720 Yuba Street Marysville, CA 95901 530-749-7777

YUBA COUNTY SHERIFF'S DEPARTMENT

VOLUNTEER POSSE/SAR MEMBER APPLICATION REVISED 8-2021

Important: Please type or complete this application in ink. Answer all questions as completely and accurately as possible. If you need additional space, use the area on the back of the application.

1. Personal Information:							
Last Name:	First Name:		Middle:	Middle:			
Address:			Home Phone:				
Email Address:				Cell Phone:			
2. Employment History: (List y	your most recent	t job firs	it)				
Jame of Employer:		Supervisor:		From:		То:	
Address:			Position Held				
Name of Employer:		Supervisor:		From:		То:	
Address:				Position	Held		
Name of Employer:	S	Supervisor:		From:		To:	
Address:				Position Held			
Name of Employer:		Supervisor:		From:		То:	
Address:				Position Held			
3. Education:							
High School Attended:		1				T _	
Name of High School:		City/State:			From:	To:	
Name of High School:			City/State:		From:	To:	
	Yes No		If no, do you have a Gl	ED?	Yes	No	
Colleges Attended: Name of College:		ı	City/State:		Degree:		
Name of College:			City/State:		Degree:		

4. References: (List 4 people that know you well.)

Name:	Phone:		
Address:	How long have you known this person?		
Name:	Phone:		
Address:	How long have you known this person?		
Name:	Phone:		
Address:	How long have you known this person?		
Name:	Phone:		
Address:	How long have you known this person?		
Annual Heinel Charles Ciri.	V		
Are you a United States Citizen?			
Are you a United States Veteran?	Yes□ No□		
Have you ever attended a POST Basic Academy?	Yes□ No□		
Have you ever worked as a Peace Officer, either Part or Full Time?	Yes		
Please sign and date this application:			
Signature:	Date:		
Signature.	Date.		
To be completed by Chariff's Denouter and	· 		
To be completed by Sheriff's Department:			
Reviewed by: Forward to	Background □ Yes □ No		
Nick Morawcznski Date Undersheriff	<i>5</i> · · · · · · · · · · · · · · · · · · ·		