



SNOHOMISH COUNTY SHERIFF'S OFFICE

INTEGRITY DIGNITY COMMITMENT PRIDE

Adam Fortney, Sheriff

Snohomish County Sheriff Community Advisory Committee Application

The Snohomish County Sheriff's Community Advisory Committee is established under the direction of the Snohomish County Sheriff. The Sheriff seeks to leverage the knowledge, perspectives, and civic spirit of the board members to enhance how the Snohomish County Sheriff's Office engages and interacts with the community, how the Office delivers law enforcement and crime prevention services to the community, to solicit input via review of certain complaints against Sheriff's Office employees, and to assist with use of force policy review.

The Committee is a valuable component of the Sheriff's Office community policing strategy while also supporting the agency's core values of integrity, dignity, commitment, and pride. Sheriff Adam Fortney is committed to building trust and increasing transparency. The Sheriff believes that this group of community partners will give the Snohomish County Sheriff's Office a spring board to making better decisions and, ultimately, make our communities safer. We look forward to the partnerships that we will develop; and the identification of blind spots in our organization that we have or would have missed without this critical piece.

To allow the review of sensitive information, documents, and actions of law enforcement officials that is not available for public consumption, the Snohomish County Sheriff's Office must conduct a standard background check to determine the viability of Advisory Committee members receiving sensitive information. The backgrounds will remain private.

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Full Legal Name _____
Last First Middle

Address _____

City State Zip

Phone _____ Email _____

Date of Birth _____ Driver's License # _____

Remarks:

I, _____, authorize the Snohomish County Sheriff's Office and its agents to conduct a review of the records for purpose of confirming I am of good character. I hereby release the Snohomish County Sheriff's Office from any liability which may arise out of the background investigation and recommendations, including liability from negative recommendations based on erroneous information.

Signature _____ Date _____

Return this completed and signed application to: Snohomish County Sheriff's Office, Attn; Jill Iversen
3000 Rockefeller Ave, M/S 606, Everett, WA 98201 Email: contact.sheriff@snoco.org