

## Little League. Volunteer Application -2014

Do not use forms from past years. Use extra paper to complete if additional space is required.

## A COPY OF VALID GOVERNMENT ISSUED PHOTO IDENTIFICATION MUST BE ATTACHED TO COMPLETE THIS APPLICATION. Name\_\_\_\_\_ Date \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_ Social Security # (mandatory with First Advantage or upon request) Cell Phone \_\_\_\_\_\_ Business Phone \_\_\_\_\_ E-mail Address: Date of Birth \_\_\_\_\_ Occupation \_\_\_\_\_ Employer\_\_\_\_\_ Special professional training, skills, hobbies: Community affiliations (Clubs, Service Organizations, etc.): Previous volunteer experience (including baseball/softball and year): Do you have children in the program? Yes \( \subseteq \text{No} \subseteq \) If yes, list full name and what level? \_\_\_\_\_ Special Certification (CPR, Medical, etc.):\_\_\_\_\_ Do you have a valid driver's license: Yes \( \square\) No \( \square\) Driver's License#: State Have you ever been convicted of or plead guilty to any crime(s) involving or against Yes ☐ No ☐ a minor?: If yes, describe each in full: Are there any criminal charges pending against you regarding any crime(s) involving or against a minor? Yes No If yes, describe each in full: Have you ever been refused participation in any other youth programs? Yes ☐ No ☐ If yes, explain: \_\_\_\_\_ In which of the following would you like to participate? (Check one or more.) League Official Coach Umpire Field Maintenance □ Manager Scorekeeper Concession Stand Other $\square$

a volunteer in a youth program:	as
Name/Phone	
	-
	-
AS A CONDITION OF VOLUNTEERING, I give permission for the Little League organization to conduct background check(s) on me now and as long as I continue to a active with the organization, which may include a review of sex offender registries (so of which contain name only searches which may result in a report being generated that may or may not be me), child abuse and criminal history records. I understand that, if appointed, my position is conditional upon the league receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the local Little League, Little League Baseball, Incorporated, the officers, employees and volunteers thereof, or any other person or organization that may provisuch information. I also understand that, regardless of previous appointments, Little League is not obligated to appoint me to a volunteer position. If appointed, I understathat, prior to the expiration of my term, I am subject to suspension by the President a removal by the Board of Directors for violation of Little League policies or principles.	me at ide
Applicant Signature Date	
If Minor/Parent SignatureDate	
Applicant Name(please print or type)	- ıal
orientation or disability.  LOCAL LEAGUE USE ONLY:	
Background check completed by league officer on	- -
System)s) used for background check (minimum of one must be checked):	
Sex Offender Registry ☐ Criminal History Records ☐ *First Advantage ☐	
*Please be advised that if you use First Advantage and there is a name match in the few states where only name match searches can be performed you should notify volunteers that they will receive a letter directly from LexisNexis in compliance with the Fair Credit Reporting Act containin information regarding all the criminal records associated with the name, which may not necessar be the league volunteer.	
Only attach to this application copies of background check	

Places list three references, at least one of which has knowledge of your participation as