



WOODLAND PARK
CITY ABOVE THE CLOUDS

PARKS AND RECREATION DEPARTMENT

www.city-woodlandpark.org

VOLUNTEER APPLICATION

We appreciate your interest in volunteering for our community. In order to insure that we select the most qualified volunteers for our programs AND to insure the safety of our children participating in these programs, we request that you complete all sections of this volunteer application.

Full Name (First, MI, Last):		Home Telephone Number ()	Work Telephone Number ()
Street Address:		City, State, Zip	
Social Security Number:	Birth date (Mo/Day/Yr):	Have you ever been known by another name? ___YES ___NO If YES, indicate below:	
For volunteer coaching, please list sport and age group/grade applying for coaching status:			

Please list previous or current Volunteer Experience

Organization _____ Phone# _____ Supervisor _____
Hrs per week _____ Volunteer Dates from _____ to _____ Position held _____
Duties _____

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Hrs per week _____ Volunteer Dates from _____ to _____ Position held _____
Duties _____

Please list three(3) Personal References (not relatives)

Name	Occupation	Address (Street, City, Zip)	Telephone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

AFFIDAVIT: I certify that the answers given by me to the foregoing questions and statements are true and correct without consequential omissions of any kind. I authorize the companies, schools or persons named above to give any information regarding my volunteer experience, character and qualifications. I hereby release said companies, schools or persons from all liability for any damage for issuing this information. I understand and agree that any misleading or incorrect statements or omissions may render this application void and if placed in a volunteer position would be cause for termination and this volunteer workplace shall not be liable in any respect for such action or termination. **The City of Woodland Park is authorized to make any investigation of my background.**

Signature: _____ Date: _____



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Parks and Recreation Department Volunteer Background Investigation Authorization Form

Authorization: In connection with my application for volunteer work/placement, I authorize the City of Woodland Park to solicit information about my background including, but not limited to, information about my employment, driving record, criminal record and general public records history. This authorization, original or copy form, shall be valid for this or any future reports or updates that may be requested. I authorize all corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county and federal courts, military services, and persons to release information they may have about me to the person or company with which this form has been filed. This form hereby releases aforesaid parties from any liability and responsibility for collecting and transmitting the above information.

Authorization: _____
Signature Date

Please print the following information in ink.

Full Name: (Last, First, Middle) _____

Social Security # _____ Date of Birth _____

Driver's License Number _____ State of Issue _____

Phone Number _____

Address history: list addresses for the **last seven years** (include city and state of residence, how long lived there, and list current address first)

1. _____ How long? _____

2. _____ How long? _____

3. _____ How long? _____

4. _____ How long? _____

For City use only-select types of background reports desired for this prospective volunteer:

____ County Court Criminal Records ____ Motor vehicle record ____ Other: _____