality regulations of the Police Department and applicable laws. I fully understand this Confidentiality Agreement.

\_\_\_\_\_  
Volunteer Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Volunteer Applicant Name

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Name

**City of Riviera Beach Police Department  
Volunteers in Police Service Program Application  
Code of Conduct for Volunteers**

1. Volunteers shall conduct themselves at all times in such a manner as to reflect most favorable on the Department and not engage in conduct unbecoming a volunteer. Conduct unbecoming a volunteer shall include, but not be limited to, that which would or does bring the Department into disrepute or impairs the operation or efficiency of the Department and/or violates this Code of Conduct.
2. Volunteers shall not use their volunteer status or any issued identification cards or badges for personal or financial gain, for obtaining privileges not otherwise available to them, or for avoiding consequences of illegal acts, except as may be required in the performance of their volunteer duties.
3. Volunteers shall not authorize or otherwise allow the use of their names, photographs, or official titles, nor act as representatives of the Department, in connection with testimonials or advertisements for any commodity or commercial enterprise, except when expressly approved by the Chief of Police in writing.
4. Volunteers shall not recommend or suggest in any manner, except in the transaction of personal business, the employment or procurement of a particular product, professional service, or commercial service such as an attorney, towing service, bondsman, mortician, etc.
5. Volunteers shall respect the dignity of all persons and not engage in behaviors that are intended to belittle, ridicule, or embarrass another person or employee. Volunteers shall be courteous to the public and other personnel. Volunteers shall be tactful, control their tempers, exercise patience and discretion and shall not engage in argumentative discussions, even in the fact of provocation. Volunteers shall not engage in discriminatory behavior, through act or deed, against any person on the basis of gender, age, race, color, religion, ethnicity, sexual orientation, pregnancy, or disability, in accordance with city policy and Title VII of the Civil Right Act of 1964, its Amendments, or related laws and administrative rules.
6. Volunteers shall not publicly criticize or ridicule the Department, its policies, or other personnel, in a manner that is defamatory, obscene, unlawful, undermines the effectiveness of the Department, interferes with the maintenance of discipline, or is made with reckless disregard for the truth.
7. Volunteers shall treat official business of the Department as confidential. Information regarding official business shall be disseminated only to those for whom it is intended in accordance with established Department procedures, or to those person otherwise legally entitled to receive such information.

8. Volunteers shall cooperate with all agencies engaged in the administration of criminal justice, public agencies, and other departments within the City and shall give to each, all the aid and information that they are entitled to receive.
9. Volunteers are required to be truthful at all times, whether under oath or not, and shall not misinform, lie, or withhold information. Volunteers shall inform the Department of any changes in the information provided in their volunteer application.
10. Volunteers served as a Respondent with a Domestic Violence Injunction, Injunction Against Report Violence, or any other court order involving restrictions on the use, purchase, possession or transportation of firearms, must immediately notify the Chief of Police by written memorandum via his or her chain of command.
11. Volunteers served as a Respondent with any other type of court order imposing restrictions on behavioral, mobility, association, contact, etc., will immediately notify the Chief of Police by written memorandum via his or her chain of command.
12. The use of drugs or alcohol is not permitted at any time while performing volunteer duties or in any area where work is being performed by Department employees, appointees or other volunteers.

I agree to abide by the foregoing Code of Conduct for Volunteers:

\_\_\_\_\_  
Volunteer Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Volunteer Applicant Name

**City of Riviera Beach Police Department  
Volunteers in Police Service Program Application  
Volunteer Agreement**

I, the undersigned, understand that the acceptance of my City of Riviera Beach Police Department (“Police Department”) volunteer application is contingent upon the results of a complete background investigation. I am aware that any omission, falsification, misstatements or misrepresentations will be the basis for disqualification as a volunteer or my dismissal from the Police Department Volunteers in Police Service Program. I further understand that I will be fingerprinted and my volunteer application shall become the property of the City of Riviera Beach and a public record. I authorize any of the persons or organizations referenced in this application (or other references provided) to furnish information, personal or otherwise, regarding my ability and fitness for volunteer service with the Police Department. I release all parties from any and all liability for any damage that might result from furnishing such information to the Police Department.

I agree to abide by the Volunteer Code of Conduct, as amended from time to time, and acknowledge that the Code of Conduct may be changed, re-interpreted or amended by the Police Department at any time, in the Police Department’s sole discretion without prior notice to me. I will immediately notify the volunteer coordinator of any prescription drug use that might affect my volunteer duties and immediately report to the volunteer coordinator any change in my driver’s license status or other information provided in this application.

I understand that my volunteer relationship with the Police Department is “at will”, which means that the Police Department may terminate my volunteer status at any time with or without cause. My “at will” volunteer relationship may not be changed unless authorized in writing by the Chief of Police. I further understand that no compensation will be given to me from either the City of Riviera Beach Police Department or the City of Riviera Beach for this voluntary work performed by me.

I also understand that I must complete and sign all applicable sections of my volunteer application to include the Volunteer Agreement, Background Application, Personal History application, Confidentiality Agreement, the Code of Conduct for Volunteers and the General Release and Waiver of Liability form.

I agree that any false or misleading information supplied by me will be cause for dismissal from the Volunteers in Police Service program.

Further, it is also understood that no benefits, to include vacation, medical insurance coverage, or any other benefits applicable to regular City of Riviera Beach employees shall apply or accrue to me as a result of this voluntary work.

Understanding and agreeing to the above conditions, I hereby restate my desire to volunteer for the City of Riviera Beach Police Department's Volunteers in Police Service program.

**AGREED TO AND ACKNOWLEDGED BY:**

By: \_\_\_\_\_  
VOLUNTEER APPLICANT SIGNATURE

PRINT NAME: \_\_\_\_\_

STATE OF FLORIDA

COUNTY OF PALM BEACH

I HEREBY CERTIFY that on this day \_\_\_\_\_ personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, who has produced \_\_\_\_\_ as identification and who, under oath, executed the foregoing freely and voluntarily for the purposes therein expressed.

WITNESS my hand and official seal at said County and State this \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_.

\_\_\_\_\_  
Notary Public, State of Florida  
At Large



**GENERAL RELEASE AND WAIVER OF LIABILITY AND  
ASSUMPTION OF RISK AGREEMENT FOR CITY OF RIVIERA  
BEACH POLICE DEPARTMENT VOLUNTEERS PROGRAM**

This is a Release and Waiver of Liability and Assumption of Risk Agreement for \_\_\_\_\_ (print name of person participating in City of Riviera Beach Police Department Volunteer Program) who is, over the age of eighteen years of age (18), and who agrees to this Release and Waiver of Liability and Assumption of the Risk Agreement.

FOR AND IN CONSIDERATION of my voluntary and permitted participation in the City of Riviera Beach Police Department Volunteer In Police Service Program (“Volunteer Program” herein) (such participation including, but not limited to: operating a Police Department vehicle; riding in a vehicle operated by Police Department officers, employees, or volunteers of the Riviera Beach Police Department and observing by any and all means the operations and functions of the Riviera Beach Police Department, its officers, employees and volunteers) and any event related to and subsequent to such participation, I, the undersigned on my own behalf or on behalf of my personal representatives, assigns, heirs and next of kin:

1. **HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE** the City of Riviera Beach, its officers, directors, employees, agents, representatives, successors and assigns, herein known as the “released parties”, of and from all liabilities, any and all claims, demands, actions, damages, causes of action, suits in equity of whatever kind or nature, costs or expenses of any nature, arising out of or in any way connected with my participation as a volunteer. I understand that this release includes any and **all claims based on the negligence, actions or inactions of any of the released parties** and covers any and all bodily injury, including death, and property damage, whether suffered by me, my child or ward, before, during, or after such participation; and,

2. **HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE** due to the negligence of the released parties or otherwise before, during or after my participation as a volunteer; and, I further authorize medical treatment for myself at my cost, if the need arises; and,

I expressly acknowledge and agree that participating in the City of Riviera Beach Police Department Volunteer Program is a dangerous activity and involves the risk of bodily injury and/or death and/or property damage. I further expressly acknowledge and agree that the foregoing release and waiver of liability and assumption of risk agreement is intended to be as broad and inclusive as is permitted by the law of the State of Florida and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

**I, THE UNDERSIGNED, HAVE READ AND VOLUNTARILY SIGN THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AGREEMENT**, and further agree that no oral representations or inducements apart from the foregoing written agreement have been made.

DATE: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

\_\_\_\_\_  
Print Name of Volunteer

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Print Name of Witness

\_\_\_\_\_  
Witness Signature

**FOR OFFICIAL USE ONLY**  
Background Check Request

**TO:** \_\_\_\_\_

**FROM:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**RE: Volunteer Background Check – Police Department Applicant**

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Please conduct a thorough background check on the following Police Department Volunteer Applicant and provide a DAVID print out:

**NAME:** \_\_\_\_\_  
                                    Last                                    First                                    Middle

Please confirm if the above Volunteer Applicant has a criminal record:

\_\_\_\_\_ Yes                                    \_\_\_\_\_ No

Please print a copy of the record (and attach); complete this form; and, return the entire applicant's package to my office.

Thank you.

\_\_\_\_\_  
Signature of Personnel Conducting  
Background Check

\_\_\_\_\_  
Date of Background  
Check

\_\_\_\_\_  
Print Name of Above Personnel

