Dear Volunteer Applicant,

The Albuquerque Police Department is very excited of your interest in the Volunteer Chaplain Unit.

To be considered as a volunteer police chaplain with the Albuquerque Police Department, you must successfully complete the selection process. Listed below are the steps in the selection process and the sequence in which they are administered. At times, this sequence may be changed for the convenience of the department. Any and all components of the selection process can be changed by the Police Department without prior notice. The entire process takes from two to three months.

If you do not meet the minimum requirements you will be dropped from the process. If you wish to re-apply for the Volunteer Chaplain Unit you must complete each and every step of the application process.

To begin the process, please review the application packet. Then fill out and return the Volunteer Application Form, the A.P.D. Background Investigation Waiver and Liability Release Form and the A.P.D. Citizen Police Academy Application.

If you have any questions regarding the selection process, please do not hesitate to contact me at 768-2131 and/or e-mail bdennison@cabq.gov

Sincerely,

Briane L. Dennison

Briane L. Dennison
Chaplain Commander
Albuquerque Police Department

MISSION STATEMENT AND GUIDING PRINCIPLES

It is the mission of the Chaplains of the Albuquerque Police Department to:

- Provide for the spiritual support of department employees and their families.
- Provide counsel and guidance to persons in crisis in the Albuquerque community.

The following six Guiding Principles will help us measure the appropriateness of our decisions:

- Provide a great work environment by working effectively with each other.
- Apply the highest standards of excellence to providing support to those requesting assistance.
- Maintain a presence that fosters the highest ethical conduct among employees.
- Foster public confidence and support by attending civic events and being available during periods of heightened public interest.
- Contribute positively to our Department and our community.
- Recognize that the spirit of service is essential to fulfilling our mission.

HISTORY

The Albuquerque Police Chaplaincy began in 1969 and provides a ministry of compassion to police officers and the general public. The Chaplain Unit grew from a proposal by a local minister, the Reverend Virgil Bonto, who had some experience with police chaplaincies. Reverend Bonto approached Chief of Police Paul A. Shaver and suggested a chaplain unit for the police department. On March 10, 1969, with Chief Shaver's full support and encouragement, the Reverend John A. "Jack" Price became the first full-time Chaplain Commander for the Albuquerque Police Department with 35 ministers and one motor vehicle donated by a local automobile agency. One of the first goals was to stand ready to bear witness to the forgiving love and concern of God Almighty for all people, and especially for those in sorrow and despair. A goal that we continue to pursue today. The Chaplain Unit continues to have strong support from the current Chief of Police and in 1998 the Albuquerque Law Enforcement Building was named after Commander Price. On July 11, 2006, Chief Raymond D. Schultz showed equally strong support when he appointed Officer Briane L. Dennison as the first sworn Chaplain Commander. Currently, Department Chaplains continue to serve both the Department and the Albuquerque community as "ambassadors" dedicated to meeting the needs of persons that lives may be held in balance and give direction to meet eminent needs.

RESPONSIBILITIES

- Responds to requests made by the Communications supervisors or dispatchers.
- Assists officers by making death notifications or such other notifications as may be requested.
- Assists at scenes of trauma by counseling and assisting victims, friends, family members, and others as requested by officers; notify victim's own clergy or other support persons.
- Responds to requests for support to department personnel and families.
- Is willing to be on call.
- Prepares a report for each incident of service.
- Meets ongoing training requirements.
- Participates fully in activities of the Unit.
- Assist Department officials in making notifications to families of officers receiving serious injury or upon death of a Department member.
- Participate in ride-a-longs in order to become acquainted with the stressors experienced by Department personnel in the performance of their duties.
- Maintain an influence/presence that fosters the highest ethical conduct among employees.
- Provide liaison with other religious leaders in the community.
- Foster public confidence and support by attending civic events and being available during periods of heightened public interest.
- Serve as a resource for crisis intervention and other forms of counseling to the citizens of the community when requested to do so by the Department.

CHARACTER QUALITIES OF A POLICE CHAPLAIN

An Albuquerque Police Department Chaplain should possess the following character qualities:

- Possess professional maturity, emotional stability and personal flexibility.
- Have an ability to function for extended periods of time under adverse conditions.
- Have an ability to work effectively with people in a police environment.
- Have the ability to respond to requests for service at odd hours.
- Have acquired the basic skills of pastoral performance as required to provide assistance to persons in need.
- Be able to receive supervision and follow protocols as required by particular circumstances.
- Know the basic organizational structure of the Department.
- Learn and commit to memory commonly used items of the Ten Code.
- Know the helping agencies of the community, how to contact them and the services offered.

QUALIFICATIONS FOR CHAPLAINCY

The Chief of Police based on the following requirements makes appointments to the Volunteer Police Chaplain Unit:

1. Appointees must have a recognized ecclesiastical endorsement. The endorsement shall certify that the appointee is:
    a. A fully ordained or qualified priest, rabbi, or minister of religion in accordance with the person's traditions with a minimum of two years pastoral experience.
    b. Actively engaged in (or retired from) a denominationally approved vocation.
    c. Recommended as being spiritually, morally, intellectually, and emotionally qualified to represent the applicant's body as a chaplain in the Volunteer Chaplain Unit.

2. Have served in the community for a minimum of one year.

3. Never convicted of a felony.

4. Possess a valid New Mexico driver's license.

5. Ability to obtain City of Albuquerque Vehicle Operator's Permit.

6. Completion of background check by the Department.

7. Complete initial chaplain training program.

8. Approval by Command Staff.

9. Commit to serve for two years as a Volunteer Police Chaplain.

APPLICATION PROCESS

Candidates for the Unit Chaplain Program shall participate in the following process:

1. An application is submitted to the Command Staff accompanied by ecclesiastical endorsement.

2. An interview is held with a member of the Command Staff to explain the mission of the Unit, individual chaplain responsibilities, and to emphasize this is an avenue of service and not of evangelism or recruitment to any particular life-style.

3. Arrangements are made for a background check by the Department and a City of Albuquerque drivers' permit.

4. Following approval by the Command Staff, the applicant is recommended to the Chief of Police for Unit membership.

5. The new member is given orientation to include a tour of headquarters and ride-along with officers and current chaplains.

6. A candidate is considered probationary from the time of application until final approval and a six month assignment to the Unit. During the probationary period the candidate for Unit Chaplain may:

   A. Participate in ride-a-longs.
   B. Attend the A.P.D. Citizen Police Academy.

7. After receiving final approval, the new Chaplain shall begin assignment at a unit that is mutually agreed upon by the new Chaplain, the unit of assignment, and the Chaplain Commander.

8. Meet with the Commander of proposed unit of assignment.

DUTIES AND GUIDELINES FOR CHAPLAIN CONDUCT

The following guidelines are for further clarification of the role of the Chaplain:

1. Wear the Chaplain badge while on duty. The photo ID should be worn especially when entering police facilities and areas.

2. While on duty dress appropriately as a member of the clergy and a representative of APD.

3. When called to a hospital, cooperate fully with that agency's personnel. Know the location of the direct police line in the Emergency Room and utilize the same line to keep Radio Control informed of actions taken or assistance needed.

4. Notify victim's clergy or other support persons as quickly as possible. Make proper referrals in unique cases that need specialized attention.

5. Notify Radio Control promptly when next-of-kin is notified.

6. Complete a report for each incident handled.

7. When possible, attend at least one briefing during each 24-hour duty period.

8. Know the procedure for exchanging Unit vehicles.

9. Be familiar with Department rules on use of vehicle. No one other than the chaplain is to drive the vehicle.

10. Keep equipment in good repair, report malfunctions to the Deputy Commander.

11. Know the Department rules and regulations governing use of radio.

12. Do not release information of any incident in which chaplain is involved except to authorized Department personnel.

13. Chaplains shall be required to attend annual training sessions provided by the Department in order to continue service with the Unit.

14. Chaplains shall keep track of and log monthly reports on service hours, submitted to the Chaplain Commander at monthly Chaplain meetings for the proceeding month.

15. Chaplains shall log a minimum of eight (4) hours per month at assigned unit.

16. Chaplains shall not in any way interfere with Department personnel in the performance of their duties.

17. Chaplains have access to all buildings and scenes where the presence of law enforcement officers indicates the requirement or need for the Chaplain's services – wearing proper identification at all times.

VOLUNTEER APPLICATION FORMS (Pages 11-15)

Please Fill Out Forms and Return to:

APD Chaplain Unit
400 Roma NW
Albuquerque, NM 87102

Or

Fax to:
APD Chaplain Unit
768-2134

POLICE AND CITIZENS TOGETHER
VOLUNTEER APPLICATION

Name: _____
Last First Middle

Address: _____
Number Street City State Zip

Date of Birth: _____ Social Security Number: __ __ __ - __ __ - __ __ __ __

New Mexico Driver's License Number: _____ Expiration Date: _____

Is this License currently valid: Yes _____ No _____

Sex: _____ Height: _____ Weight: _____ Hair: _____ Eyes: _____

Place of Birth:

_____

Special Health Concerns/Disabilities or Limitations. Please identify:

_____

_____

_____

Home Phone Number: _____ Work Phone Number: _____ Cell: _____

Email Address:

_____

Please list and explain any other names you have used:

_____

_____

List any languages, other than English, which you speak fluently:

_____

_____

_____

_____

List any special skills, training, interests or hobbies that you have that may be useful to the Police Dept.

_____

_____

_____

Educational background: High School Diploma/GED: Yes: _____ No: _____

College: Name of School: _____ Dates attended: _____
Degree: _____

Volunteer Experience:

_____

_____

Days available for volunteer work (circle): **M** **T** **W** **Th** **F**

Preferred hours per day: _____ to _____

Work Experience (most recent first):

EMPLOYER COMPLETE ADDRESS SUPERVISOR DUTIESFROM/TO

1. _____

2. _____

3. _____

How did you hear about the volunteer program?

_____

Have you ever used or tried any narcotic drugs (includes marijuana) without a doctor's prescription?

Yes, I have: _____ No, I have not:_____

Have you ever been arrested and/or convicted of a felony or misdemeanor? Yes: _____
No: _____

Have you been convicted of a sex offense against any person at any time as defined by the Megan's Law of any jurisdiction or any sex crime similar to the crimes listed as sex offenses under the New Mexico Sex Offender Registration and Notification Act? Yes: _____ No: _____

List former State(s) or Country of Residence or Arrest since 1970:

_____

_____

Is there anything in your past which might disqualify you from functioning as a volunteer for the Albuquerque Police Department? Yes: _____ No: _____

If yes, describe briefly: _____

_____

List two personal references, other than family:

NAME	CITY/STATE/ZIP	PHONE	RELATIONSHIP
1.			
2.			

In case of emergency, please contact:

Name: _____ Phone: _____

Relationship to volunteer:

_____

Do you have medical insurance? Yes: _____ No: _____

Name of company: _____Policy No. _____

Volunteer Chaplain Applicants Only

RELIGIOUS AFFILIATION INFORMATION

Congregation/Religious Organization you are now serving as Clergy:

Name _____ Church/Org. Phone _____

Address _____ FAX _____

_____

(City, State, and Zip code)

Date Ordained/Licensed as Clergy _____By _____

Denomination/Religion holding your credentials _____

Are you willing to be on-call for 24 hours? Yes_____ No_____

As a volunteer for a position with the Albuquerque Police Department, I am willing to furnish information for use in determining my qualifications. In this connection, I authorize release of any and all information that you may have concerning me, including information of a confidential or privileged nature.

I hereby release you, your organization, or others from liability or damage which may result from furnishing the information required.

I understand that for security reasons a basic clearance check will be conducted and I will be fingerprinted. Further background information will be requested only if a specific volunteer assignment calls for a full security check. This may include a polygraph.

I understand that falsifying statements on this application or during the interview process is cause for my immediate dismissal from the volunteer program.

I agree to immediately notify the Albuquerque Police Department's Chaplain Commander upon my arrest for a felony or any other offense.

I hereby consent to a background investigation.

Signature: _____ Date: _____

APD BACKGROUND INVESTIGATION
WAIVER AND LIABILITY RELEASE FORM

In consideration of the Agency, Albuquerque Police Department, processing my application for employment, I,_____,hereby irrevocably agrees to the following:

1. I understand that a thorough and complete background investigation will be conducted to determine my fitness and desirability as a candidate for employment.

2. I understand that a background investigation is conducted by gathering and recording information about my past conduct and associations from any and all sources that the Agency, in its sole discretion, may deem appropriate, including: criminal or other governmental files and records, past and present employers, and any other source of information available.

3. I hereby release from liability and agree to hold harmless; under any and all possible causes of legal action, including negligence, the City of Albuquerque, Bernalillo County, the Albuquerque Police Department Identification Unit, the Agency and any of its officers, agents or employees for any negligent or wrongful statements, acts, omissions made or recorded in the course of my background investigation.

4. I hereby release from liability and agree to hold harmless under any possible cause of legal action, including negligence, any person or entity which furnishes information or opinions to the Agency as a part of my background investigation.

5. I authorize any person or entity contacted by the Agency during the course of my background investigation to furnish any information or opinions such person or entity may have regarding myself, my conduct or associations, regardless of any statutory or other privilege I may have.

6. I understand the need for confidentiality of sources and information in my background investigation and I expressly agree that I will never attempt to obtain access to any part of the background investigation designated as confidential by the Agency.

This release applies to any cause of action of any nature that might accrue to me.

_____ _____ _____
Signature of Applicant Date of Birth Social Security

_____ _____
Street Address: Date

_____
City/Town State Zip