

Little League Volunteer Application - 2017

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 _____ Home 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 \square No \square 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 a minor?: Yes □ No □ 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 Scorekeeper Concession Stand Manager Other \square

volunteer in a youth program:	
Name/Phone	
	
IF YOU LIVE IN A STATE THAT REQUIRES A SEPARATE BACKGROU OF THAT STATE'S BACKGROUND CHECK. FOR MORE INFORMATION	
http://www.littleleague.org/learn/programs/childprotec	tion/state-laws-bg-checks.htm
AS A CONDITION OF VOLUNTEERING, I give permission for the Litt check(s) on me now and as long as I continue to be active with the confender registries (some of which contain name only searches which may or may not be me), child abuse and criminal history records. It conditional upon the league receiving no inappropriate information to hold harmless from liability the local Little League, Little League Band volunteers thereof, or any other person or organization that may that, regardless of previous appointments, Little League is not oblig appointed, I understand that, prior to the expiration of my term, I a removal by the Board of Directors for violation of Little League police.	organization, which may include a review th may result in a report being generated understand that, if appointed, my position on my background. I hereby release and Baseball, Incorporated, the officers, employ provide such information. I also unders ated to appoint me to a volunteer position m subject to suspension by the President
Applicant Signature	Date
If Minor/Parent Signature	
Applicant Name(please print or type)	
NOTE: The local Little League and Little League Baseball, Incorp person on the basis of race, creed, color, national origin, marita disability. LOCAL LEAGUE USE	l status, gender, sexual orientation or
Background check completed by league officer on	
System)s) used for background check (minimum of or Sex Offender Registry Criminal History Record *Please be advised that if you use First Advantage and there	*First Advantage ** *is a name match in the few states
where only name match searches can be performed you sho receive a letter directly from LexisNexis in compliance with the information regarding all the criminal records associated with be the league volunteer.	he Fair Credit Reporting Act containing
Only attach to this application copies	