



RETURN ORIGINAL SIGNED VOLUNTEER APPLICATION PACKET TO:

<u>Mail:</u> Kent County Parks and Recreation P.O. Box 67 Worton, MD 21678 In Person: Kent County Community Center 11041 Worton Rd. Worton, MD 21678

Important Notice to Volunteer Applicants

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 <u>must be completed online</u> 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 <u>printed (DO Not Sign) and signed in the presence of a Notary Public</u>. 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,

Gill Coleman

Jill Coleman, M.Ed. Director

Special Note for Youth Sport Program Volunteers/Coaches: If you are applying to volunteer as a youth sport program volunteer or coach, you are also required to submit to a background search through Protect Youth Sports. This search requires completion of the attached Protect Youth Sports Background Check Authorization. *If you are not applying as a youth sport program volunteer or coach, please do not complete this additional form.*

11041 Worton Road * P.O. Box 67 * Worton, MD 21678 * 410-778-1948 * info@KentParksAndRec.org KentParksAndRec.org * Facebook.com/KentCountyCommunityCenter * Facebook.com/KentParksAndRecMD

COUNTY COMMISSIONERS OF KENT COUNTY, MD DEPARTMENT OF PARKS & RECREATION State of Maryland Child Protective Services Program

Consent for Release of Information CPS Background Clearance Request Adam Walsh Background Clearance Request Instructions

<u>*The form must be completed online AND printed before signing in the presence of a Notary</u>*

IMPORTANT NOTE:

WE HIGHLY <u>ENCOURAGE YOU TO COMPLETE THIS REQUIREMENT ON SITE</u> 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. <u>PLEASE CALL 410-778-1948 IN ADVANCE TO SCHEDULE AN APPOINTMENT TO ENSURE OUR NOTARY IS ONSITE.</u> <u>APPOINTMENTS ARE GENERALLY AVAILABLE FROM 8:30 am – 5:45 pm, Monday through Friday (May- October)</u> and 8:30 am- 8:30 pm (November- April).

- 1. Access the DHR website at http://dhr.maryland.gov/
- 2. 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 page under Request a Background Clearance, click Youth/Summer Camp
 - i. 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.
 - ii. If you did not volunteer for us in a summer camp/child care position, we will notarize your form on site 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
 - i. Click on the Fillable PDF Form: <u>Child Protective Services Background Clearance Form (DHR/SSA</u> 1279A)
 - ii. <u>Please follow the instructions below and not the instructions below the link for the PDF form</u> The form must be submitted with your employment application and not sent to the address in the DHR instructions
- 3. Complete Part I-A Only if you would like to have the results of the search sent to you
- 4. 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
- 5. **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)
- 6. **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**)
- 7. **Print the form** (only after reviewing that all sections are complete)
- 8. **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*)
 - In addition to signing and dating the form, please also clearly print the name of the person who signs the form (print two names if applicant/person being searched is under 16 years of age)
 - KCPR has Notary Publics on staff that are available by appointment to notarize the form at no cost to you. Please call 410-778-1948 to schedule an appointment with a notary. You are also free to have the form notarized elsewhere at your own cost. However, we strongly encourage having the form notarized at KCPR to ensure the form is completed properly and in its entirety. <u>Incomplete or illegible forms will not be accepted</u> <u>and will result in a delay of processing your application</u>.
- 9. Part V must be completed by a Notary Public as the final step in completing the form

Submit the notarized form <u>and</u> **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)

LEASE 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.

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County Commissioners of Kent County, MD * Department of Parks & Recreation 11041 Worton Rd., P.O. Box 67, Worton, MD 21678 * info@KentParksAndRec.org KentParksAndRec.org * Facebook.com/KentCountyCommunityCenter **Volunteer Acknowledgement and Agreement**

~Must Complete Entire Packet~

Last Name	First Name		Middle Name	Date of Birth	
Mailing Address		City	State	Zip Code	
Phone Numbers Home: Program / Location of Interest:	Cell:	Email Addro		T-Shirt Size:	
0			-	onth / Day / Year	
Best time to contact you is	5:			:am/pm	
Have you ever been emplo If Yes, give date:_	byed with us before?			Yes 🗆 No	
Do any of your friends or If Yes, whom:	relatives work here?			Yes 🗆 No	
Date available to begin vo	lunteering:/	/			
When are you available? (Mornings Weekends Where would you like to a Children/Y Individuals Trips	Aft Spe opply your volunteer tin outh s with Disabilities	me? (Please check all t	that apply) Se Sj	plain): eniors pecial Events	
Education					
	Name and Address of School	Course of Study	Number of Years Completed	Diploma Received	
Elementary School					
Middle School					
High School					
College					
Other					
If you are currently emplo Name of Employer		he following:			

□ Part Time □ Full Time

Position: Supervisor:_____

Phone Number:

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

at previous volunteer expe	rience do you have?	
t other qualifications and	additional information you feel may be he	lpful:
aracter References (not rela	ated to you):	
	ated to you): Phone Number:	Relationship:
Name:		_
Name: Name:	Phone Number:	Relationship:
Name: Name:	Phone Number: Phone Number: Phone Number: Phone Number:	Relationship:

Disclosure Affidavit

Kent County screens prospective employees and 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:

Yes	No	
		Any felony
		Rape or other sexual assault
		Drug or alcohol related offenses
		Abuse of a minor or child (physical or sexual)
		Incest
		Kidnapping, false imprisonment, or abduction
		Sexual harassment
		Lewdness or indecent exposure
		Assault, battery, or other offense

Endangerment

Any misdemeanor involving a minor

Been accused of any of the above

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

If none, write "none".

Description

As a Kent County volunteer, the lasting impression you make on those you serve reflects directly on all of us. Please be sure your work and deeds will help build our program and its reputation for quality. In dealing with the public, you must be unfailingly polite and mannerly. It is not your role or responsibility to handle unhappy citizens. Should you find yourself in a situation where courtesy is becoming difficult, please immediately refer the matter to the KCPR Program Coordinator.

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.

Signature of Volunteer

Date

A parent or guardian must sign this form if the volunteer named above is under 18 years of age.

Parent or Guardian Signature

Date

To Whom It May Concern:

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, 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, it 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 Full Name: ____

Last, First, and Middle Initial

Present Address: _____

Street Address and Apt. No.

City, State, and Zip Code

Date of Birth:

Month, Day, and Year

Social Security Number: _____

(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.)

Signature of Applicant/Volunteer

Date

A parent or guardian must sign this form if the volunteer named above is under 18 years of age.

Parent or Guardian Signature

County Commissioners of Kent County, MD Department of Parks & Recreation Indemnification and Release Agreement-Authorized Volunteer

- A. 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 seg.
- B. 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.
- C. 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.
- D. Volunteer further certifies that he/she has health insurances, as described below:
- E. Health Insurance Company (to be completed by volunteer):_____
- F. Description of activities to authorized to be performed (to be completed by Kent County Parks and Recreation or attach Description of Responsibility):
- G. Kent County Parks and Recreation employee responsible for supervision of volunteer (to be completed by Kent County Parks and Recreation):

Recreation Program Coordinator

H. Period during which activities are to be performed (to be completed by Kent County Parks and Recreation):

One year from official approval

In case of emergency, contact (to	be completed by Volunteer):	
Name:		
Address:		
Telephone:		
Relationship:		
-		

I.

Executed this	day of	, 20	_ by the Volunteer whose name
and signature appear	r below.		

Signature of Volunteer

Printed Name of Volunteer

Address of Volunteer

City, State, and Zip Code

Phone Number of Volunteer

Email Address of Volunteer

Signature of Parent or Guardian

Printed Name of Parent or Guardian

Address of Parent or Guardian (if different from above)

City, State, and Zip Code

Phone Number of Parent or Guardian

Email Address of Parent or Guardian

ALL INFORMATION PROVIDED SHALL REMAIN CONFIDENTIAL

Protect Youth Sports Background Check Authorization

*PLEASE ONLY COMPLETE THIS FORM IF APPLYING TO **VOLUNTEER AS A YOUTH SPORT PROGRAM COACH***

Print Name:					
(First)	(Mi	ddle)	(Last)		
Former Name(s) and Dat	tes Used: _				
Current Address Since:					
	(Mo/Yr)	(Street)		(City)	(Zip/State)
Previous Address From:					
	(Mo/Yr)	(Street)		(City)	(Zip/State)
Previous Address From:					
	(Mo/Yr)	(Street)		(City)	(Zip/State)
Social Security Number:				DOB:	
Telephone Number:					
Driver's License Number	/State:				

The information contained in this application is correct to the best of my knowledge. I hereby authorize Kent County Parks and Recreation and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; current and previous residences; and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency to divulge any and all information, verbal or written, pertaining to me, to Kent County Parks and Recreation or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

Kent County Parks and Recreation and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants' personal information, including, but not limited to, addresses, social security numbers, and dates of birth.



County Commissioners of Kent County, MD Department of Parks & Recreation



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Volunteer Summaries

<u>Volunteer Applicants</u>: All volunteers recommended for service must meet pre-screening requirements including criminal history searches. For a portable format document (PDF) of the application packet, please visit <u>http://www.kentparksandrec.org</u>. Applications may also be obtained in person at the Parks & Recreation office located at 11041 Worton, Rd. in Worton, MD 21678. For more details, please contact the administrative office during administrative business hours (8:30 am- 4:30 pm, Monday-Friday) at 410-778-1948 or info@KentParksAndRec.org.

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 <u>15 years of age</u>, 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 50 pounds, light cleaning, lifting event equipment, and actively engaging in indoor/outdoor recreational activities with participants.

Volunteer Youth Basketball Coach (Application Must be Submitted and All Requirements Met):

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 5-13. Candidates must be at least **<u>18 years of age</u>** 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 (Application Must be Submitted and All Requirements Met):

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 (Application Must be Submitted and All Requirements Met): 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.

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 <u>15 years of age</u>, 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.