

Lincolnton Police Department Citizens on Patrol Interest Form

Full Name: _____ Occupation: _____

Address: _____ City: _____

State: _____ Drivers License # _____

Email address: _____

Days Available to Volunteer: (Check all that apply)

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday
- Sunday

Please briefly explain why you would be interested in this volunteer opportunity:

Note: All volunteers must sign a volunteer waiver form as well as be subject to a thorough background investigation.

Thank you for your interest in wanting to volunteer with our agency!