

KENT COUNTY PARKS & RECREATION VOLUNTEER APPLICATION



Dear Volunteer Applicant,

Thank you for your interest in volunteering with the County Commissioners of Kent County, Maryland Department of Parks and Recreation. Attached for your completion is the Kent County Parks and Recreation (KCPR) Volunteer Employment Packet. As a condition of volunteer service, the packet must be fully completed and must also include a signed Volunteer Acknowledgement and Agreement Form and a notarized Maryland Child Protective Services Background Clearance Request Form.

Additionally, for applicants who are at least 16 years of age, or who will be at least 16 years of age when service would begin, your consent is required for a search of the State of Maryland Child Protective Services (CPS) Centralized Confidential Database (**applicants under 16 years of age require parent/guardian consent to the search in addition to the minor applicant's signature**). The Consent for Release of Information form **must be completed online** by visiting the Maryland Department of Human Resources website. Detailed instructions on how to access and complete this form are outlined on the next page. Once the form is completed online, the form must be **printed and signed in the presence of a Notary Public (do NOT sign prior)**. The form is considered a part of the Kent County Volunteer Employment Application Packet and must be submitted at the time of the application submission.

Lastly, background searches of the Maryland Judiciary Case Search database, as well as the State of Maryland and Federal Bureau of Investigation Child Sex Offender Registries will also be conducted. As the information found within each of these databases is public record, your consent is not necessary to perform these searches.

Thank you for your interest in volunteering with Kent County's Department of Parks and Recreation. We look forward to receiving your application and background search consent form(s).

Sincerely,

Jill Coleman

Jill Coleman, M.Ed.

Director



Special Events Assistant

A Special Events Assistant requires minimal experience with school-age children. Candidates are responsible for set up and clean up of events, leading games and activities, giving instructions for crafts, and assisting with special and sporting events. Volunteers must be at least 15 years of age, be responsible, be courteous and helpful, and have good communication skills. This position is one that is in the public eye and should always reflect a professional manner as well as excellent character attributes. Please ask for a listing of special event dates. Physical demands/expectations may include, but are not limited to, the occasional lifting of up to 25 pounds, light cleaning, lifting event equipment, and actively engaging in indoor/outdoor recreational activities with participants.

Volunteer Youth Basketball Coach

A Volunteer Youth Basketball Coach requires a solid knowledge of the game of basketball, must be professional in appearance and demeanor, and have a desire to provide quality programming for youth ages 5-17. Candidates must be at least 18 years of age and are responsible for working to create a positive environment in which youth can learn the game and grow as people. Candidates must maintain a professional appearance and demeanor during all basketball league events when interacting with players and spectators. This position is one that is in the public eye and should always reflect a professional manner as well as excellent character attributes. Candidates must be willing to volunteer two to three nights per week for games and practices, as well as attend a mandatory coaches' orientation and clinic prior to the season starting. All volunteers are required to be screened for criminal history records searches. Physical demands/expectations may include, but are not limited to, the occasional lifting of up to 25 pounds and actively engaging in indoor recreational activities with participants. The number of positions for Volunteer Youth Basketball Coach varies each year depending on the number of teams formed.

Volunteer Youth Wrestling Coach

A Volunteer Youth Wrestling Coach requires a solid knowledge of wrestling and techniques of the sport, must be professional in appearance and demeanor, and have a desire to provide quality programming for youth in grades Pre- K - 8th. Candidates must be at least 18 years of age and are responsible for working to create a positive environment in which youth can learn the sport and grow as people. Candidates must maintain a professional appearance and demeanor during all league events when interacting with players, parents and spectators. This position is one that is in the public eye and should always reflect a professional manner as well as excellent character attributes. Candidates must be willing to volunteer two to three nights per week for practices, provide their own transportation to matches primarily on the Eastern Shore, as well as attend a mandatory coaches' orientation and clinic prior to the season starting. All volunteers are required to be screened for criminal history records searches. Physical demands/expectations may include, but are not limited to, the occasional lifting of up to 25 pounds and actively engaging in indoor recreational activities with participants. The number of positions for Volunteer Youth Wrestling Coach varies each year depending on the number of registered participants.

Volunteer Youth Softball Coach

A Volunteer Youth Softball Coach requires a solid knowledge of softball and techniques of the sport, must be professional in appearance and demeanor, and have a desire to provide quality programming for youth in grades Pre- K - 8th. Candidates must be at least 18 years of age and are responsible for working to create a positive environment in which youth can learn the sport and grow as people. Candidates must maintain a professional appearance and demeanor during all league events when interacting with players, parents and spectators. This position is one that is in the public eye and should always reflect a professional manner as well as excellent character attributes. Candidates must be willing to volunteer two to three nights per week for practices, provide their own transportation to games primarily on the Eastern Shore, as well as attend a mandatory coaches' orientation and clinic prior to the season starting. All volunteers are required to be screened for criminal history records searches. Physical demands/expectations may include, but are not limited to, the occasional lifting of up to 25 pounds and actively engaging in indoor recreational activities with participants. The number of positions for Volunteer Youth Softball Coach varies each year depending on the number of registered participants. All softball coaches are required to maintain a current CPR/AED/First Aid certification.

Summer Camp Volunteers

A Summer Camp Volunteer requires minimal experience with school-age children. Candidates are responsible for set up and clean up of events, leading games and activities, giving instructions for crafts, and assisting with special and sporting events. Volunteers must be at least 15 years of age, be responsible, be courteous and helpful, and have good communication skills. This position is one that is in the public eye and should always reflect a professional manner as well as excellent character attributes. Physical demands/expectations may include, but are not limited to, the occasional lifting of up to 25 pounds, light cleaning, lifting event equipment, and actively engaging in indoor/outdoor recreational activities with participants.

VOLUNTEER INFORMATION

First Name: _____ Middle _____ Last _____

DOB _____

Email _____ Home Phone _____ Cell _____

Address _____ City _____ State _____ Zipcode _____

Shirt Size (Unisex) _____

What program, sport or event are you applying to volunteer for? _____

Have you ever been employed with us before? Yes No If Yes, what date: _____

Do any of your friends or relatives work here? Yes No If Yes, whom: _____

Available start date _____ What days / times are you available _____

Employment

Name of Current Employer _____ Position _____

Supervisor _____ Phone _____

Education

High School _____ Years Completed _____ Diploma Received _____

College _____ Years Completed _____ Diploma Received _____

Other _____ Years Completed _____ Diploma Received _____

Character References (not related to you):

Name _____ Phone Number _____ Relationship _____

Name _____ Phone Number _____ Relationship _____

Name _____ Phone Number _____ Relationship _____

Emergency Contact

Name _____ Phone Number _____ Relationship _____

Health Insurance Provider _____

Describe any specialized training, interests, and extra-curricular activities

What previous volunteer experience do you have?

What other qualifications and additional information you feel may be helpful?

Print Name _____ Signature _____

Date _____

DISCLOSURE & AGREEMENT

Kent County screens prospective volunteers to evaluate whether an applicant poses a risk of harm to children, youth, elderly, and others served by KCPR. Information obtained is not an automatic bar to volunteer work but is considered in view of all relevant circumstances. This disclosure is required to be completed, any falsification, misrepresentation, or incompleteness in this disclosure alone is grounds for disqualification.

Must check "yes" if you have ever been convicted of, pleaded guilty to, pleaded nolo contendere or no contest to, admitted, had any license, certificate, or employment suspended, revoked, terminated, or adversely affected because of, been diagnosed as having or treated for any mental or emotional condition arising from, or resigned under threat of termination of employment or volunteer work for any of the following:

- | | | | | |
|--------------------------|-----|--------------------------|----|--|
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Any felony |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Rape or other sexual assault |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Drug or alcohol related offenses |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Abuse of a minor or child (physical or sexual) |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Incest |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Kidnapping, false imprisonment, or abduction |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Sexual harassment |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Lewdness or indecent exposure |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Assault, battery, or other offense |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Endangerment |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Any misdemeanor involving a minor |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Been accused of any of the above |

If you have answered "yes" to any of the above, please explain

I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for refusal of volunteer services. I understand that as a volunteer, authorized by Kent County Parks and Recreation (KCPR), I am afforded liability protection with respect to damages to third parties to the same extent as County employees, as long as I am acting within the scope of my duties as a volunteer. I will notify a KCPR Program Coordinator or Deputy Director if I have a safety concern and report to my supervisor immediately if myself or someone else is injured. By signing this agreement, I understand that I have freely offered, on a voluntary basis, my services in connection with activities being conducted by the Parks and Recreation Department. I specifically acknowledge that I am a volunteer and not an employee or subcontractor of Kent County. I further acknowledge that certain dangers and risks are inherent in connection with the contemplated volunteer services including, but not limited to, cuts, scrapes, contraction of infection or disease and other injury. I, hereby, release, and forever discharge Kent County, its officials, employees, sponsors, board members, and County Government Officials from any and all claims, demands, or causes of action heretofore or hereafter arising or relating to my involvement in connection with or any damage or injury that may occur in connection with my providing volunteer services.

Print Name _____ **Signature** _____ **Date** _____

Parent or Guardian Name _____ **Signature** _____ **Date** _____
(If applicant is under 18)

RELEASE CONCERNING BACKGROUND INVESTIGATION

I have completed and submitted a volunteer application with Kent County. I certify that all statements contained in that application are true and complete, and I understand that any misrepresentation or omission in that application may be cause for my non-selection or termination.

I hereby authorize Kent County, its officers, its designated agents, and/or its employees to conduct an investigation into my background. I understand this investigation may solicit information from and include contact with the character references list on my application, as well as former employers and co-workers, scholastic institutions, police agencies, financial institutions, neighbors, friends and relatives, and medical and psychiatric/psychological providers, whether listed on my application or not. I hereby waive any claims that I might have against Kent County, its officers, and/or its employees arising from Kent County's requests for information concerning my volunteer application or from its receipt of such information and dissemination of the information in connection with Kent County's consideration of my volunteer application. I further release and agree to hold harmless and indemnify Kent County, its officers, and its employees against any claims that third parties should make against Kent County, its officers, and/or its employees based on Kent County's request for information on my background or its receipt of such information from other individuals or agencies.

I understand the purpose of this inquiry is to help determine my eligibility as a volunteer with Kent County, and I request and authorize any and all of my former employers, scholastic institutions, police agencies, financial institutions, credit bureaus, neighbors, friends, relatives, or other persons to furnish Kent County any and all information concerning me. I hereby release and agree to hold harmless any and all such persons or organizations from any liability or damage which may be incurred as a result of furnishing to Kent County the information requested by Kent County in regard to my volunteer application. A photocopy of this release may be used for the purposes set forth herein.

Print Name: (First) _____ **(Middle)** _____ **(Last)** _____

Former Name(s) _____

Current Address Since: (Mo/Yr) _____

(Street) _____ (City) _____ (Zip/State) _____

Previous Address Since: (Mo/Yr) _____

(Street) _____ (City) _____ (Zip/State) _____

Previous Address Since: (Mo/Yr) _____

(Street) _____ (City) _____ (Zip/State) _____

Social Security Number _____ **DOB** _____

Phone Number _____

Driver's License Number/State _____

(Note: Date of Birth and Social Security Number information will be used for the sole purpose of verifying your identity in connection with the background investigation.)

Print Name _____ **Signature** _____ **Date** _____

Parent or Guardian Name _____ **Signature** _____ **Date** _____
(If applicant is under 18)

INDEMNIFICATION AND RELEASE AGREEMENT

- In consideration for being permitted to perform the below-described activities, the undersigned Volunteer (referred to herein as "Volunteer"), agrees to indemnify and hold harmless Kent County Parks and Recreation, its officers, employees, insurers, and self-insurance pool, from and against all liability, claims, and demands, on account of injury, loss, or damage, including without limitation claims arising from bodily injury, personal injury, sickness, disease, death, property loss or damage, or any other loss of any kind whatsoever, which arise out of or are in any manner connected with the below-described activities, if such injury, loss, or damage is caused in whole or in part by, or is claimed to be caused in whole or in part by, the act, omission, negligence, or other fault on the part of the Volunteer. This indemnification and hold-harmless obligation shall not extend to any acts or omissions for which Kent County Parks and Recreation has indemnification obligations to the Volunteer pursuant to the Governmental Immunity Act, C.R.S. § 24-10-101 et seq.
- Volunteer understands that the below-described activities may involve risks of injury, loss or damage to Volunteer, including but not limited to bodily injury, personal injury, sickness, disease, death, and property loss or damage. By signing this agreement, Volunteer expressly agrees to assume any and all such risks. In addition, in consideration for being permitted to perform the below-described activities, Volunteer hereby expressly exempts and releases Kent County Parks and Recreation, County Commissioners of Kent County, its officers, employees, insurers, and self-insurance pool, from and against all liability, claims, and demands, on account of injury, loss, or damage to Volunteer, including without limitation claims arising from bodily injury, personal injury, sickness, disease, death, or property loss or damage, that Volunteer may incur as a result of being upon the premises of Kent County Parks and Recreation or as a result of performing the below-described activities, whether any such liability, claims, and demands result from the act, omission, negligence, or other fault on the part of Kent County Parks and Recreation, its officers, or its employees, or from any other cause whatsoever.
- Volunteer further certifies that he/she has taken all necessary precautions to be certain that he/she is in proper condition, and states that he/she is in proper condition, to participate in the below-described activities.
- Volunteer further certifies that he/she has health insurance.
- Description of activities to authorized to be performed: **See attached**
- Kent County Parks and Recreation employee responsible for supervision of volunteer: **Recreation Program Coordinator**
- Period during which activities are to be performed: **One year from official approval**

Print Name _____ **Signature** _____ **Date** _____

Parent or Guardian Name _____ **Signature** _____ **Date** _____
(If applicant is under 18)

TO BE COMPLETED ONLINE AND PRINTED BEFORE SIGNING IN THE PRESENCE OF A NOTARY

ADAM WALSH BACKGROUND CLEARANCE REQUEST INSTRUCTIONS

IMPORTANT NOTE:

WE HIGHLY ENCOURAGE YOU TO COMPLETE THIS REQUIREMENT ON SITE AT THE COMMUNITY CENTER IN WORTON. WE WILL NOTARIZE THE FORM FOR YOU AND WE DO NOT CHARGE A FEE FOR THE SERVICE OR TO PRINT THE FORM.

PLEASE CALL 410-778-1948 IN ADVANCE TO SCHEDULE AN APPOINTMENT TO ENSURE OUR NOTARY IS ONSITE. Appointments are generally available from: 8:30 am – 5:45 pm, Monday through Friday (May- October) and 8:30 am- 8:00 pm (November- April).

- Access the DHR website at <http://dhr.maryland.gov/>
- Click the children link
 - **If applying as a Summer Camp Volunteer or a child care related program**, (must be 15 years old to apply): On the next screen under Request a Background Clearance, click Youth/Summer Camp
 - Although the directions say otherwise, please do not complete this yourself. KCPR staff will take care of this portion of your application, as if you have volunteered for us in a summer camp/child care position last year, your account is already created.
 - If you did not volunteer for us in a summer camp/child care position, we will notarize your form onsite at our office and take care of creating your account and submitting the form.
 - **If applying for any other position**: On the next page under Request a Background Clearance, click Other Individuals
 - Click on the Fillable PDF Form: [Child Protective Services Background Clearance Form \(DHR/SSA1279A\)](#)
 - Please follow the instructions below and not the instructions below the link for the PDF form – The form must be submitted with your employment application and not sent to the address in the DHR instructions
- **Complete Part I-A** Only if you would like to have the results of the search sent to you
- **Complete Part I-B**
 - Select “Other” and type: **County Commissioners of Kent County, Parks and Recreation**
 - Under Agency/Individual Name type: **Kent County Parks and Recreation**
 - Under Name of Agency Representative type: **Sandy Adams**
 - Under Agency’s Address type: **11041 Worton Rd, P.O. Box 67, Worton, MD 21678**
 - Under Representative’s Phone Number type: **410-778-1948**
 - Under Representative’s Email type: **sadams@kentgov.org**
- **Complete Part II** in its entirety as applicable to the person being searched; If a section is not applicable to the person being searched, leave the section blank
 - Don’t forget to answer the “yes or no” questions about living and volunteering in Maryland in the past; If you answer yes to either question you must also indicate the year (example: 1985-2017)
- **Fully Read Part III** (If the applicant/person being searched is at least 16 years of age, or will be at least 16 years of age when service begins, the applicant/person being searched must read this section; If the person being searched is under 16 years of age, a parent/guardian must read this section)
- **Print the form** (only after reviewing that all sections are complete)
- **Complete Part IV in the presence of a Notary Public**
 - If the applicant/person being searched is at least 16 years of age, or will be at least 16 years of age when service will begin, the applicant/person being searched must complete this section; If the applicant/person being searched is under 16 years of age, the applicant and a parent/guardian must complete this section which requires both the applicant and parent/guardian signatures and printed names)
- **Part V must be completed by a Notary Public** as the final step in completing the form
- Submit the notarized form and your application directly to Kent County Parks and Recreation (by mail to the address on the application or in person at the Kent County Community Center located in Worton, MD)

PLEASE NOTE: With the exception of Parts IV and V of the form, ALL sections of the form must be type written, otherwise the form will not be accepted and will be returned for improper completion which will result in delaying the processing of your application.