



CITY OF LAS VEGAS

**DETENTION & ENFORCEMENT
&
MUNICIPAL COURT
APPLICATION**

OFFICE USE ONLY

FP

DRUG

INITIALS

**PLEASE READ ALL INSTRUCTIONS CAREFULLY
TYPE OR PRINT ALL ANSWERS IN BLUE OR BLACK**

LOCATION

PERSONAL INFORMATION

NAME (LAST)

(FIRST)

(MIDDLE)

OTHER NAMES USED (MAIDEN NAME, ALIAS, AKA, ETC.)

ADDRESS (STREET, P.O. BOX, APARTMENT NUMBER, ETC.)

ADDRESS (CITY)

(STATE / COUNTRY)

(ZIP CODE)

SOCIAL SECURITY NUMBER

HOME PHONE NUMBER ()

ALTERNATE PHONE NUMBER ()

E-MAIL ADDRESS

Are you currently employed?

☐ YES☐ NO

If "YES", please provide name, address and telephone number

NAME _____

ADDRESS _____

CITY, STATE _____

PHONE _____

Have you previously volunteered or worked for the City of Las Vegas?

☐ YES☐ NO

If "YES", provide dates of voluntary assignment and/or employment.

FROM:

TO:

Do you have any disability, injury or illness that would prevent you from performing the duties associated with this voluntary assignment?

☐ YES☐ NO

If "YES" please explain.

CONVICTION INFORMATION

HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR, GROSS MISDEMEANOR OR FELONY?

☐ YES ☐ NO

If "YES", please provide detailed information for EACH conviction below.
(USE SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED)

DATE	LOCATION (CITY, STATE)	NATURE OF OFFENSE (EX: TYPE OF CHARGE)	DISPOSITION (PAID FINE, TIME SERVED, ETC.)

Include any conditions of your parole and/or probation, if applicable. DUI, reduction of DUI, reckless and careless driving convictions **MUST** be included. A criminal conviction does not necessarily preclude individuals from becoming a volunteer. Each case is considered on its individual merits.

OMISSION OF REQUESTED INFORMATION IS BASIS FOR REJECTING AN APPLICATION.

This section can only be amended if a conviction occurs after the application has been time-stamped. In that event, it is your responsibility to provide any conviction updates to Human Resources during the life of the application.

Any misrepresentation or material omission of fact may be considered grounds for **DISQUALIFICATION** and/or **DISMISSAL** from voluntary assignment.

SIGNATURE

BY SIGNING:

- I certify that the statements made by me on this application are true, complete and correct.
- I understand that all voluntary assignments are subject to the successful completion of a background check and drug screening.
- I further understand that if I am accepted as a volunteer for the City of Las Vegas, I am not permitted to drive a private or City vehicle on behalf of the City of Las Vegas in connection with my voluntary assignment.

The Federal Privacy Act of 1974 requires that you be notified that disclosure of your Social Security number is voluntary on this application form. The number will be used by the City of Las Vegas to help verify your identity and information contained on the application.

SIGNATURE

DATE

LICENSING

Do you possess a valid driver's license? If "YES", please provide the information below:	<input type="checkbox"/> YES <input type="checkbox"/> NO
TYPE OF LICENSE	If commercial, provide type and endorsements, if any.
ISSUING STATE	
LICENSE NUMBER	
EXPIRATION DATE	

List any other valid, applicable licenses and certificates you hold

TYPE OF LICENSE OR CERTIFICATE	ISSUING STATE	REGISTRATION NUMBER	EXPIRATION DATE

EDUCATION

When claiming college, business, or vocational school credits for meeting minimum qualifications, you may be required to submit a copy of your degree or a legible photocopy of your up-to-date transcript with this application. Failure to do so may delay processing or disqualify your application. All papers submitted become the property of the City of Las Vegas Department of Human Resources and cannot be returned.

Did you pass all required proficiency exams AND receive a high school diploma?	<input type="checkbox"/> YES <input type="checkbox"/> NO					
If "YES", please provide:	SCHOOL NAME LOCATION (City, State)					
If "NO", do you have a GED certification?	<input type="checkbox"/> YES <input type="checkbox"/> NO					
If "YES", please provide:	DATE OBTAINED LOCATION (City, State)					
If "NO", please indicate highest grade completed. Example (7, 8, 9, 10, 11)						
COLLEGE/UNIVERSITY NAME AND LOCATION	FROM (MO/YR)	TO (MO/YR)	FIELD OF STUDY OR MAJOR	CREDIT HOURS COMPLETED	DEGREE EARNED (EX: Bachelor of Science) COPY MUST BE ATTACHED	
BUSINESS/TRADE SCHOOL NAME AND LOCATION	FROM (MO/YR)	TO (MO/YR)	FIELD OF STUDY OR MAJOR	CREDIT HOURS COMPLETED	CERTIFICATE EARNED COPY MUST BE ATTACHED	

EXPERIENCE

On the following sheets, list the employers, assignments or volunteer activities that you have held, starting with your most recent one. THIS SECTION MUST BE COMPLETED IN DETAIL. FAILURE TO DO SO MAY DELAY PROCESSING OR DISQUALIFY YOUR APPLICATION. YOU ARE ENCOURAGED TO ATTACH A RESUME IF YOU WISH, BUT REFERENCE TO A RESUME IN LIEU OF COMPLETING THIS SECTION CANNOT BE ACCEPTED. Under "Work Performed" describe your job in sufficient detail so that we can determine not only your tasks, but the level of responsibility. If you wish to add more experience or wish to add more detail to the "Work Performed," please complete and attach an Experience Addendum Sheet. Jobs and/or volunteer experience listed may require verification.

FROM: MONTH / YEAR TO: MONTH / YEAR	EMPLOYER NAME AND ADDRESS:	JOB TITLE:	DESCRIPTION OF DUTIES/RESPONSIBILITIES:

REFERENCES

NAME	PHONE NUMBER	RELATION	ADDRESS

SKILLS AND INTERESTS QUESTIONNAIRE

What interests you about volunteering at the Las Vegas Municipal Court?	
What is important to you in a volunteer experience?	
Where have you volunteered before?	
What are some of your skills and interests?	
Do you speak, read or write any other languages?	
How did you hear about us?	
What days and hours could you work as a volunteer?	