

Lake City Recreation Department

VOLUNTEER APPLICATION

* A complete application must be filled out for each position *

NAME _____
Last First Middle

ADDRESS _____
Street City State Zip

TELEPHONE NUMBER (843) _____ (843) _____
Home Number Work Number

LIST ANY YOUTH SPORTS YOU HAVE BEEN ASSOCIATED WITH:

Sport	Position	When

POSITION APPLYING FOR _____ AGE GROUP _____

PERSONAL REFERENCES

(name, address, phone number)

1. _____
2. _____
3. _____
4. _____

It is understood and agreed that any misrepresentation or omission of material information by me in this application will be sufficient cause for cancellation of this application and/or separation from the league. Furthermore, I understand that just as I am free to resign at any time, the league reserves the right to terminate my membership at any time, with or without prior notice. I understand that no representative of the leagues has the authority to make any assurances to the contrary.

I give the right to my employer, persons, references, organizations, and previous employers to provide any relevant information that may be required to arrive at a decision.

I also understand, agree to and hereby authorize a background investigation which includes a criminal records check and information from my employer, previous employers, references, organization and persons.

CONDUCTING A BACKGROUND INVESTIGATION

SOCIAL SECURITY # ____ / ____ / ____ DATE OF BIRTH ____ / ____ / ____

DRIVER'S LICENSE NUMBER _____

LIST OF ALL ORGANIZATIONS YOU HAVE BEEN WITH IN THE LAST 5 YEARS:

EMPLOYMENT HISTORY
(name of company, address, phone number)

CURRENT:

PREVIOUS:

ANY ADDITIONAL INFORMATION YOU WOULD LIKE US TO CONSIDER:

COACHES CERTIFICATION LEVEL: (Circle one) 1st 2nd 3rd Lifetime Member

Signature

Date