Howard County RECREATION & PARKS

VOLUNTEER APPLICATION

CONTACT INFORMATION

Name: _____
First M.I. Last

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____ Birth Date: _____ / _____ / _____
mm dd yyyy

Emergency Contact Name: _____ Relationship: _____

Emergency Contact Phone: _____

REASON FOR VOLUNTEERING

Check all that apply:

- ☐ Academic Credit/Experience
- ☐ To support a family member participating in a program
- ☐ To share my skills
- ☐ To meet requirements for a scout group or club
- ☐ To support my community
- ☐ To support Howard County Recreation & Parks
- ☐ Other: _____

VOLUNTEER POSITION INTERESTS

What volunteer opportunities are you interested in?

- ☐ Environmental/Nature Programs
- ☐ Historic Sites
- ☐ After School/ Youth Programs
- ☐ Senior Programs
- ☐ Sports Coach
  Program Name: _____
- ☐ Special Events
  Program Name: _____
- ☐ Community Centers, Parks, and Facilities
- ☐ Other: _____

PREVIOUS VOLUNTEER EXPERIENCE, SKILLS OR QUALIFICATIONS

Please list any information that you consider pertinent to your interest in volunteering.
Including professional affiliations, school honors, skills, strengths, training and/or experience:

_____

_____

_____

PERSONAL INFORMATION

Employment Information: ☐ Employed ☐ Unemployed ☐ Retired ☐ Student

Employer's Name or School Currently Attending: _____

Occupation: _____

Health issues:
Are there any health concerns that our staff should be aware of? ☐ Yes ☐ No
If yes, please specify:

_____

_____

REFERENCES

We reserve the right to check references on all potential volunteers. Please list two people (other than relatives) who would be willing to serve as personal references and have known you for at least one year.

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

GENERAL INFORMATION

Affirmative response to the following question will not automatically exclude you from volunteering.

Have you ever been convicted of an offense in an adult court? ☐ Yes ☐ No

If yes, please explain:

_____

_____

VOLUNTEER TERMS AND SIGNATURE

- I give Howard County Recreation & Parks permission to do a background check prior to my volunteer assignment. I understand that my volunteer service is contingent upon receiving satisfactory background check results.
- I understand that I will not be paid as a volunteer.
- I understand that I will serve at the pleasure of the Appointing Authority of the Department/Agency (or their designee) and may be dismissed from my volunteer duties at any time, with or without cause. A volunteer may not be selected for volunteer service. This determination may be made with or without cause.
- I agree to perform the volunteer duties to which I am assigned to the best of my ability and in a professional manner.
- I understand that as a volunteer, authorized by the Volunteer Coordinator, 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. Howard County assumes no liability for injury to me or damage to my personal property unless caused by the negligence of the County.
- On behalf of myself and/or my child, I understand that there are inherent dangers in any recreational activity or program such as slips, falls, and various athletic injuries related to sports and play. I/we hereby release and hold harmless Howard County, Maryland, its officials, agents and employees from liability or obligation arising from, or in connection with, me/my child's volunteer activities.
- Howard County Recreation & Parks reserves the right to photograph programs and volunteers for publicity purposes.
- Please visit www.howardcountymd.gov/rap to access the Volunteer Handbook.
- Please submit a copy of your photo ID to: volunteer@howardcountymd.gov (Driver's License, Passport, Government Issued ID, School ID)

I hereby certify that the information provided above is true and complete and I accept the terms and conditions of volunteering for Howard County Recreation & Parks.

Signature of Applicant: _____ Date:_____

If volunteer is under 18 years of age, a parent or guardian must consent to an applicant's working as a volunteer. I hereby consent to my child's participation in the Howard County Department of Recreation & Parks volunteer program.

Signature of Parent/Guardian: _____ Date:_____

FOR DEPARTMENT OF RECREATION & PARKS USE ONLY

Volunteer ID #: _____ ***Data Entry Initials:*** _____ ***Date Entered:*** _____ / _____ /_____

Coordinator/Supervisor Signature:_____ ***Date:*** _____ / _____ /_____