

# CAMERON COUNTY SHERIFF'S OFFICE

## Community Program Application

### SHERIFF'S CITIZENS ACADEMY



# CAMERON COUNTY SHERIFF'S OFFICE COMMUNITY PROGRAM APPLICATION

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Dear Applicant:

Thank you for your interest in joining the Cameron County Sheriff's Office Community Program.

This application packet contains all the necessary documents you will need to begin the process of joining the Sheriff's Citizens Academy and Ride-Along Program. Please complete and sign all of the following paperwork and return it to the Cameron County Sheriff's Office. You will receive confirmation once we have received and reviewed your application. Please keep in mind that due to the sensitive and confidential nature of law enforcement work, the process is thorough, and can take two to three weeks to complete.

Applications can be turned in via:

**Postal Service to**  
Cameron County Sheriff's Office  
c/o: Deputy S. Cisneros  
7300 Old Alice Rd.  
Olmito, Texas 78575

or

**In Person at**  
Cameron County Sheriff's Office  
c/o: Deputy S. Cisneros  
7300 Old Alice Rd.  
Olmito, Texas 78575

**Email:**

[Silverio.cisneros@co.cameron.tx.us](mailto:Silverio.cisneros@co.cameron.tx.us)

The following is a checklist of all materials required to successfully complete an application. If at any time you have questions, please do not hesitate to contact us.

<b>Application Paperwork Checklist</b>
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- \_\_\_ Completed Community Program Application
- \_\_\_ Release and Waiver
- \_\_\_ Personal Information
- \_\_\_ Clearance Check and ID Request form
- \_\_\_ Copy of Driver's License or Government ID

Please note:

- Applicants must be **18** years or older to apply. Applicants may also be disqualified, after review, at the discretion of the Community Program Coordinator(s).
- There is **NO** appeal process for disqualification from these Community Programs.

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Please print legibly or type

*If you have any questions, please contact us.  
Applications take 2-4 weeks to be processed.  
Incomplete applications will not be processed.*

## PERSONAL INFORMATION

Full Name (First, Middle, Last):  
\_\_\_\_\_

Are you over 18?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

Are you a US Citizen?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

(If you are not a citizen, please provide us with a copy of your work Visa.)

Home Address: \_\_\_\_\_

City: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Alternate Phone #: \_\_\_\_\_

Email Address (required):  
\_\_\_\_\_

Emergency Contact

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

Previous Addresses (last 2 years)

1. \_\_\_\_\_

2. \_\_\_\_\_

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## Personal References

*Family members or employers may not be used as references.  
Please make sure contact information is accurate.*

Name:	Phone Number:	Email:	Relationship:
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

## Current Employment

Most recent employer: _____	Occupation: _____	Employment Dates: _____	
Contact Name: _____	Title: _____	Phone: _____	Email: _____

## Employment for the past four (4) years:

*Attach a separate sheet if necessary. Please make sure information is accurate.*

Company Name:	Contact Phone:	Supervisor:	Contact Email:	Dates Employed:
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

## Education Background

Highest level of education completed:

School:

Year:

Course of Study/ Degree:

\_\_\_\_\_

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## Applicant Profile

Why do you want to participate?

What skills and qualifications can you bring?

Do you have a License to Carry Handgun Permit? Yes \_\_\_\_\_ No \_\_\_\_\_

It is the policy of these Community Programs that no weapons will be allowed during any Sheriff's Office activity.

Have you been convicted of a Misdemeanor or a Felony Offense? Yes \_\_\_\_\_ No \_\_\_\_\_, If yes what offense?

Are you fluent in any foreign languages? Yes \_\_\_\_ No \_\_\_\_

If yes, which? \_\_\_\_\_

If yes, would you be interested in assisting with translation? Yes \_\_\_\_ No \_\_\_\_

## Availability

Would you be interested in our Volunteer Corps (V-Corps) Program? Some volunteers come in several times a week, and some come in a few times a year. Please tell us what kind of time commitment you are looking for. Yes \_\_\_\_\_ No \_\_\_\_\_

By signing, I do hereby certify that all information contained in this application is correct and accurate to the best of my knowledge. If accepted, I understand I may be privy to confidential information and promise to respect and maintain that confidentiality.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name: \_\_\_\_\_

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## RELEASE AND WAIVER OF LIABILITY FOR CITIZENS ACADEMY, VOLUNTEERS AND RIDE ALONG APPLICANTS

The purpose of this waiver is to establish an understanding between the Cameron County Sheriff's Office, Citizens Academy, Volunteers and Ride-Along Applicants regarding liability issues.

I voluntarily request to participate in the Cameron County Sheriff's Community Programs. I certify that I am in good mental and physical condition and I understand the inherent risks associated with student training, acting as a Volunteer and or Ride-Along Participant including the risk of physical injury or death. I understand that these risks may include, but are not limited to, slips and falls; physical activity and exertion; muscle and ligament strains, pulls, and tears; contusions, broken bones, strains, sprains, bruises, concussions; heart-related illnesses (abnormal heart events, abnormalities of blood pressure or cardiac arrest, stroke), shortness of breath, faintness, nausea, dizziness and death; assault and battery; and cuts and punctures from debris, glass, nails, hypodermic needles, wire, rocks, concrete, cans, and other sharp objects. I further understand that I risk aggravating any preexisting physical condition I may have in the performance of these services.

I understand that while being a Citizens Sheriff's Academy Student, volunteer or Ride Along Participant, services will be at the direction of the Cameron County Sheriff, the Sheriff's Administration, Supervisory Personnel, Program/ Unit Coordinators, Sworn Officers and Sheriff's employees, I am nevertheless not an employee of the Cameron County Sheriff's Office and Cameron County within the meaning of the Texas Workers' Compensation Act at the time of my performance of these volunteer services. I acknowledge that the volunteering of time and/or services does not constitute employment for purposes of the Texas Workers' Compensation Act and I further acknowledge that I am not entitled to benefits of said Act. I further understand that I am a volunteer and that no employee/employer or master/servant relationship is created between myself and Cameron County or the Cameron County Sheriff's Office and that I will receive no compensation of any kind for my participation as a volunteer and that there is no promise of paid employment or of future paid employment. There is no employment contract or other contracts either verbal or written of hire between me and Cameron County, and/ or the Cameron County Sheriff's Office.

In consideration of the Cameron County Sheriff's Office allowing me to participate as a student, volunteer or ride along participant, I agree not to sue and forever release, waive, and discharge Cameron County, the Cameron County Sheriff's Office, and its respective employees, agents, representatives, officers, directors, and any associated or sponsoring agencies and entities (hereinafter referred collectively as "Releases") from any and all liability to me or my personal representatives, assignees, heirs, children, dependents, spouse, and relatives from any and all claims, causes of action, losses, judgments, liens, costs, demands, or damages that are caused by or arise from any injury (including death) to me or my property related to my volunteer services. I assume all risks associated with my participation as a Citizens Academy student, volunteer or ride-along participant. I understand that the performance of all these volunteer

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services may be hazardous, and I specifically waive any liability for injuries that may result from the negligence or carelessness of fellow volunteers, Cameron County Sheriff's Officers, other Sheriff's employees, or the public.

I understand that Cameron County or the Cameron County Sheriff's Office shall not be responsible for loss or theft of personal property, or damage to personal property directly or indirectly caused by Cameron County, the Cameron County Sheriff's Office, its employees, Volunteer Program, Law Enforcement Officers, other volunteers, or the public.

I understand that my participation as a volunteer in these activities is purely and solely voluntary and that I am not an employee, contractor, or representative of Cameron County, or the Cameron County Sheriff's Office. I further acknowledge that I am **not**, and will not function as, a Peace Officer or Reserve Peace Officer (unless assigned as a Reserve Peace Officer after meeting all required certifications under the guidelines of TECOLE), of any level, or a firefighter, emergency medical technician, or civil defense worker. By virtue of my volunteer status, I shall have no powers or abilities greater than those of a private citizen to enforce the laws of the State of Texas.

As further consideration for my being allowed to participate as a student or volunteer, the undersigned agrees, jointly and severally, to defend, indemnify, and hold harmless the Releases from and against any and all liabilities, claims, liens, actions, causes of action, costs or expenses of any nature whatsoever (including, without limitation, interest, penalties, reasonable attorney's fees and disbursements) arising from any damage, loss or injury (including death) to the Releases while participating as a student or volunteer regardless of the cause or causes of such damage, loss, or injury (including death).

I hereby acknowledge that I have carefully read this Release and Waiver of Liability and that I fully understand its contents, I am over the age of 18 years old, and I am signing this Release and Waiver of Liability voluntarily and intend for it to be legally binding.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address/ City/ State/ Zip Code

\_\_\_\_\_  
Phone number/ Email address

\_\_\_\_\_  
Signature of Volunteer

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

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## CERTIFICATION, AUTHORIZATION, & WAIVER REGARDING BACKGROUND INVESTIGATION

### Certification

I certify that all statements in my application, resume, and any other document I have submitted for a position of Sheriff's Citizens Academy Student, Volunteer or Ride Along participant with the Cameron County Sheriff's Office are true, complete and correct to the best of my knowledge and belief. I further certify that all oral statements I have made or caused to be made to any representatives of the Cameron County Sheriff's Office are true, complete and correct to the best of my knowledge and belief. I understand and agree that ALL statements may be investigated.

I understand that any falsification or omission of information discovered at any time during the selection process or during subsequent volunteering, may bar me from consideration for a position of volunteering or, if I have been selected, cause my dismissal from the Cameron County Sheriff's Office Citizens Academy, Volunteer and Ride-Along Programs.

### Authorization

I hereby authorize the Cameron County Sheriff's Office and its designee, during the application process or during the course of any subsequent Sheriff's Citizens Academy or volunteering with the Cameron County Sheriff's Office, to obtain information from any source as to my education, experience, qualifications, driving record, criminal history, or any other aspect of my background, as such information relates to the position for which I am being considered, or in which I may be volunteering already. In order to facilitate a search for information, I hereby confirm the following:

Full Legal Name First, Middle, Last (Print) \_\_\_\_\_

Other name (s) used \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_

Please list any other current driver's license from another state.

License # \_\_\_\_\_ State: \_\_\_\_\_

### Waiver

I release and waive any claim or cause of action against any person responding to any inquiries authorized herein, and against the Cameron County Sheriff's Office or its designee in making such inquiries. A photocopy or fax of this certification, authorization, and waiver shall be as valid as the original and may be used in its stead.

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



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## CLEARANCE CHECK AND ID REQUEST

Last Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Suffix: (Sr., Jr., II, III, etc.) \_\_\_\_\_

Date of Birth: (MM/DD/YYYY) \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Ethnicity: \_\_\_\_\_ Gender: \_\_\_\_\_ Hair Color: \_\_\_\_\_

Eye Color: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Glasses Yes \_\_\_ No \_\_\_ Contact lenses Yes \_\_\_ No \_\_\_

Mustache Yes \_\_\_ No \_\_\_ Beard Yes \_\_\_ No \_\_\_

*ID/Sheriff's Office Personnel only. Please provide Badge Number when action completed.*

Badge Number	Action
_____	Criminal History
_____	Clearance (NCIC & TCIC)
_____	Motor Vehicle Clearance
_____	Records check (for BCSO & SID #'s)
_____	Assigned SID#
_____	Assigned Photo#
_____	Computer Entry
_____	Print & Index

Name: \_\_\_\_\_ Badge #: \_\_\_\_\_ Date completed: \_\_\_\_\_

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## STATEMENT OF POLICY RELATED TO FIREARMS, WEAPONS, and CODE OF CONDUCT

It is the policy of the Cameron County Sheriff's Office to maintain an environment that is safe for all persons, including Deputy Sheriffs, civilian personnel, and community. To achieve these objectives, the Cameron County Sheriff's Office is committed to a strong stance relating to firearms, weapons, and conduct on the Cameron County Sheriff's Office property, during all related activities to include "Ride along" and off property related activities.

It is the Cameron County Sheriff's Office policy to maintain a firearms and weapons free work place and prohibit the possession of firearms and weapons regardless of any license or permit that an individual may have which would otherwise authorize the individual to carry firearms or weapons. The Cameron County Sheriff's Office will strictly enforce this policy.

### DEFINITIONS

- (a) Firearm: A weapon, a pistol or rifle, whether loaded or unloaded, capable of firing a projectile and using an explosive as a propellant.
- (b) Weapons: An instrument of attack or defense.
- (c) Office: All permanent facilities, all mobile facilities, all leased facilities, and any facility designated as an office by the Cameron County Sheriff's Office.
- (d) Parking lot: Although the parking lots of the Cameron County Sheriff's Offices are considered public parking, it is recommended that Firearms and Weapons not be left inside the vehicle. Any items left unattended within the vehicle are not the responsibility of the Cameron County Sheriff's Office.
- (e) Cameron County Sheriff's Office vehicle: All Cameron County Sheriff's Office-owned vehicles, all Cameron County Sheriff's Office -leased vehicles, all Cameron County Sheriff's Office -rental vehicles.
- (f) Cameron County Sheriff's Office sponsored events to include but not limited to: Ride-Along Programs, Cameron County Sheriff's Explorer Program, Sheriff's Citizens Academy, etc.
- (g) Search: To examine in order to find something concealed.
- (h) Sites: Any and all locations where the Cameron County Sheriff's Office conducts business.

### SIGNS

- (a) At each entrance to offices, parking lots, and project sites, a sign shall be posted in a location that is conspicuous to all who could enter an office, parking lot, or project site.
- (b) Signs shall have wording or pictogram that prohibits firearms and weapons. Signs shall be of the quality that they will not fade due to the elements.

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## COMMUNICATION OF POLICY

(a) Each volunteer of the Cameron County Sheriff's Office shall receive a copy of this policy and shall sign a copy of the acknowledgment. Volunteers who were admitted into the Cameron County Sheriff's Office Programs before the effective date of this policy shall also receive a copy of this policy and shall sign a copy of the acknowledgment. A copy of the signed acknowledgment shall be maintained in each volunteer's personnel file.

(b) A copy of this policy shall be attached to each volunteer's program, and shall become a part of its volunteer's file. The Cameron County Sheriff's Office program coordinator shall be responsible for communicating this policy to its volunteer applicants.

## PROHIBITED CONDUCT

(a) The transportation of firearms or weapons in Cameron County Sheriff's Office vehicles is prohibited. This includes but is not limited to, (1) when conducting Sheriff's Office business, (2) at all times in Cameron County Sheriff's Office-owned or leased vehicles.

(b) The carrying of permitted and non-permitted firearms while at Cameron County offices, sponsored events, and event sites.

(c) The carrying of weapons while at Cameron County offices, parking lots, sponsored events, and event sites.

(d) Volunteers will not engage in conduct that will bring discord or disharmony to the Cameron County Sheriff's Office, its Programs, law enforcement personnel, civilian staff, and volunteers.

(e) No volunteer shall report to work or be on duty when his or her judgment or physical condition has been impaired by alcohol, illegal drugs, prescribed medication, other substances, illness or injury. Doing so will result in immediate dismissal from class.

## SEARCH

(a) The Cameron County Sheriff's Office reserves the right to conduct reasonable, unannounced searches of company premises and personal searches of volunteers and others while entering, on, or leaving the Cameron County Sheriff's Office premises, including, but not limited to, personal effects, and vehicles.

(b) Individuals refusing to allow an inspection will not be detained or forced to submit to the inspection. Refusal violates Cameron County Sheriff's Office policy and constitutes voluntary termination of the volunteer relationship. Volunteers who refuse to allow an inspection will not be permitted on the Cameron County Sheriff's Office premises.

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## DISCIPLINE

(a) Violations of any portion of this policy will subject the volunteer to disciplinary action up to and including termination from the Cameron County Sheriff's Office program.

(b) Violations by a Cameron County Sheriff's Office Program volunteer on any portion of this policy will constitute insubordination and serious misconduct that will mandate the Cameron County Sheriff's Office Program Coordinator to immediately remove the volunteer from the premises, dismissal from the program, and barring future access to any Cameron County Sheriff's Office premises.

(c) Should Federal, State, Cameron County Sheriff's Office, and Assignment Specific issued rules be violated, volunteers may be placed on probation or be dismissed.

(d) Volunteers shall be required to return any issued uniform, agency clothing, and identification badge at the termination of service. Failure to return all items may result in criminal prosecution.

## ACKNOWLEDGMENT

I hereby acknowledge that I have carefully read this Firearms, Weapons, and Code of Conduct Policy for Volunteers, that I fully understand its contents, that I am over the age of 18 years old, and that I am signing this Firearms and Weapons Policy for Volunteers voluntarily and intend for it to be legally binding.

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Printed Name

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Address/ City/ State/ Zip Code

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Phone number/ Email address

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Signature of Volunteer

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Date Signed