
FIFTH JUDICIAL CIRCUIT



VETERANS TREATMENT COURT MENTOR APPLICATION

“We are Veterans helping Veterans”



The first Veterans Court was opened in Buffalo, New York in 2008 and they have been growing in number at a very rapid pace nationwide. One of the things unique about Veterans Courts is the use of Volunteer Veteran Mentors to assist veterans who are trying to get back on their feet and reintegrate into the community. Without these volunteers, a meaningful component of these court programs would be missing and the success likely diminished. Thank you for your interest in support Veterans Courts.

By completing and returning the Volunteer Veteran Mentor application you will be a candidate for consideration as a volunteer. With your support, these programs will continue to grow and be a success.

Thank you for your service and thank you again for your interest in and support of the Fifth Judicial Circuit’s Court System.

VOLUNTEER VETERAN MENTOR APPLICATION-SUMTER COUNTY

Name: _____

Address: _____

Email: _____ Phone: _____

Branch of the military in which you served: _____

Years of service: _____ Type of Discharge: _____

Did you serve in a combat zone? Yes No If yes, which conflict: _____

Date of Birth: _____ Gender: Male Female

BACKGROUND INFORMATION:

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR A FIRST DEGREE MISDEMEANOR?
YES NO If "YES", what charges?

Where convicted? _____ Date: _____

HAVE YOU EVER PLED NOLO CONTENDERE OR PLED GUILTY TO A CRIME WHICH IS A
FELONY OR A FIRST DEGREE MISDEMEANOR?
YES NO If "YES", what charges?

Where? _____ Date: _____

HAVE YOU EVER HAD THE ADJUDICATION OF GUILT WITHHELD FOR A CRIME WHICH IS A
FELONY OR A FIRST DEGREE MISDEMEANOR? YES NO
If "YES", what charges?

Where? _____ Date: _____

CERTIFICATION

I am aware that any omissions, falsifications, misstatements, or misrepresentations above may disqualify me for volunteering consideration and, if I am approved, may be grounds for termination at a later date. I understand that any information I give may be investigated as allowed by law. I consent to the release of information about my ability, law enforcement agencies, and other individuals and organizations to investigators, human resources staff, and other authorized employees of Florida state government for volunteer purposes. This consent shall continue to be effective during my volunteer date, if I am approved. I understand that applications submitted for volunteers are public records. I certify that to the best of my knowledge and belief all of the statements contained herein and on any attachments are true, correct, complete, and made in good faith.

Signature

Date

CONFIDENTIALITY AGREEMENT

Compliance with this agreement is a condition of internship/externship/mentorship/observation or any other voluntary, unpaid participation in the Fifth Judicial Circuit. Such individuals shall hereinafter be referred to as “Parties”.

For purposes of this agreement, confidential information is: **(a)** written, electronic, or oral information relating to cases filed in the Fifth Judicial Circuit except statements made in oral arguments or in other venues open to the public, briefs and other papers filed with the clerk’s office, and opinions or orders made public through issuance by the court; **(b)** information concerning the Court’s decision-making process; and **(c)** information pertaining to administrative matters of the Court identified by the court as confidential. Confidential information under this agreement is not equivalent to confidential or exempt information under Florida’s public records laws and court rules.

Individuals covered by this agreement are all “parties” (as described above) volunteering for the Fifth Judicial Circuit. Staff covered by this agreement are all employees of the Fifth Judicial Circuit, including but not limited to personal staff to judges, central staff attorneys, employees of the Clerk’s Office, and employees of Court Administration.

- A.** Parties shall not disclose confidential information acquired in the course of their work with the Court other than to current staff who are bound by the terms of this agreement and who are authorized to have access to the information.
- B.** Parties shall not disclose confidential Court documents to any person other than to current staff who are bound by the terms of this policy and who are authorized to have access to the information contained in those documents.
- C.** Parties shall not comment publicly about unannounced case-related matters that were, presently are, or will be before the Court in its decision-making capacity.
- D.** Any writing produced by Parties while working on Court or Court Administration business is the property of the Court or Court Administration, and shall not be used as a writing sample for any purpose.
- E.** Parties misconduct involving unauthorized disclosure or use of confidential information may result in termination of the volunteer agreement, reporting to the appropriate agency including submission of a report to The Florida Bar of Bar Examiners (if applicable), the OSCA, the college/university or any other relevant agency for consideration in determining fitness to practice law, obtain mediation certification or interpreter certification.
- F.** This confidentiality agreement continues after completion of volunteer work with the Court or Court Administration.

ACKNOWLEDGMENT OF RECEIPT

I hereby acknowledge that I have received and read the confidentiality policy of the Fifth Judicial Circuit. I certify that I understand and will comply with the requirements of this policy.

Print Name

Signature

Date

FIFTH JUDICIAL CIRCUIT COURT ADMINISTRATION
Background Check Use Only
Request for Fingerprinting Services

NAME:

Last	First	Middle

ALIAS NAME(S):

Nickname and/or Maiden Name(s)		

Social Security Number	Date of Birth	Place of Birth

Citizenship

ADDRESS:

Street Name/Apartment Number	P.O. Box Number

City	State	Zip Code

PERSONAL IDENTIFIERS:

<input type="radio"/> Male <input type="radio"/> Female	<input type="checkbox"/> White (non-Hispanic)	<input type="checkbox"/> Black (non-Hispanic)	<input type="checkbox"/> Hispanic
	<input type="checkbox"/> Asian or Pacific Islander	<input type="checkbox"/> Native American	<input type="checkbox"/> Other (specify) _____

Sex	Race
<input type="radio"/> Blue <input type="radio"/> Brown <input type="radio"/> Gray <input type="radio"/> Green <input type="radio"/> Hazel	<input type="checkbox"/> Black <input type="checkbox"/> Blond <input type="checkbox"/> Brown <input type="checkbox"/> Sandy <input type="checkbox"/> Red/Auburn <input type="checkbox"/> Gray <input type="checkbox"/> White <input type="checkbox"/> Bald
Eye Color	Hair Color

Height	Weight

PHONE NUMBER(S):

Home	Work	Other

***** CIRCUIT 5 USE ONLY *****

Date: FDLE/FBI#: Hotfile#:

Member providing service: _____ Contact#: _____

Purpose: Employment Contractor Volunteer Other

Please send application **along with a DD Form 214** to:

Michael Swensen, Veterans Court Coordinator

Phone: (352) 569-6942

Fax: (352) 569-6985

Mailing Address:

215 E. McCollum Ave

Bushnell, FL 33513