

Walton County Parks & Recreation Department

Contracted Labor / Volunteer Application

Date of Service / Season: _____

Activity: Basketball T-Ball Softball Baseball Football Cheerleading
 Soccer Instructional Class Track & Field Other:

Age Division: 4 5-6 7-8 9-10 11-12 13-15 16-18 Adult

Position: Official Booking Agent Scorekeeper Monitor
 Coach Maintenance Assistant Instructor Team Mother
 Gatekeeper Booster Club Officer Other:

Full Legal Name: _____
First Middle Last

DOB: _____ **Age:** _____ **Sex:** Male Female

Home Address: _____
Street City State Zip

Phone: _____
Home Work Cell

E-Mail: _____ **Other Contact:** _____

Certification: (attach documentation)

Agency / Organization	Title Earned	Expiration Date

Experience:

Agency / Organization	Description of Service	Years of Service

References:

Name	Agency / Organization	Title	Phone Number
1.			
2.			
3.			
4.			
5.			

Agreement:

I understand that I have the right to obtain a copy of any background check report and that there is a fee involved. I also understand that I may be required to submit a classifiable fingerprint card should an initial records check reveal that I have been arrested or convicted or that I am currently charged with any offenses.

I acknowledge that the Walton County Parks & Recreation Department may choose not to approve my application or have unsupervised access to a child or children pending the completion of the background check. I further agree to hold the Walton County Parks & Recreation Department and/or Walton County BOC harmless regarding any liability for defamation, invasion of privacy, or any other claim based on good faith, or action taken pursuant to the provisions of this consent.

I certify that the statements made on this application are to the best of my knowledge, true, complete, and correct. I also certify that I am legally eligible to work in the United States.

Applicant: _____
Print Name Signature Date

Office Use Only

Date Received: _____ Location: West Central South Felker Meridian

Documents Attached: W-9 Form Driver's License Criminal History Consent Form Certification Cards

Received By: _____
Print Name Signature

Reviewed By: _____
Print Name Signature

Application Approved: _____ Application Denied: _____

Next Review Date: _____

WALTON COUNTY SHERIFF'S OFFICE

1425 South Madison Avenue • Monroe, Georgia 30655 • 770-267-6557

Background Check

Name-Based Criminal History Record Information Consent/Inquiry Form

PLEASE FILL OUT THE FOLLOWING INFORMATION:

I hereby authorize, _____, to conduct an inquiry for the purpose listed below and receive any Georgia and/or national criminal history record information as authorized by state and federal law.

AGENCY/COMPANY

- **FULL NAME (please print legibly):** _____
- **ADDRESS:** _____

- **SEX:** _____ **RACE:** _____ **DATE OF BIRTH:** _____ **SSN:** _____

- This authorization is valid for _____ days from date of signature below.
- I, _____, give consent to the above-named entity to perform periodic criminal history background checks for the duration of my employment.

PRINT NAME

SIGNATURE

DATE

ATTORNEY FOR INDIVIDUAL
(Per E & U Only)

BAR NUMBER

DATE

DO NOT WRITE BELOW. OFFICE USE ONLY.

Date of Inquiry: _____ Time of Inquiry: _____ WCSO Operator's Initials: _____

PURPOSE CODE USED (check one):

NON-CRIMINAL JUSTICE PURPOSES:

- E** Employment
- M** Working w/ Mentally Disabled
- N** Working w/ Elderly
- W** Working w/ Children
- P** Public Records
(No Consent Required)

PERSONAL REQUEST:

- U** Personal Copy

CRIMINAL JUSTICE EMPLOYMENT:

- J** Civilian Criminal Justice Employment (State & III Info Received)
- Z** Sworn Criminal Justice Employment (State & III Info Received)

BACKGROUND CHECK RESULTS:

Inquiry Resulted in the Following (check all that apply):

- No Criminal Record Available
- Criminal Record (Attached/Released)
- No NCIC/GCIC Warrant
- Possible NCIC/GCIC Warrant (List Wanting Agency Name & Phone # Here): _____

WCSO DESIGNEE SIGNATURE

DATE

SIGN HERE TO ACKNOWLEDGE YOU RECEIVED YOUR COPY

DATE

If an adverse licensing or employment decision is made against a person based on information contained in this criminal history record, that person shall be informed (1.) A Record was Obtained (2.) The Specific Contents of the Record (3.) The Effect the Record had upon the Decision
FAILURE TO PROVIDE THIS INFORMATION WILL BE A MISDEMEANOR OFFENSE