

KENNEBUNK RECREATION DEPARTMENT

VOLUNTEER APPLICATION

1 Summer Street, Kennebunk, ME 04043
 Phone: 985-6890 ext. 1335, Fax: 985-4609

Name: _____ Social Security # _____ - _____ - _____

Address: _____ Date of Birth _____

Home Phone: _____ Work Phone: _____ Fax: _____

Employer & Address _____

Volunteer Interest 1. _____ 2. _____

Driver's License # _____ State _____ Exp. _____ U.S. Citizen Yes ___ No ___

REFERENCES: LIST THREE

NAME	ADDRESS	PHONE	OFFICIAL POSITION

EDUCATION

High School / College	No. of Years	Degree

Do you have any training/certification in First Aid? Yes ___ No ___

Do you have any training/certification in CPR? Yes ___ No ___

Do you use illegal drugs? Yes ___ No ___

Have you ever been convicted of a crime, misdemeanor or felony offense? Yes ___ No ___

If Yes, please explain _____

Have you ever had any driving infractions and/or loss of license for a period of time? Yes ___ No ___

If Yes, please explain _____

Have you ever been charged with child neglect or abuse? Yes ___ No ___

Other than the above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance and care of young people? Yes ___ No ___

If yes, please explain: _____

I certify that all information provided on this application is true and correct. I understand that the information I have provided may be verified by contact with persons or organizations named in this application with persons or organizations that possess information concerning me. I hereby agree to defend, indemnify and hold harmless the Town of Kennebunk, its agents, officers, employees, volunteers and others who provide information in connection with this application from liability for any information provided in good faith regarding this application or the information contained in the application.

 Signature of Applicant _____
 Date

#####

FOR OFFICE USE ONLY

Interviewed by _____ Date _____

Refused base on: _____ Date _____

Criminal Check done on: Date _____ By _____

Results: _____

Notes: _____