



Community Action Team (CAT 21)

At-Large Member Application

Warrenton Police Department, 333 Carriage House Lane
Warrenton, Va. 20186 (540) 347-1107



Questions: Email the Office of Public Information and Community Engagement at pio@warrentonva.gov or call (540) 347-1107.

CAT 21 “At-Large” Member’s Requirements:

- Applicants must be at least 18 years of age or older
- Applicants must work, live, and/or has a civic interest in the Town of Warrenton.
- Applicants must not have had a misdemeanor arrest within one (1) year of application.
- Applicants must have no felony convictions.
- Applicants must serve a six-month term (6 working mtgs), in addition an initial introduction meeting.

Applicant Information:

Full Legal Name: _____

Full Street Address: _____

Preferred Phone Number: _____

Work Number: _____

Email Address: _____

Last Four Digits of SSN: _____

Race:

- White
 Asian
 Native Hawaiian or Other Pacific Islander
 Hispanic, Latino, or Spanish origin
 American Indian or Alaska Native
 Black or African American
 Middle Eastern or North African
 Some other race, ethnicity, or origin _____

Sex: _____

DOB: (Month/Date/Year) _____

Driver’s License Number: _____

Driver’s License State: _____

Occupation: _____

Employer: _____

Employer Address: _____



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Emergency Contact Name: _____

Emergency Contact Relationship: _____

Emergency Contact Address: _____

Emergency Preferred Contact #: _____

What makes being a part of the WPD Community Action Team (CAT 21) meaningful to you?

Where did you hear about the WPD Community Action Team (CAT 21)?

- | | | |
|-----------------------------------|--|---|
| <input type="checkbox"/> Facebook | <input type="checkbox"/> Local Paper | <input type="checkbox"/> Police Website |
| <input type="checkbox"/> Twitter | <input type="checkbox"/> Town of Warrenton Website | Other: _____ |

What experiences have you had that will bring value to the WPD Community Action Team (CAT 21)?

What do you hope to accomplish by being a member of the WPD Community Action Team (CAT 21)?



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WPD goal is to have a diversified group of individuals with a wide breadth of experiences and different perspectives on police-community relations in the Town of Warrenton. Please check all affiliations that apply that occur within the Town of Warrenton.

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Resident of Warrenton | <input type="checkbox"/> Business Owner/Operator | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Faith-Based Organization | <input type="checkbox"/> Government Organization | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Non-Profit Organization | <input type="checkbox"/> School Staff/Student/Parent | <input type="checkbox"/> Other: _____ |

Additional Comments Section:

FRAUD AND WILLFUL MISREPRESENTATION STATEMENT

I certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements and answers to the questions.

I understand that any omission or false statement on this application shall be sufficient cause for rejection or dismissal from any Department program.

I fully understand that all Department programs are non-confrontational and that at no time am I to take any type of enforcement action against anyone. If I observe suspicious and/or criminal activity, I will report it to the police.

Applicant's Full Legal Name (please print)*

Applicant's Signature*

Date (Month/Date/Year)



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WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

The undersigned, for and in consideration of being a participant in the Community Action Team of the Warrenton Police Department, and allowed use of the Town of Warrenton property, equipment and services, and recognizing that such activity involves certain inherent risks and dangers to my property and person, do hereby agree to assume the risks attendant to such activity, to include property damage and physical injury from such services, and do hereby release and hold harmless the Town of Warrenton, its Police Department, agents and employees, in both their public and private capacities, from any all liability, claims, suits, demands or causes of action which may arise.

It is further agreed that the execution of this release shall not constitute a waiver by the Town of Warrenton of defense of governmental immunity, where applicable or any other defense recognized by the Courts of this Commonwealth.

Applicant's Full Legal Name (please print)*

Applicant's Signature*

Date (Month/Date/Year)*

Applicant must read and sign the Community Action Team (CAT 21) Guidelines as part of this application.

Applicant authorizes use and releases any rights of photographs or images being used for the CAT 21 program.

Applications are to be submitted no later than **March 31st, 2023**. Please use one of the following options to submit a **completed/signed application** and/or any other required documents to the Warrenton Police Department (WPD).

- **SCAN and EMAIL** to pio@warrentonva.gov Subject Line: Community Action Team At-Large Member Application
- **FAX** to Warrenton Police Department at (540) 341-4190, Attn: Community Action Team At-Large Member Application
- **DELIVER** to Warrenton Police Department at 333 Carriage House Lane, Warrenton, VA. 20186 Attn: Community Action Team At-Large Member Application
- **MAIL** to Warrenton Police Department at 333 Carriage House Lane, Warrenton, VA. 20186 Attn: Community Action Team At-Large Member Application (mail early to allow for delivery by deadline date).



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Applications will be vetted through the reviewing process and applicants will be advised of outcome via **letter and/or email along to the email provided on the application.**

For questions about Warrenton Community Action Team (CAT 21) application, reasonable disability accommodation, and/or other questions, please email the Office of Public Information and Community Engagement at pio@warrentonva.gov or (540) 347-1107.

Additional Comments Section (if needed):

Note: Complete All Sections of the Community Action Team (CAT 21) Application Packet. Put N/A if not applicable.



Community Action Team-At-Large Member Background Investigation Questionnaire

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This Questionnaire must be completed by all applicants, (**minimum age 18**) applying to the Community Action Team (CAT). With the assistance of this form, the Warrenton Police Department will complete a thorough background investigation. The procedure is one element in the selection process. (**Please Print**)

Name (Last, First, Middle)					
Social Security No.			Maiden Name		
Street Address		City		State	Zip Code
Height	Weight	Eyes	Hair		
Home Phone	Work Phone	Cell Phone	Email Address		
Vehicle Make	Year	Model	Color	State	Tag Number
EDUCATION		School Attended	Diploma—Type of Degree	Dates	
High School or G.E.D.					
College-University					
Trade School					
Other Education:					
Other Education:					
Other Education:					
REFERENCES:		Address	Zip Code	Phone Number	
Name					
1.					
2.					
3.					



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In chronological order, list each place you have resided in the last (5) years. If you need more space, use page 4 of 5 under Additional Comments Section.

FROM Month-Year	TO Month-Year	Address	City	State	Zip Code

Previous Volunteer Experience (if any):

Organization	Address
Telephone Number	Immediate Supervisor
Duties Performed:	

Have you applied for a volunteer position with any Police Department or Sheriff's Office?
If "YES" to this question, what Department or position and when?

Current or last employer:

Type of Business		
Address	Zip Code	
Date employed:	From	To
Immediate Supervisor	Telephone	

Job Title and Duties Performed:

Give details of any instance where you have been discharged or forced to resign from a position:

Do you have a driver's license? Yes No

If so: Number	State:	Expiration Date:
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Was your license ever suspended or revoked? Yes No
If "YES", explain:

Have you ever used any illegal or dangerous drugs not prescribed by your physician? (This includes but is not limited to marijuana, PCP, cocaine, etc.). If yes, please explain:



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List **ALL** instances in which you have been: 1) Arrested, 2) Convicted by any court of a criminal offense, 3) A party to a civil suit involving negligence, 4) Convicted of a traffic violation(s) **NOT** including parking tickets, 4) Convicted of any violations of the Uniform Code of Military Justice (UCMJ), including any court martial. Forfeiture of collateral or payments of a fine area considered convictions and must be listed. If more space is needed, use a separate sheet of paper.

Date	Offense	Location	Court Disposition	Age	Police Agency Involved

IN CASE OF EMERGENCY, Notify:	
Relation:	Phone Number:
Doctor:	Phone Number:
Physical Limitations, allergies, if any:	
Medication carried on person:	
The information given above is true to the best of my knowledge.	
Signature of Applicant: _____ Date: _____	

FOREIGN LANGUAGES			
Please list and indicate your ability to speak/write/read each foreign language using P= Poor, F= Fair, G= Good			
Language _____	Speak _____	Write _____	Read _____
Language _____	Speak _____	Write _____	Read _____
Language _____	Speak _____	Write _____	Read _____
Would you be interested in serving as an on-call interpreter in any of the languages listed above?			
Yes	No		



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AUTHORITY FOR RELEASE OF INFORMATION

Name of Participant (print): _____ Date: _____

This release, when presented by a duly authorized representative of the Warrenton Police Department, will constitute my consent and authority to examine and obtain copies and abstracts of records and to receive statements and information regarding my background.

Specifically, I hereby authorize the release of the following data or records to the Warrenton Police Department.

- EMPLOYMENT INFORMATION
- EDUCATIONAL INFORMATION
- POLICE AND CRIMINAL RECORDS

PARTICIPANT'S SIGNATURE: _____

Additional Comments Section; (if needed)

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