



Steve Reams, Sheriff

2022 Weld County Jail Religious 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 credential and background check.
- Completion of the volunteer training.

****Please include a Letter of Recommendation from your organization and a copy of your Driver License****

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 Organization or Church Affiliation _____

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,

Stephanie Dandurand
Inmate Services Director
Weld County Jail

Office Use Only
Formal Review of Background
Inmate Services Director _____ Lieutenant _____

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