

## **Escambia County Volunteer Agreement and Volunteer Candidate Request Form**

I understand that:

- The references listed may be contacted by telephone or email.
- This Volunteer Candidate Request Form in no way obligates me to perform any Volunteer service.
- All records and information gathered are the property of Escambia County and, as such may be subject to public records laws.
- I hereby authorize Escambia County to conduct whatever investigation it may deem necessary to determine whether I can become an effective volunteer. I do herein affirm to the best of my knowledge that these answers and statements are, true, correct, and complete.

By signing I agree to all terms and conditions listed in the above agreement.

FIRST NAME				LAS	T NAME		
ADDRESS							
CITY			STATE			Zip	
DAYTIME PHONE NUMBER					ATE PHONE MBER		
	E-MAIL ADDR	ESS					
CURRENT EM	PLOYER						
EMPLOYER A	DDRESS						
CITY			STATE			ZIP	
Are you bilingual?			Yes	No	Language(s) Spoken:		
Education: (highest education level reached)							
			HOW	/ DID YOU	HEAR ABOU'	ΓUS?	
ECTV County Employee Citizen's Academy County's Website Word of Mouth News Release Flyer							
Public Service Announcement Other							
[Briefly Expla Why You A Interested	re						

		P	LEASE (	CHECK D	AYS AVAILABLE				
Monday Tuesday Wednesday			Thurs	sday Fri	day	Saturday	Sunday		
			Hov	v Often/	Frequency?				
Daily Weekly Once a month Twice a month Other									
Please List Ti	mes Available	AM				PM			
REFERENCE #1/NAME						E-MAIL ADDRESS			
TITLE	FLE RELATIONSHIP			TIME KNOWN	PHONE NUMB		R		
REFERENCE #2	2/NAME					EMAIL ADDRESS			
TITLE		RELATIONSHIP			TIME KNOWN		PHONE NUMBEI	R	
TRAINING & EXPERIENCE									
PREFERRED VOLUNTEER AREAS									
□ Community Affairs  Department is comprised of a variety of community-based projects that enhance the quality of life for our citizens.  □ Library. WFPL is the community's independent learning center for residents of all ages who live in Escambia County. The library provides free access to reading; audio-visual materials; event programming; and serving as an information portal offering public computing, database and internet access technology.						ages who live in ides free access to rent programming; al offering public			
Library Volunteers (Select Desired Location):  Pensacola (Main) Branch Bellview Branch Southwest Branch Century Branch Tryon Branch Brownsville Branch Westside Branch									

	tmen	ment. The Community & t provides a diverse array of mmunity.	Management and Budget Services. The Management & Budget Department is responsible for the primary internal and administrative functions of Escambia County government.				
Corrections. The Corrections Department is			Parks & Recreation. The Parks and Recreation				
comprised of three Corrections, Environ Control, and the Ro	nmen	tal Enforcement and Animal	Department maintains athletic fields and parks, developed and undeveloped neighborhood parks, beach access parks, boat launch areas, the Equestrian Center, and Lake Stone camping facility.				
Development Ser	rvices	The Development Services	Public Safety. The department that never sleeps -				
1 -	-	ofessional building, mapping, vices to the citizens of	Public Safety is responsible for keeping citizens safe from emergencies and both man-made and natural disasters.				
Human Posource	s Th	e Human Resources	Public Wo	orks. The Public Works Department is			
Department is responsible employee relations,	— onsib , man	le for employment, benefits,	charged with the conservation and preservation of Escambia County's infrastructure, including Engineering, Fleet Maintenance, Facilities Management, Road Department, Transportation & Traffic and Environmental Water Quality.				
Information Tech	nolo	g <u>v</u> . The Information	Solid Was	ste Management. The Solid Waste			
well coordinated co	mput	provides an efficient and ing environment through I area networks and	Management Department provides solid waste disposal and recycling services and educational programs.				
personal computer	syste	ems.	Other				
Other Organizations		1	2.				
applicant volunteered:	:	1.	4.				
		3.	6.				
		5.		6.			
[Signate	ure of A	Applicant]		[Printed Name of Applicant]			
[Signature of Pa	rent or	Legal Guardian]		[Printed Name of Parent or Legal Guardian]			
		-		- ·			
_	[Date]						
Return to: Gov	vernme	nt Complex, Attention: Human Resources, 2 Phone: 850-595-30	221 Palafox Place, S 200 or Fax: 850-595				
FOR OFFICE USE ONLY: [Approval Needed]							
Department/Division							
Department Director Approval [signature]				Date			
Processed By:			Contact #:				
NOTES:				Date			

## RELEASE OF LIABILITY for VOLUNTEERS AND INTERNS

Nam	ne of Volunteer:
	eby release and agree not to hold liable the Escambia County Board of County Commissioners, its officers, agents, and employees any and all claims of any kind arising from my service as an intern and/or volunteer.
I furt	her agree to the following:
1.	I acknowledge that I am an intern and/or volunteer for the Escambia County Board of County Commissioners and have no expectations of compensation. I understand that the Escambia County Board of County Commissioners may, at any time, for whatever reason, decide to make changes in my assignment or terminate my relationship with the Escambia County Board of County Commissioners. I understand that I may decide to sever my intern and/or volunteer relationship with the Escambia County Board of County Commissioners at any time, and notice of such a decision should be communicated as soon as possible to my supervisor.
2.	I understand and agree that while participating in this program, I am not an agent, servant, or employee of the Escambia County Board of County Commissioners, and therefore will not be covered by the Escambia County Board of County Commissioners for any health, death or disability benefits.

- 3. I agree to release and hold harmless the Escambia County Board of County Commissioners, its officers, agents, and employees from any and all claims of any kind that may arise out of my performance as an intern and/or volunteer. I waive any right of action against the Escambia County Board of County Commissioners in consideration of being allowed to serve as an intern and/or volunteer. Notwithstanding the foregoing, nothing herein shall limit or affect my rights to workers compensation benefits as a
- 4. I understand and agree to abide by the policies and procedures of the Escambia County Board of County Commissioners relating to the performance of duties and responsibilities assigned to me.

volunteer pursuant to Florida Law.

- 5. I agree that any information I may gain through participation in County activities will be used by me only for my personal educational purposes, except to the extent otherwise required by law.
- 6. I understand and agree that, in the course of my participation as a volunteer and/or intern with the Escambia County Board of County Commissioners, I may have access to keys and combinations that are confidential because of security concerns. I understand and acknowledge that I will not disclose this information or any other security-related information to any person without prior approval of my supervisor. I understand that my intern and/or volunteer status will be revoked if I make improper disclosure of this or any other security-related information.
- 7. I understand and grant the Escambia County Board of County Commissioners, its successors, assigns, and licensees, the perpetual right to photograph, film, use and reproduce, as the County desires, photographs and videotapes taken of myself and/or my children during any volunteer activity. I understand that I will not receive any compensation for my participation or my children's participation in the photographs and videotapes and that the Escambia County Board of County Commissioners shall own all right, title, and interest to the photographs and videotapes, including the portions that contain the images and voices of myself and/or children.
- 8. I agree that should any provision of this Release be found unenforceable, all remaining provisions shall remain in full force and effect. Further, I agree that this Release shall be construed pursuant to the laws of the State of Florida.

I certify that I have read and understood the above agreement as the terms under which I will be allowed to participate as an intern and/or volunteer with the Escambia County Board of County Commissioners.

Intern/Volunteer (Printed Name):	Intern/Volunteer (Signature)
(Printed Name) of Parent or Guardian (If under 18 years of age)	(Signature) of Parent or Legal Guardian (If under 18 years of age)
Department Director (Printed Name):	Department Director (Signature):
Date:	Date:



## ESCAMBIA COUNTY VOLUNTEER PROGRAM BACKGROUND SCREENING FORM

(Please Print)

Last Name		-	First			Middle	
Last Name			Name			I Wilder	
Please list all other names	l						
you have used (i.e. Alias, Maiden)	1.			2.			
,	3.		- W	4.			
	5.			6.			
	7.		W.	8.		-	
	9.		N. V.	10.	TO A	9 T	
Date of Birth	Month		Day		Year	7 /	
100						100	70.7
		VA. VIII COM			4000	100	
Race (please check one)	Black	White Asian Pa		American Indian	Other: (specify)		
Sex (please check one)	Male	Female	notal.	155		1	
Present Address	N	/		1500	City	1	
State	- 1//	Zip Code		31/2	County	1	
Previous Address (if less than one year at present address)					City		
State	71-	Zip Code		/// ///	County		
		~ 1/1	1/11-11	11 1111	// /		

It is the highest priority of the Escambia County Board of Commissioners to ensure the safety of our citizens. In order to provide a safe and secure atmosphere for our community's citizens, volunteers will be screened through the Escambia County Sheriff Department, the Santa Rosa Sheriff's Office, the Florida Department of Law Enforcement (FDLE), or the National Crime Information Center. When possible, Escambia County will incur all costs of the background screenings. All information received from the background check applications and reports returned from either of the agencies mentioned will be used for the purpose of determining applicant's eligibility as a volunteer participant with the Escambia County Board of Commissioners.

## No Volunteer Applicant Will Be Accepted Who Has Been:

- A. Arrested or convicted of any crime involving sexual misconduct with or against a minor.
- B. Arrested or convicted for any type of violent crime.
- C. Arrested or convicted of any crime involving illegal drugs or alcohol.
- D. Arrested or convicted of child abuse or domestic violence.

All other arrests and convictions will be examined in order to determine whether the incident is related to the volunteer position. In these situations eligibility determinations will be based upon a minimum of the last five years.

Any applicant that is turned away based upon the background screening will be notified by the Division of Human Resources of the findings via certified letter. The volunteer may then provide a written appeal for reconsideration to the program. The volunteer must be willing to discuss with the Volunteer Coordinator and a Human Resource designee his or her previous record(s). Once the volunteer has presented his or her case, the Volunteer Coordinator and the Human Resource designee will decide to uphold or reverse the screening decision. The decision will be final concerning program eligibility.

The Board of County Commissioners reserves the right to make changes to the Volunteer Background Check Guidelines-Eligibility Criteria without notice whenever deemed necessary for the safety and protection of all citizens.

I certify that the above information is true to my knowledge and understand that it will be utilized to obtain a background screening check as a condition of volunteering with the Escambia County Board of Commissioners.					
the Escambia County Board of Commissioners.					
Applicant Signature	Date				
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