



*The Whatcom County Sheriff's Office*  
*Invites you to become a*  
**CITIZEN ON PATROL**

Citizens On Patrol is a nationally recognized crime prevention program. It consists of highly trained volunteers who assist the Sheriff's Office by being the "Eyes and Ears" of the community. Citizens On Patrol are not deputies, do not take enforcement action, carry weapons or make arrests. They are a valued resource that ensures the safety and security of Whatcom County citizens and its visitors through volunteering. The mission of Citizens On Patrol is to reduce and prevent crime through cooperation and partnering with neighborhoods and the Sheriff's Office.

**Benefits**

- Increased sense of community.
- Feeling of accomplishment and worth.
- Satisfaction of being able to help improve the positive communication between your community and the Sheriff's Office.
- Contribute to the control, reduction, and prevention of crime in unincorporated Whatcom County.

**Qualifications**

- You must be 21 years of age or older.
- Of good moral character.
- Have a good driving record.

**Requirements**

- Attend monthly meetings.
- Two patrol members per vehicle.
- Volunteer 10 hours per month.
- Appear professional at all times.
- No form of weapon is to be carried on duty.
- Pass a background check and polygraph.
- Proof of a valid driver's license.
- Have a sense of commitment to your community and be a team player.

**Training**

- Orientation and organization.
- Crime prevention.
- Patrol procedures.
- Communication.
- Traffic control.
- First Aid and CPR.

**How to join**

- *Complete the Interest Card Form and return it to the Sheriff's Office. If you pass the criminal history check you will be called for an interview.*

# Whatcom County Sheriff's Office

## Citizens on Patrol Interest Card

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_ (Maiden Name) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Aliases: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ SSN: \_\_\_\_\_  
*(Optional)*

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cellular Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

Sex: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

**Background Information:**

Any driving restrictions? \_\_\_\_\_

Any driving endorsements? \_\_\_\_\_

Have you ever been investigated or arrested for a crime? \_\_\_\_\_

If Yes Please Explain: \_\_\_\_\_

\_\_\_\_\_

List any specialized training or experience:

\_\_\_\_\_

\_\_\_\_\_

Please understand, by signing this application you are acknowledging and approving the Whatcom County Sheriff's Office to make inquiries into your background, criminal history, and driving records.

I certify that to the best of my knowledge the above information is true and correct.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**(Return this card to the Whatcom County Sheriff's Office Volunteer Services at 311 Grand Ave. Bellingham, WA 98225)**

*For Official Use Only:*

AS400/Longarm: \_\_\_\_\_

NCIC III/WASIC: \_\_\_\_\_

Drivers Check: \_\_\_\_\_

Abstract of Driving Record: \_\_\_\_\_