

SPOKANE COUNTY SHERIFF'S OFFICE  
**S**heriff's **C**ommunity **O**riented **P**olicing **E**ffort [S.C.O.P.E.]  
SCOPE Volunteer Application

Please complete the following information and return to your SCOPE substation. All information is needed to complete a criminal background check.

Last Name, First Name, Middle Name:

\_\_\_\_\_

Any other names by which you have been known:

\_\_\_\_\_

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

Telephone: Home: \_\_\_\_\_

Work: \_\_\_\_\_ Cell: \_\_\_\_\_

E-Mail Address (optional): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Last 4 #s of Social Security ID: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

State Issued: \_\_\_\_\_

I would like to volunteer at (SCOPE substation):

\_\_\_\_\_

Authorization to Release Information

I authorize the Spokane County Sheriff's Office to check my criminal history and access any files, reports, or information which they may have concerning me not prohibited by the Washington State Law Against Discrimination (RCW 49.60). Information of a confidential or privileged nature may be included. The purpose of accessing such information is to determine my qualifications and fitness for the position I am seeking with the Spokane County Sheriff's Office Volunteer Service Program.

I hereby release you, your organization, and others from any liability or damage which may result from furnishing the information requested.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

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For Administrative Use Only	Accepted: YES / NO	Initials: _____
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## SPOKANE COUNTY SHERIFF'S OFFICE

If you have any questions or comments, please feel free to contact your SCOPE substation, or call or write to:

Spokane County Sheriff's Office  
Telephone: (509) 477-3376  
Fax: (509) 477-5461  
ATTN: S.C.O.P.E.  
12710 E. Sprague Ave.  
Spokane Valley, WA 99216  
Email: SCOPEMAIN@spokanesherriff.org



For Administrative Use Only Accepted: YES / NO Initials: \_\_\_\_\_