



City of Port Wentworth Recreation

Volunteer Application

Please Print Clearly

Date: _____ Volunteer Position/sport/age: _____

Last Name _____ First Name _____ MI _____

Address _____ E-mail Address _____

City _____ Shirt Size _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

What is the best way to contact you: _____.

High School Attended? _____ State _____

Describe any formal or informal training you may have had as a coach or volunteer. (Coaching clinics, courses, PE degree, etc.)

Have you ever been arrested or convicted of a criminal offense? Yes () No ()

(Please exclude minor traffic violations for which the fine was \$200 or less and any offense which was settled in a Juvenile Court or under a Welfare Youth Offender Law.) If Yes, Please explain: _____

What do you hope to gain from volunteering? _____

What other organizations have you volunteered with? _____

References (three people other than relatives)

Name _____

Occupation _____

Work # _____

Phone # _____

Name _____

Occupation _____

Work # _____

Phone # _____

Name _____

Occupation _____

Work # _____

Phone # _____

Employment History

What is your occupation? _____

Present Employer _____

How long? _____

Address _____

City _____

State _____

Zip Code _____

Previous Employer _____

How Long? _____

You make a living by what you get, but you make a life by what you give.

-- Winston Churchill



City of Port Wentworth Recreation



Prevention of Child Abuse Policy

This policy covers the required steps involved in volunteering, coaching youth activities, sports and programs; appropriate conduct related to the supervision of children; reporting procedures of suspected abuses; responsibilities to parents and recommendations for good practices related to the above.

Definition of Terms

Coaching and volunteering: All Volunteer coaches and all volunteer staff who have frequent and routine contact with children. (Parents who volunteer for special events are excluded.)

Child: 18 years or younger.

Volunteering Coaching, Training and Supervision

(For ages, preschool, school age children in all Recreation programs and camps)

1. A minimum of two reference checks are conducted, documented and filed on all potential Volunteers prior to coaching. References must include immediate prior employment and/or any employment involving supervision of children.
2. Criminal record checks are conducted on all volunteers who volunteer with Recreation Programs.
3. All volunteer coaches receive the following orientation training:
 - Recreation policies related to prevention of child abuse.
 - Recreation emergency procedures.

A note signed by each volunteer acknowledging that they have received and read the above information is to be filed in the Volunteer file.

4. Volunteers respond to children with respect and consideration and treat all children equally regardless of sex, race, religion, or culture.
5. Volunteers will respect children's rights to not be touched in ways that make them feel uncomfortable, and their right to say no. Children are not to be touched on areas of their bodies that would be covered by clothing.

6. Volunteers will refrain from intimate displays of affection towards others in the presence of children, parents, and staff.
7. While the Recreation Department does not discriminate against an individual's lifestyle, it does require that in the performance of their volunteer job they will abide by the standards of conduct set forth by the Recreation Department.
8. Volunteers must appear clean, neat, and appropriately attired.
9. Using, possessing, or being under the influence of alcohol or illegal drugs during volunteering hours is prohibited.
10. Smoking or use of tobacco in the presence of children or parents during volunteering hours is prohibited.
11. Profanity, inappropriate jokes, sharing intimate details of one's personal life, and any kind of harassment in the presence of children or parents is prohibited.
12. Volunteers must be free of physical and psychological conditions that might adversely affect children's physical or mental health. If in doubt, an expert should be consulted.
13. Volunteers will portray a positive role model for youth by maintaining an attitude of respect, loyalty, patience, courtesy, tact, and maturity.
14. Volunteers may not be alone with children they meet in Recreation Programs programs or outside of the Recreation Programs. This includes babysitting, sleepovers, and inviting children to your home. Any exceptions require a written explanation before the fact and are subject to administrator approval.
15. Volunteers are not to transport children in their own vehicles, unless you have written permission from a parent or legal guardian.
16. Volunteers may not date program participants under the age of 18 years of age.
17. Under no circumstances should volunteers release children to anyone other than the authorized parent, guardian, or other adult authorized by the parent or guardian (written parent authorization on file with the Recreation Department).
18. Volunteers are required to read and sign this policy related to identifying, documenting, and reporting child abuse.

Reporting Requirements Pertaining to All Recreation Programs

- **Mandatory Reporting of Child Abuse.** The Recreation Department requires all volunteers, especially volunteers working with children to report known or suspected child abuse to your Recreation Director or child protective agency by telephone immediately or as soon as practically possible and in writing within 36 hours.
- A child protective agency may be the respective County Department of Family and Children Services, or where not available a police or sheriff's department, or a county probation department.
- Any reasonable suspicion means that it is objectively reasonable for a person to entertain such a suspicion, drawing when appropriate on his or her training and experience, to suspect child abuse.

Note: Every volunteer has an absolute duty to report any reasonable suspicion of child abuse, molestation, or sexual misconduct to the proper authorities. The child protective agency will determine the accuracy of the report.

Volunteer Name (Printed)

Date

Volunteer Signature

Date

Name-Based Criminal History Record Information (CHRI) Consent/Inquiry Form

Thereby authorize _____ to conduct an inquiry for
Agency/Company
 the purpose below and receive any Georgia and/or national CHRI as authorized by state and federal law.

Full Name (print)			
Address			
Sex	Race	Date of Birth	Social Security Number

- ☐ This authorization is valid for _____ days from date of signature.
- ☐ I, _____, give consent to the above-named entity to perform periodic criminal history background checks for the duration of my employment.

Signature _____ Date _____

Date of Inquiry: _____ Time of Inquiry: _____ Operator's Initials: _____

Purpose Code Used (check one): Note: Only one inquiry may be performed per consent form.

NON-CRIMINAL JUSTICE PURPOSES		
	E	Employment
	M	Employment direct care with Mentally Ill/Developmentally Disabled
	N	Employment direct care with Elderly
	W	Employment direct care with Children
	F	Probate Court/Weapons Carry License
CRIMINAL JUSTICE EMPLOYMENT		
	J	Civilian Criminal Justice Employment (state and III data received)
	Z	Sworn Criminal Justice Employment (state and III data received)

This inquiry resulted in the following (check all that apply):

	No criminal history available
	Criminal history available (attached/released)
	No NCIC/GCIC Warrant
	Possible NCIC/GCIC Warrant (list Wanting agency below)
	Wanting Agency Name:
	Wanting Agency Telephone:

Agency Designee Signature and Title