

East Windsor Police Athletic League Inc.

Official 2010 Volunteer Application (Complete BOTH Pages) Do NOT use forms from past years.

PLEASE NOTE: A copy of a valid government-issued photo identification or State issued license must be attached to this application.

Name: _____ Date: _____ Which Sport are you coaching: _____

Prior/Maiden Names or Aliases: _____

Address: _____ Community affiliations (Clubs, Service Organizations, etc.): _____

Telephone: _____ Email: _____

City: _____ State: _____ Zip: _____ Previous/current volunteer experience (e.g. baseball/softball and years): _____

Mailing Address (if different): _____

Previous states resided in the past 5 years: _____ Do you have children in the program? YES _____ NO _____

Date of Birth: _____ (mm / dd / yyyy) If yes, at what level? _____ Certified in: CPR: _____ Year _____ First Aid: _____ Year _____

Social Security Number: _____ Have you ever been convicted of a crime? YES _____ NO _____

Occupation: _____ If yes, provide your current legal status (parole, etc.) _____

Employer: _____ Have you ever been convicted of **any** crime involving or against a minor? YES _____ NO _____

Address: _____ Have you ever plead guilty to or been convicted of any other type of crime? YES _____ NO _____

Do you have a valid driver's license? YES _____ NO _____ If yes, explain: _____

Driver's License#: _____ State: _____

Special professional training, skills, hobbies: _____ 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? ("X" one or more.)

League Official: _____ Head Coach: _____ Board Member: _____ Equipment Manager: _____ Assist. Coach: _____

Team Mom: _____ Coach Trainee: _____ Trainer: _____ Student Demo: _____

Other: _____

Discrimination Policy: The East Windsor Police Athletic League Inc. will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

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Please list three references, aside from family members, at least one of which has knowledge of your participation as a volunteer in a youth program:

<u>Name:</u>	<u>Nature of Relationship:</u>	<u>Phone #:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby affirm and attest that all information provided on this application is true and complete to the fullest extent of my knowledge. If I am accepted as a volunteer, E.W.P.A.L. may end the relationship if I have made any false statements or material misrepresentations, written or verbal. As a condition of volunteering, I hereby grant permission to the E.W.P.A.L. to conduct a background check on me, which may include a review of database records including but not limited to sex offender registries, child abuse and criminal history records in compliance with the E.W.P.A.L.'s child protection policy. I understand and agree that, if appointed, my position is conditional upon the E.W.P.A.L. receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the East Windsor Police Athletic League Incorporated, the officers, employees and volunteers thereof, and/or any other person or organization that may provide such information.

I also understand that, regardless of previous appointments, the E.W.P.A.L. is not obligated to appoint me to a volunteer position. I understand that, prior to the expiration of my term, I am subject to suspension by the President and removal by the Board of Directors for any and all violations of the East Windsor Police Athletic League's policies or principles.

Dispute Resolution Policy:

If appointed, I hereby understand and agree that any and all civil disputes by and between myself, the E.W.P.A.L. and any and all affiliated parties will be subject to an appeal process governed by the East Windsor Police Athletic League's Executive Board and overseen by the Board of Directors and the Executive Director. I hereby agree that this dispute resolution process shall be in lieu of any litigation by and between myself, the East Windsor Police Athletic League Inc. and any and all affiliated parties. If any portion of this application shall be deemed unenforceable or invalid, this arbitration agreement shall still remain in full force and effect.

_____	_____
Applicant Signature	Date
Applicant Name (Print or Type): _____	

NOTE: The East Windsor Police Athletic League, Incorporated will retain all disclosure forms in a secure manner for a period of two (2) years after application. At the expiration of the two (2) year period the application/disclosure form shall be destroyed. All information gathered will be held in the strictest confidence.

For Administrative Use Only. Please print the name of the individual who completed the background check on the volunteer.

Background check completed by the Executive Director: _____
or _____

Background check completed by a designee: _____
or _____

completed by: _____ Date Completed: _____

System(s) used for background check (minimum of one must have "X"):

Online multistate database: _____ State/Local Criminal History Records: _____ State Sex Offender Registry: _____ Other: (please explain) _____
(Rapsheets, Intellicorp., etc.) _____