



**\*\*Application must include a Photo ID\*\***

Steve Reams, Sheriff

## Weld County Detention Division Volunteer Application

It is in the mutual interest of the Weld County Sheriff's Office and citizens of Weld County to form a volunteer group. As a volunteer, you have a valuable role in the detention center. We appreciate your willingness to dedicate your time to working with an offender population. Volunteers benefit the jail by offering a supportive and caring atmosphere for inmates participating in their programs.

There are really no specific qualifications to become a Volunteer with the Weld County Sheriff's Office, but, you should have:

- A desire to take an active role in promoting the change of behavior in our offender population.
- Satisfactory completion of a background check.
- Completion of the volunteer training.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Street/ Apt) (City) (State) (Zip)

Home Phone: \_\_\_\_\_ Social Security Number \_\_\_\_\_

Driver License Number \_\_\_\_\_ Type \_\_\_\_\_ State \_\_\_\_\_ Expires \_\_\_\_\_

Email Address \_\_\_\_\_ Mobile Phone \_\_\_\_\_

If you have lived at the above address for less than 5 years, please list your previous address.

Address: \_\_\_\_\_  
(Street/ Apt) (City) (State) (Zip)

Name of Church or Organization \_\_\_\_\_

Church or Organization Phone Number \_\_\_\_\_ Email: \_\_\_\_\_

North Jail Complex  
2110 O Street  
Greeley, CO 80631  
Phone 970-356-4015  
Fax 970-304-6439



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Have you ever had your driver's license revoked or suspended or have you ever been denied issuance of a driver's license? Yes or No

If yes, please explain: \_\_\_\_\_

Maiden Name/ Nicknames/ Or Other Name Changes \_\_\_\_\_

U.S. Citizen (yes/ no) \_\_\_\_\_ Native (yes/ no) \_\_\_\_\_ Naturalize Certificate# \_\_\_\_\_

Date/ Place/ Court \_\_\_\_\_

Emergency Contact \_\_\_\_\_  
(Name) (Phone) (Relationship)

Employment History

Current Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Employer's Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Previous Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Employer's Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Volunteer Experience

Organization: \_\_\_\_\_ Dates From: \_\_\_\_\_ to: \_\_\_\_\_ Phone \_\_\_\_\_

Organization Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Organization: \_\_\_\_\_ Dates From: \_\_\_\_\_ to: \_\_\_\_\_ Phone \_\_\_\_\_

Organization Address: \_\_\_\_\_  
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Traffic and Criminal Arrest Information

Beginning with the most current, list each occurrence for which you received a traffic or criminal summons and/ or you were arrested. Providing inaccurate information may disqualify you from the volunteer program.

Offense/ Charge: \_\_\_\_\_ Date \_\_\_\_\_
Location \_\_\_\_\_ Disposition \_\_\_\_\_
Offense/ Charge: \_\_\_\_\_ Date \_\_\_\_\_
Location \_\_\_\_\_ Disposition \_\_\_\_\_
Offense/ Charge: \_\_\_\_\_ Date \_\_\_\_\_
Location \_\_\_\_\_ Disposition \_\_\_\_\_
Offense/ Charge: \_\_\_\_\_ Date \_\_\_\_\_
Location \_\_\_\_\_ Disposition \_\_\_\_\_
Offense/ Charge: \_\_\_\_\_ Date \_\_\_\_\_
Location \_\_\_\_\_ Disposition \_\_\_\_\_

Are you related to anyone in the Weld County Jail? \_\_\_\_\_

If a relative is incarcerated in the future, we ask that you notify the On-Duty Jail Sergeant before entering the jail. The Sergeant will determine whether you will be allowed to enter the jail.

I hereby give my consent for a background check to be completed "
I certify that the above information is true and complete to the best of my knowledge. "

Signature \_\_\_\_\_ Date Signed \_\_\_\_\_

Thank you for taking your time to show interest in the Volunteer Program at the Weld County Jail. Citizens like you make a difference! It may take a few weeks to process the information that you have provided. You will be notified in writing as soon as we have approved or denied your application.

Sincerely,
Nancy Kroll
Inmate Services Director

Office Use Only
Formal Review of Background
Inmate Services Director \_\_\_\_\_ Lieutenant \_\_\_\_\_

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