



Volunteer Application

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Cell Phone	
E-Mail Address	

Volunteer Individual Specific Program/Project

Thank you for your interest in becoming a volunteer. In an effort to foster a safe and secure environment for those we serve, the Belvidere Park District requires those volunteers who provide direct services to minors and other designated volunteer positions to submit to a criminal background check (annually, for returning volunteers), through the State of Illinois or other appropriate source selected by the District. The appropriate forms will be sent to you upon completion of this preliminary information gathering.

You will be provided a copy of the criminal background check if any convictions are reported and you must notify the Belvidere Park District within seven (7) working days if the information is inaccurate.

* Have you volunteered for the Belvidere Park District before?

- Yes, and I enjoyed it so much I'm back! No, I'm new and I want to get involved!

Tell us in which areas you are interested in volunteering

- Administration
- Art Programming
- Buildings/Grounds
- Special Events
- Special Recreation (NASR Program)
- Sports Programming

Why are you interested in volunteering for the Belvidere Park District?

* I am generally available to volunteer:

Mondays Tuesdays Wednesdays Thursdays Fridays

Weekends Special Events

Please list special scheduling considerations (e.g., mornings/evenings only, availability limited to summer months, etc.)

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Previous Volunteer Experience

Summarize your previous volunteer experience.

Background

Gender:

Male Female

* What is your date of birth (MM/DD/YYYY)? _____

Please note: Children under the age of 14 may not volunteer for the Belvidere Park District unless a parent, legal guardian or adult supervision is present. Children under the age of 18 must have parent/legal guardian authorization.

* Have you been convicted of a crime (other than a minor traffic violation)?

Yes

No

Criminal convictions are not an absolute bar to be a volunteer, but will be considered in relation to specific volunteer requirements.

Note to Applicant: Applicants are not required to disclose sealed or expunged records of conviction.

If you answered "yes" above, please indicate the nature of the crime(s) and dates of the conviction(s):

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**In an effort to foster a safe and secure environment for those we serve, the Belvidere Park District asks those volunteers who provide direct services to submit to a criminal background check (annually, for returning volunteers) through the State of Illinois or other appropriate source selected by the Park District.*

Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. I further understand and agree that the Park District may relieve me of my volunteer duties at any time and for any reason, with or without advance notice, in the sole discretion of the Park District.

Please read carefully:

I understand and agree to comply with any and all Park District policies, rules and regulations applicable to volunteers.

Waiver and Release of All Claims & Assumption of Risk

Please read this language carefully and be aware that in signing up and participating in volunteer activities, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might

sustain as a result of any criminal background check and/or participating in any and all activities connected with and associated with your volunteer services (including transportation services when provided).

I recognize and acknowledge that there are certain risks of physical injury and damages to volunteers and I voluntarily agree to assume the full risks of any all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of applying for and/or serving as a volunteer. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of applying for and/or serving as a volunteer against the Belvidere Park District, including its officials, agents, volunteers and employees..

VERIFICATION: I confirm that the information provided by me in this Volunteer Information Application is true and accurate as of the date of its completion.

I acknowledge that as a volunteer for the Belvidere Park District I am providing services for civic, charitable or humanitarian reasons without promise, expectation or receipt of compensation for services rendered and, therefore, that I am not an “employee” of the Belvidere Park District nor does any employment relationship arise from my volunteer services.

Lastly, I am aware that my failure to provide accurate and/or complete information on this form may result in the discontinuation of my volunteer status.

Yes No

* The appropriate releases/waivers must be completed, signed and returned to the Belvidere Park District in order to be considered a volunteer.

Name (printed)	
Signature/Date	
Parent/Guardian Signature if under the age of 18.	

Thank you for completing this application form and for your interest in volunteering with us.

Please return your completed application to the Administration Building at 1006 W. Lincoln Avenue, Belvidere, IL 61008.



Volunteer Criminal Background Check

I understand that a successful criminal background check is a condition of volunteering with the Belvidere Park District in programs that provide direct service to participants that are minors and/or have special needs.

I consent to the Belvidere Park District obtaining my criminal conviction history from the Illinois State Police and/or other agencies used by the Park District to perform Background Checks.

I understand I will be provided a copy of the criminal background check if any convictions are reported and my duty under the law to notify the Belvidere Park District within 7 working days if the information is inaccurate or incomplete.

I hereby fully waive, release and discharge the Belvidere Park District, its officers, agents and employees, from any and all claims for damages or loss which may arise from participating in or as a result of the criminal background check.

PLEASE PRINT

Last Name	First Name	Middle Name	Maiden Last Name
Social Security Number	<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth	Race
Home Address (Number & Street)	City or Town	State	Zip Code

I have read and fully understand this release form.

Signature: _____ Date: _____

****Return completed form to the Administration Building****

4/14/16 kk