

Colorado Springs Police Department

VOLUNTEER AGREEMENT

In order to provide a satisfying volunteer experience and a comfortable work atmosphere for all,

I, _____, consent to the following:

Printed Name of Volunteer

1. Bring to the attention of the Coordinator of Volunteers any job related problems or grievances.
2. Fulfill my service commitment in a professional manner.
3. Notify my supervisor prior to an absence.
4. Report hours of service to my supervisor at the end of each month.
5. **Respect the confidentiality of all information observed and learned through my work at the Colorado Springs Police Department. Any information contained in the records or received by personal communication will not be divulged outside of the Colorado Springs Police Department.**
6. Notify my supervisor prior to terminating my volunteer service with the Colorado Springs Police Department.
7. Return any and all identification provided by the Department to the Volunteer Coordinator's office (Room # 4427 of the Police Operations Center, 4th floor) on my last day.
8. Use police department identification only within the scope of my particular volunteer duties. I understand that any other usage may lead to disciplinary action up to and including dismissal from the volunteer program.
9. Upon termination, complete an evaluation of the program and return it to the Coordinator of Volunteers.

Signature of Volunteer

Date