



Recreation and Parks Department

VOLUNTEER INTEREST AND SKILLS INFORMATION

Application Date New volunteer Returning volunteer

NAME:

ADDRESS:

CITY: STATE ZIP CODE

PHONE (HOME): CELL (EMAIL)

VOLUNTEER INTEREST: Coach Camp Special Events Other
(Check the box which applies)

How many years of experience do you have in the activity you are seeking to volunteer?

Which specific sport / camp / special event / other opportunity would you like to volunteer for?

Which age group do you prefer to work with (if applicable) ?

Availability (circle all that apply) Anytime Weeknights Weekends Holidays Weekdays 8:30am-5pm

References: (Please provide reference that can attest to any related work/volunteer experience)

NOTE: If unable to provide work related or volunteer references, please use personal (non-family) references that can attest to your ability to work with the public.

| | | | |
|----|----------------------|-----------------------------|-----------------------------|
| 1. | <input type="text"/> | Email: <input type="text"/> | Phone# <input type="text"/> |
| 2. | <input type="text"/> | Email: <input type="text"/> | Phone# <input type="text"/> |
| 3. | <input type="text"/> | Email: <input type="text"/> | Phone# <input type="text"/> |

PERSONAL HISTORY

If employed, place of employment: Occupation

Date of Birth Social security # - -

Please list highest education completed:

Skills / training as it applies to volunteer interest

Criminal History and Background Check

The Carrboro Recreation and Parks Department may conduct criminal background checks on any applicant depending on their volunteer interest and the opportunity that exists. Please complete the following:

First Name: _____ Middle Initial: ____ Last Name _____

If you have a *maiden name or your name has changed* in the last 10 years please indicate:

First Name: _____ Middle Initial: ____ Last Name _____

Current Drivers License #: _____ State of: _____

Please list the addresses of all the places you have lived the past 5 years. Please start with the most recent:

City _____ State _____

County _____ Dates at the above address: _____

City _____ State _____

County _____ Dates at the above address: _____

City _____ State _____

County _____ Dates at the above address: _____

Have you ever been convicted of a felony? Yes No

If yes, where: City State: County:

Please explain circumstances: _____

NOTE: A conviction record will not necessarily exclude you from involvement. Factors such as age at time of offense, rehabilitation efforts, how recent the offense was, and nature of the crime will be taken into consideration.

TOWN OF CARRBORO, NORTH CAROLINA, VOLUNTEER WAIVER FORM

I, the undersigned volunteer for the Town of Carrboro, North Carolina Recreation and Parks Department, hereby acknowledge that I am participating as a volunteer in the _____ Program with the Carrboro Recreation and Parks Department, and that I am not an employee of the Town of Carrboro, or its Recreation and Parks Department. I acknowledge that there is a risk of physical injury that are associated with some activities of the Carrboro Recreation and Parks Department, and I hereby agree to waive and hold the Town of Carrboro and its Recreation and Parks Department harmless from any claims for damages due to any injury I may suffer during the course of my volunteer activities. I also specifically acknowledge that as a volunteer, I am not entitled to worker's compensation from the Town of Carrboro for any injuries I may suffer during the course of my volunteer activities.

This the _____ day of _____, 20_____.

(Please sign) _____
Volunteer

PLEASE RETURN THIS FORM TO:
CARRBORO RECREATION AND PARKS DEPARTMENT
100 N. GREENSBORO ST., CARRBORO, 27510