

# City of Athens, TN, Parks and Recreation

## Volunteer Application

Girls Softball

Application Date \_\_\_\_/\_\_\_\_/\_\_\_\_

- Coach       6U       10U       14U  
 Assistant       8U       12U  
 Team Parent (non-coaching position)

### PLEASE PRINT

Name \_\_\_\_\_

*First*

*Middle*

*Last*

*Preferred Name*

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_ Gender  Male  Female

## Personal References

Please provide two references (One personal friend and one professional/work reference):

Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Email \_\_\_\_\_

Relationship \_\_\_\_\_ Years Known \_\_\_\_\_

Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Email \_\_\_\_\_

Relationship \_\_\_\_\_ Years Known \_\_\_\_\_

## Employment History

Current Employers Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Length of Employment \_\_\_\_\_

## Applicant Statement

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false or misleading information, omissions or misrepresentations are discovered, my application may be rejected and I may be relieved from my volunteer position.

Applicant signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

## Coaching Qualifications

List any previous youth sports you have coached or assisted:

Sport \_\_\_\_\_ Position \_\_\_\_\_ Organization \_\_\_\_\_ Dates \_\_\_\_\_ Sport  
Position \_\_\_\_\_ Organization \_\_\_\_\_ Dates \_\_\_\_\_ Sport \_\_\_\_\_ Position  
Organization \_\_\_\_\_ Dates \_\_\_\_\_

List personal playing experience in this or any other sport (i.e. youth, recreational, high school, college, pro):

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List any youth sports, coaching certifications, coaching clinics, or coaches training:

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List any special certifications (i.e. CPR, Medical training) or any other skills or training that may assist you in your coaching responsibilities.

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Do you have a child participating in this sport?

YES

NO

*If yes, please provide the following:*

Name \_\_\_\_\_

Grade \_\_\_\_\_

Name \_\_\_\_\_

Grade \_\_\_\_\_

Have you ever been relieved from a coach/assistant coach position or placed on probation by any league?

YES

NO

If yes, explain: \_\_\_\_\_

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## Coaching Philosophy and Objectives

List your general coaching philosophy and the goals/objectives you wish to accomplish as it relates to coaching a youth sports team: \_\_\_\_\_

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Please list any additional information you would like for us to consider.

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**City of Athens, TN Department of Parks and Recreation**  
**Criteria for Exclusion of Volunteers**  
**Effective - March 20, 2009**

A person will be disqualified and prohibited from serving as a volunteer if the person has been found guilty of the following crimes:

Guilty means that a person was found guilty following a trial, entered a guilty plea, entered a no contest plea accompanied by a court finding of guilty, regardless of whether there was an adjudication of guilt (conviction) or a withholding of guilt. These criteria do not apply if criminal charges resulted in acquittal, Nolle Prose, or dismissal.

**SEX OFFENSES**

- **All Sex Offenses** – *Regardless of the amount of time since offense.*  
**Examples include:** *child molestation, rape, sexual assault, sexual battery, sodomy, prostitution, solicitation, indecent exposure, etc.*

**FELONIES**

- **All Felony Violence** – *Regardless of the amount of time since offense.*  
**Examples include:** *murder, manslaughter, aggravated assault, kidnapping, robbery, aggravated Burglary, etc.*
- **All Felony offenses other than violence or sex** within the past 10 years.  
**Examples include:** *drug offenses, theft, embezzlement, fraud, child endangerment, etc.*

**MISDEMEANORS**

- **All misdemeanor violence** offenses within the past 7 years  
**Examples include:** *simple assault, battery, domestic violence, hit & run, etc.*
- **All misdemeanor drug & alcohol offenses** within the past 5 years.  
**Examples include:** *driving under the influence, simple drug possession, drunk and disorderly, public intoxication, possession of drug paraphernalia, etc.*
- **Any other misdemeanor** within the past 5 years that would be considered a potential danger to children or is directly related to the functions of that volunteer.  
**Example include:** *contributing to the delinquency of a minor, providing alcohol to a minor, theft – if person is handling monies, etc.*

A person may be disqualified and prohibited from serving as a volunteer, within the sole discretion of the Department, if the person has been found guilty of any other crime, or committed any act, which reflects adversely on the person's character and fitness to participate as a coach or in any other capacity in the Department programs.

**PENDING CASES**

Anyone who has been charged for any of the disqualifying offenses or for cases pending in court will not be permitted to volunteer until the official adjudication of the case.

This Background Screening Process is an ongoing process and is subject to review and change(s) at any time. These guidelines are based upon industry practices in private, public and non-profit areas.

**Notifications**

Applicants meeting the requirements of these guidelines will not be given a copy of the background check. Applicants who fail to meet the requirements of these guidelines will be notified in writing and will be given a copy of the Fair Credit Reporting Act-Summary of Rights, a letter of disqualification and a copy of the actual screening report results and/or any information required by law at the time of the disqualification.

By signing below I acknowledge that I have read and understood the above guidelines.

Name \_\_\_\_\_ Date \_\_\_\_\_



Department of Parks and Recreation  
Volunteer Application and Background Consent/Release Form

Applicant's Legal Name (printed)

\_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Applicant's Address

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I, \_\_\_\_\_, authorize and give consent for the above named organization to obtain information regarding myself. This includes the following:

- Criminal background records/information
- Sex Offender Registry Checks
- Addresses
- Social Security Verification

I the undersigned, authorize this information to be obtained either in writing or via telephone in connection with my application. Any person, firm or organization providing information or records in accordance with this authorization is released from any and all claims of liability for compliance. Such information will be held in confidence in accordance with the organization's guidelines.

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position Applying For \_\_\_\_\_ Team (if applicable) \_\_\_\_\_

Signature: \_\_\_\_\_