



(date)

(Detachment Name & Address)

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

(Name of COPP group)

Volunteers:

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

(Name 1)

(Name 2)

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

Sincerely,

(Signature)

(Position)

(Legible Signature Name)

(Phone Number)