

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 GOVERNM	VENT ISSUED PHOTO IDENTIFICATION MUST BE
ATTACHED TO COMPLETE TH	
	Date
Address	
	StateZip
	vith First Advantage)
Cell Phone	
Home Phone:	
Address	
Special professional training	;, skills, hobbies:
Community affiliations (Club	os, Service Organizations, etc.):
Previous volunteer experien	ce (including baseball/softball and year):
-	program? Yes No If yes, list full name and what Special
Certification (CPR, Medical,	
Do you have a valid driver's	
, Driver's License#:	State
Have you ever been convicte a minor?: Yes V	ed of or plead guilty to any crime(s) involving or against
Are there any criminal charg or against a minor?	es pending against you regarding any crime(s) involving No If yes, describe each in full:
	participation in any other youth programs? Yes No
League Official 🗌 Coach	ould you like to participate? (Check one or more.) DUMpire Field Maintenance C er Concession Stand COther C

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

Name/Phone

IF YOU LIVE IN A STATE THAT REQUIRES A SEPARATE BACKGROUND CHECK BY LAW, PLEASE ATTACH A COPY OF THAT STATE'S BACKGROUND CHECK. FOR MORE INFORMATION ON STATE LAWS, VISIT OUR WEBSITE:

http://www.littleleague.org/learn/programs/childprotection/state-laws-bg-checks.htm

AS A CONDITION OF VOLUNTEERING, I give permission for the Little League organization to conduct background check(s) on me now and as long as I continue to be active with the organization, which may include a review of sex offender registries (some of which contain name only searches which may result in a report being generated that may or may not be me), child abuse and criminal history records. I understand that, if appointed, my position is conditional upon the league receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the local Little League, Little League Baseball, Incorporated, the officers, employees and volunteers thereof, or any other person or organization that may provide such information. I also understand that, regardless of previous appointments, Little League is not obligated to appoint me to a volunteer position. If appointed, 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 violation of Little League policies or principles.

Applicant Signature	Date
If Minor/Parent Signature	_Date

Applicant Name(please print or type) _

NOTE: The local Little League and Little League Baseball, Incorporated will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

LOCAL LEAGUE USE ONLY: Background check completed by league officer
System)s) used for background check (minimum of one must be checked):
Sex Offender Registry \square Criminal History Records \square *First Advantage \square
*Please be advised that if you use First Advantage and there is a name match in the few states where only name match searches can be performed you should notify volunteers that they will receive a letter directly from LexisNexis in compliance with the Fair Credit Reporting Act containing information regarding all the criminal records associated with the name, which may not necessarily be the league volunteer.
Only attach to this application copies of background check reports that reveal convictions of this application.