



WINNIPEG POLICE SERVICE VOLUNTEER APPLICATION

OFFICE USE ONLY

- ATTENDED INFO SESSION
- SCREENING INTERVIEW DATE
- BACKGROUND PACKAGE GIVEN
- DATE GONE TO BACKGROUND

PLEASE PRINT CLEARLY

NAME _____
LAST NAME GIVEN MIDDLE MAIDEN NAME OR BIRTH NAME

COMMONLY USED FIRST NAME _____ E-MAIL _____

MAILING ADDRESS _____
STREET CITY PROVINCE POSTAL CODE

TELEPHONE (____) _____ (____) _____ (____) _____
HOME BUSINESS/MESSAGE CELL PHONE

ARE YOU 18 YEARS OF AGE OR OLDER? YES NO

ARE YOU A LANDED IMMIGRANT aka PERMANENT RESIDENT? YES NO ARE YOU A CANADIAN CITIZEN? YES NO

HAVE YOU BEEN INVOLVED IN ANY CRIMINAL ACTIVITY WITHIN THE LAST TWO YEARS (INCLUDING ILLEGAL DRUGS)? YES NO

EDUCATION - GRADE OR DEGREE COMPLETED _____

DO YOU HAVE ANY DISABILITY OR MEDICAL RESTRICTIONS THAT MAY AFFECT YOUR ABILITY TO PERFORM THE DUTIES OF A VOLUNTEER? YES NO

IF YES, DESCRIBE: _____

HAVE YOU BEEN CONVICTED OF A CRIMINAL OFFENCE? YES NO

HAVE YOU EVER BEEN PARDONED FOR A CRIMINAL OFFENCE? YES NO

HAVE YOU EVER APPLIED WITH THE WINNIPEG POLICE SERVICE BEFORE? YES NO

IF YES, POLICE WHEN? _____ OR STAFF WHEN? _____

ARE YOU FLUENT IN ANY OTHER LANGUAGE? YES NO IF YES, PLEASE SPECIFY _____ SPOKEN WRITTEN

BE ADVISED:

THE NUMBER OF APPLICANTS ADVANCING IN EACH STAGE OF THE SELECTION PROCESS MAY BE LIMITED. ANY APPLICANT NOT BEING ADVANCED AT ANY POINT IN THE SELECTION PROCESS WILL BE NOTIFIED IN WRITING.

I HEREBY GRANT PERMISSION TO THE CITY OF WINNIPEG TO CARRY OUT WHATEVER PERSONAL INVESTIGATION IS FOUND NECESSARY IN CONNECTION WITH THIS APPLICATION. I ALSO HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THE INFORMATION PROVIDED ON THIS FORM IS COMPLETE AND CORRECT AND I UNDERSTAND THAT ANY FALSIFICATION OF THIS RECORD IS CAUSE FOR TERMINATION.

DATE _____ SIGNATURE _____

VOLUNTARY EMPLOYMENT EQUITY QUESTIONNAIRE - PROSPECTIVE WINNIPEG POLICE SERVICE EMPLOYEES

The Winnipeg Police Service is committed to creating a dynamic and diverse workforce and ensuring that all future and current employees are treated fairly with respect to recruitment, selection, and training opportunities. Your responses will assist the Winnipeg Police Service in meeting its organizational goals.

The information you provide is for statistical purposes.
Please note that a person may be a member of more than one designated employment equity group.

PLEASE CHECK THE BOXES WHICH APPLY TO YOU:

P-781: 2016

Date Received _____

(SEE REVERSE)

*THIS PERSONAL INFORMATION IS BEING COLLECTED UNDER THE AUTHORITY OF AND IS PROTECTED BY THE FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT THE HUMAN RESOURCES DIVISION OF THE WINNIPEG POLICE SERVICE AT (204) 986-6204.

MALE FEMALE

Aboriginal person

e.g. Status Indian, First Nation, non-status Indian, Metis, Inuit

Caucasian

Visible Minority

Other than Aboriginal – non-white in colour/race regardless of place of birth.
e.g. Chinese, Filipino, Black, Asian, Latin American, other, etc.

Physical or Mental Disability

Long-term or recurring physical, mental, psychiatric, sensory or learning impairment which limits the kind of activity that can be done in the workplace or could be perceived as a limitation. These include visible and non-visible disabilities.

If you have any questions about this questionnaire, contact the Outreach Coordinator, Corporate Services @ 204-470-7843

How did you learn about the Winnipeg Police Service Volunteer opportunities?

Website Friend Career Symposium Police / Staff Member Other

What are your main reasons for wanting to volunteer with us? (please check all that apply)

Improve job skills Learn about the WPS Help the Community Use skills / experience Gain police related experience

Other (please specify): _____

What best describes your situation (please check all that apply)

Retired Student Employed – Full Time Employed – Part Time Employed – Shift Worker Seeking employment

Availability (please check all that apply)

Morning Afternoon Evening Weekends

Monday Tuesday Wednesday Thursday Friday

Preferred Location for Community Volunteer Program (please check one)

Headquarters - 245 Smith Street East District Station - 1750 Dugald Road West District Stations - 2321 Grant Avenue

FOR OFFICE USE ONLY

DRIVER'S LICENSE AND PHOTO BIRTH CERTIFICATE PASSPORT

LANDED IMM. PAPERS CANADIAN CITIZEN PERM. RESIDENT CARD ON FILE RC# _____

PARDON PAPERS ON FILE RC# _____ NOT APPLICABLE

_____/_____
INITIALS NO./DIV.

BE ADVISED

If accepted, by signing below, I am agreeing to adhere to the following standards of conduct:

I will maintain confidentiality with respect to any knowledge I may become aware of as a result of my volunteer duties with the Winnipeg Police Service. I will, whether, in the performance of my duties or not, continually demonstrate the core values of the Winnipeg Police Service, which are Respect, Citizen Focus, Integrity, Courage and Accountability. I will follow the policies and procedures governing the Winnipeg Police Service Community Volunteer Program. I will attend ALL scheduled mandatory training. I will commit to a minimum of one shift per week. I will commit for a minimum of one year. Should I fail to adhere to any of the above standards, I understand that I will be subject to termination as a volunteer with the Winnipeg Police Service.

DATE: _____ SIGNATURE: _____