SHERIFF
ALLEGHENY COUNTY

KEVIN M. KRAUS, SHERIFF
BRIAN V. HEIL, COLONEL

RESERVES APPLICATION

Thank you for your interest in the Sheriff's Reserve. Our General Membership, to which you are applying, supports our Uniformed Division who volunteer their time to serve and protect the citizens of Allegheny County at the direction of our Sheriff.

To expedite the processing of your application, please follow the directions listed below:

1. Complete all information on the application.

2. Have a sponsor sign your application.

3. Include a copy of your driver's license.

4. Attach a check for $195.00 payable to: Allegheny County Sheriff's Reserve.
   - This represents $100.00 non-refundable processing and $95.00 first year dues.

5. Enclose a passport photos.

6. Send your completed application to:

PO Box 38083
Pittsburgh, PA 15238

Applications can not be processed unless all the items are fully completed and attached.

Steps in the process:

1. Your application must pass an investigation by the National Crime Information Center and Pennsylvania Department of Transportation.

2. Your application will be reviewed by the Board of Directors for approval.

3. You will be contacted with the result of your application, and if approved, you will be notified of a date to appear in person to be sworn in.

If you have any question about your application, please contact:

Colonel Brian V. Heil - bheil@sheriffalleghenycounty.com

SHERIFF
ALLEGHENY COUNTY

KEVIN M. KRAUS, SHERIFF
BRIAN V. HEIL, COLONEL

RESERVES APPLICATION

Application for membership in the Sheriff's Reserve of Allegheny County.

Applicants for membership must be 21 years of age or older. The Sheriff's Reserve is comprised of two groups: the General Reserve and the Uniform Division.

All members belong to the General Reserve which is a self-funded fraternal organization which supports the Uniform Division. Successful applicants must be sworn into the Organization in person at a predetermined General Membership meeting. The General Reserve meets on a regular basis and also has periodic social events.

General Members may hold elective offices and serve on the various committees appointed by the Colonel. Non-Uniform General Reserve Members have no law enforcement powers and are not permitted to represent him or herself as a Deputy Sheriff. No member is ever permitted to carry a concealed weapon of any kind on the basis of affiliation with the Sheriff's Reserve or Sheriff's Office. Violations will result in immediate dismissal from the Sheriff's Reserve.

The Uniform Division, at the Sheriff's direction, assists local police departments by providing crowd control, security and traffic control details when so requested. Uniform Division personnel are trained and equipped to provide emergency support for the Sheriff's Office with minimum reaction time. Uniform Division personnel are required to provide all of their uniforms and equipment and receive no compensation. They are expected to participate in details, many of which occur on weekends and holidays in the summer months, and meetings. If a General Member wishes to join the Uniform Division, he or she must first be ACT 235 certified, complete the police school, firearms training, first-aid training and self defense training given by the Sheriff's Reserve. Applicants to the Uniform Division are selected on the basis of training, skills, willingness to participate and attitude.

Membership applications are subject to the approval of the Sheriff's Office an the Allegheny County Sheriff's Reserves Board of Directors.

I, _____, CERTIFY THAT I HAVE READ AND UNDERSTOOD THE ABOVE.
(Print Name)

_____ _____
Signature Date

SHERIFF
ALLEGHENY COUNTY

KEVIN M. KRAUS, SHERIFF
BRIAN V. HEIL, COLONEL

RESERVES APPLICATION

2 - Passport Size
1 - Driver's License
(Copy)

My sponsor is: _____

Name: _____
(First, Middle & Last Name)

Address: _____

County: _____ State: _____ Zip Code: _____

How long have you resided at your present address? _____ E-Mail: _____

Do you have a valid PA Driver's License: Yes ☐ No ☐ PA License Number: ____-_____-_____

Social Security Number: _____-____-_____ Date of Birth: ____/____/_____ Present Age: ____

Place of Birth: _____ Are you a US Citizen: ☐ Yes ☐ No

Male ☐ Female ☐ Height: ____'____" Weight: _____ Eyes: _____ Hair: _____

Marital Status: _____ Children (#): _____ Act 235 #: _____

Phone (Home): _____-_____-_____ Occupation: _____

Phone (Cell): _____-_____-_____ Employer: _____

Employer's Address: _____

What is the nature of your employer's business?: _____

What is the name of your immediate supervisor?: _____

Spouse's Full Name: _____ Spouse's Phone: _____-_____-_____

Spouse's Address: _____

In case of an emergency, please notify?: Name _____

Phone: _____-_____-_____

EDUCATIONAL BACKGROUND

	Date (From - To)	Name of School	City/State	Major Subjects
High School				
College or University				
Business School				
Night or Correspondence				
Other				

Please list Special Skills or Achievements obtained through your education:

_____

List any Honors or Awards: _____

MILITARY BACKGROUND

Branch: _____ Date Entered: ____/____/_____ Discharge Date: ____/____/_____

Type of Discharge: _____ Present Draft Status: _____

Highest Rank Obtained: _____

Do you belong to any military reserve organizations? Yes ☐ No ☐

If yes, what demands will this make on your time: _____

Did you receive any special training while in this military service? Yes ☐ No ☐

If yes, what training: _____

REFERENCES

List the names of three people, not related, who will attest to your character.
(All references will be called.)

Name	Address	Occupation	Years Known	Phone Number

FAILURE TO DISCLOSE OR FALSIFY ANY INFORMATION REGARDING ANY PREVIOUS ARRESTS OR CONVICTIONS IS GROUNDS FOR REFUSAL OF THIS APPLICATION AND SUBSEQUENT DISMISSAL.

1. Have you ever been arrested for, or convicted of, any type of crime? Yes ☐ No ☐
2. If yes, explain: _____
3. If yes, what was the disposition of the case? _____

   _____
4. Do you have any physical and/or mental disabilities or handicaps? Yes ☐ No ☐
5. Have you ever been committed by any Court to any type of institution for any period of confinement? Yes ☐ No ☐
6. If yes, explain: _____
7. Have you ever voluntarily committed yourself to any institution for any mental health problems? Yes ☐ No ☐
8. If yes, explain: _____
9. Do you have a permit to carry a firearm? Yes ☐ No ☐
10. If yes, by whom was it issued? _____
11. Have you ever had a permit to carry a firearm revoked by any law enforcement agency or court? Yes ☐ No ☐
12. If yes, explain: _____
13. How did you hear of the Sheriff's Reserves?: _____
14. Why do you wish to join the Sheriff's Reserve? _____

    _____

    _____

AUTHORIZATION / VERIFICATION

I hereby give the Sheriff's Reserve of Allegheny County permission to conduct all investigations it deems necessary regarding my background; including prior criminal record pertaining to arrests and/or convictions of any crime. I further authorize my present employer or previous employer(s) and references to furnish any information concerning my reputation and standing in the community with regard to my fitness to becoming a member of the Allegheny County Sheriff's Reserve.

I hereby verify that the facts set forth in this Application are true and correct to the best of the knowledge, information and belief. The undersigned applicant understands that false statements herein are made subject to the penalties of the Pennsylvania Crimes Code Title 18 PA C.S. Sec. 4904, relating to unsworn falsifications to authorities.

Date: ____/____/_____ Applicant's Signature :_____

ALLEGHENY COUNTY SHERIFF'S OFFICE
AUTHORIZATION TO RELEASE PERSONAL INFORMATION

Having made application to the Allegheny County Sheriff's Reserve, I am required to furnish information as to my previous history and character.

I hereby authorize the disclosure of any and all information concerning my moral character, honesty and dependability. This includes, but is not limited to, the release of employment records, financial and credit records, military records, academic records and photocopies of same, if requested, to Allegheny County Sheriff's Reserve. I hereby release you, your organization and others from liability and/or damage which may result from furnishing the above information. This authorization shall be valid and effective for one year from the date signed. A photocopy of this authorization shall have the same force and effect.

Date: ____/____/_____ Applicant's Signature :_____

***** FOR INTERNAL USE ONLY *****
DO NOT WRITE ON THIS PAGE

Interviewer's Comments: _____

_____

Interviewer's Name: _____ Rank: _____

Date: ____/____/_____

Interviewer's Signature: _____

Applicant checked and cleared through N.C.I.C. Yes☐ No ☐

By whom: _____

Comments: _____

_____

Board Approved: Yes☐ No ☐ Date: ____/____/_____

Board Chairman's Signature: _____