



(Date)

(detachment name and address)

Re: Application for Criminal Record Check including fingerprint fee for volunteers of the _____ Citizens on Patrol Program.

(name of COPP group)

New Volunteers:

I am requesting that the Criminal Record Check including fingerprint fee be waived for the following individual(s) to become new member(s) of our COPP group:

----- (name)

----- (name)

Existing Volunteers:

I am requesting that the Criminal Record Check including fingerprint fee be waived for the following individual(s) to renew their membership with our COPP group:

----- (name)

----- (name)

Feel free to contact me if you have any questions and thank you for your assistance.

Sincerely,

(signature)

(position)

(print name)