LAKE COUNTY SHERIFF'S OFFICE

1220 Martin Street • P.O. Box 489 • Lakeport, California 95453

Administration	Central Dispatch	Coroner	Corrections	Patrol/Investigation
(707) 262-4200	(707) 263-2690	(707) 262-4215	(707) 262-4240	(707) 262-4200

Rob Howe
Sheriff/Coroner

VOLUNTEER APPLICATION

Name: _____
Last First Middle

Address: _____
Number Street Name City & State Zip Code

Mailing Address: _____
(If different than above address)

California Driver's License No.: _____

Sex: _____ Eye Color: _____ Hair Color: _____ Height: _____ Weight: _____

Social Security No.: _____ Birthdate: _____

Home #: _____ Work #: _____ Cell #: _____

E-mail address: _____

Do you have prior military service? _____

What Branch? _____ Type of Discharge: _____

As an adult, have you ever been convicted of a misdemeanor or felony offense other than a minor traffic violation?
☐ Yes ☐ No

If yes, explain: _____

Education: Did you graduate from high school? ☐ Yes ☐ No

If no, highest grade completed: _____

Please describe the type of service you are interested in providing as a volunteer for the Lake County Sheriff's Department: _____

_____

_____

_____

_____

_____

Upon completion of this application, please contact the Background Investigation Unit for further detailed information at 707-262-4200. A background investigation will need to be completed.