

San Mateo County Sheriff's Office

COUNTYWIDE SECURITY UNIT

400 County Government Center, Redwood City, CA 94063



Greg Munks, Sheriff

November 14, 2007

SAN MATEO COUNTY SHERIFF'S OFFICE – PRESS PASS GUIDELINES.

The San Mateo County Sheriff's Office will issue Press Passes to all bonafide media representatives to assure all rights and courtesies are afforded them as outlined in section 409.5 of the California Penal Code. This policy is designed to promote a mutual working relationship between the San Mateo County Sheriff's Office and local media. All passes will be issued at the sole discretion of the Sheriff.

For the purpose of issuing press passes, bonafide media is defined as any media representatives who are required to cover breaking news or routinely disseminates disaster related information to the citizens of San Mateo County.

APPLICATION REQUIREMENTS:

Employed Applicants of commonly recognized news agencies shall:

- Download the EMPLOYEE application from San Mateo County Sheriff's Office web page at www.SMCSHERIFF.COM or pick up an application from the Under Sheriff's Executive Secretary at 400 County Center, Third Floor, Redwood City, CA .
- Fax a completed Press Pass application form to 650-363-1813.
- Application must include a completed Employer's Certification form. Certification form must include a signature, printed name, title, and contact number .
- Contact the Sheriff's Office at 363-4395, 5-7days after submitting your application, to arrange a date and time to have picture taken and Press Pass issued. (applicant must have valid ID and original Application and Employer's Certification with original signatures.). We cannot honor drop in requests.

Other applicants

- Download the FREELANCE application from San Mateo County Sheriff's Office web page at www.SMCSHERIFF.COM or pick up an application from the Under Sheriff's Executive Secretary.
- Fax a completed Press Pass application (including supplemental information) form to 650-363-1813.
- Completed supplemental press pass application form must include the name, title and phone number of two news media outlets verifying that you have completed assignments for them. Or current web address displaying your information regarding San Mateo County.

- Contact the Sheriff's Office at 363-4395, 5-7days after submitting your application, to arrange a date and time to have picture taken and Press Pass issued. (applicant must have valid ID and original Application and Supplemental.). We cannot honor drop in requests.

EXPIRATION AND REVOCATION OF PRESS PASS

Renewal of press pass

You will be required to keep your press pass up to date and will NOT receive a renewal notice. All press passes will expire one year from date of issuance. Processing time may be alleviated for renewal application(s) submitted 30 days prior to expiration date if all prior application information is current.

Expired passes and change of employment require re-applying as listed above.

All press passes remain the property of the Sheriff's Office and must be returned when you leave your employment. Passes must be surrendered upon request by the Sheriff's administrative Office.

If your pass is lost or stolen, you must notify the San Mateo County Sheriff's Office immediately at 650-599-1662.

CONTACT INFORMATION

San Mateo County Sheriff's Office
400 County Center
Redwood City, Ca. 94063
(650) 599-1662

San Mateo County Sheriff's Office



MEDIA PRESS PASS APPLICATION

EMPLOYEE

Greg Munks, Sheriff

Top portion to be completed by applicant and bottom portion to be completed by your employer.
This original form must be submitted to the San Mateo County Sheriff's Office.

Name of Employer _____

Name _____
Last First Middle

Business Address _____
Street City State Zip

Home Address _____
Street City State Zip

Phone _____ / _____ Occupation _____
Home Work Job Title or Duties

Age _____ Date of Birth _____ Driver License _____

Sex _____ Weight _____ Height _____ Citizenship _____

I agree to return the press pass upon termination of employment from the above listed agency or when requested to surrender the pass for misuse or non-compliance by the Sheriff's Administration

Signature of Applicant

Application Date _____

EMPLOYER'S CERTIFICATION FORM

This is to certify that the above named applicant is employed by :

As a _____ and that these duties necessitate the applicant
Name of Employer Organization Address Phone Number
Applicant's Job Title

to require a press pass.

The listed employer accepts all responsibility and liability for their employee's risks and actions. The employer will be responsible for obtaining and returning any press passes to the San Mateo County Sheriff's Office if this person is no longer employed by this agency

Employer's Signature

Print Name

Title

Contact Phone Number

SHERIFF'S OFFICE USE ONLY

Approved Denied Date: _____ Expiration Date: _____

San Mateo County Sheriff's Office

MEDIA PRESS PASS APPLICATION

FREELANCE



Greg Munks, Sheriff

This original form must be submitted to the San Mateo County Sheriff's Office.

Name _____
Last First Middle

Address _____
Street City State Zip

Phone _____ / _____ Occupation _____
Home Work Job Title or Duties

Age _____ Date of Birth _____ Place of Birth _____

Sex _____ Weight _____ Height _____ Race _____

I agree to return the press pass upon termination of employment from the above listed agency or when requested to surrender the pass for misuse or non-compliance by the Sheriff's Administration

Signature of Applicant

Application Date _____

SUPPLEMENTAL APPLICATION

In order to verify an applicant's identification the follow information is required. This information will only be used for identification verification. Failure to complete or inaccurate information may result in a delay of issuing a press pass or denial of pass.

Other names you have used _____

Home Address (if different from above) City State Zip

Previous Address City State Zip

Social Security Number _____ Drivers License Number _____

E-mail Address _____

Type of Media _____

Two agencies that you do _____
business with. Please
include contact person _____
name and phone number _____

Have you had a prior San Mateo County Press Pass: YES NO When: _____

SHERIFF'S OFFICE USE ONLY

Approved Denied Date: _____ Expiration Date _____