



CITY OF RIDGECREST  
PARKS AND RECREATION DEPARTMENT  
VOLUNTEER ASSISTANT COACHES APPLICATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PRIMARY #: \_\_\_\_\_ SECONDARY #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ SHIRT SIZE: \_\_\_\_\_

WHICH SPORT WOULD YOU LIKE TO COACH FOR?

FLAG FOOTBALL  BASKETBALL  SOCCER

DO YOU HAVE CHILDREN PARTICIPATING IN THE ABOVE SPORTS PROGRAM? YES  NO

IF YES PLEASE COMPLETE THE FOLLOWING INFORMATION:

WILL YOU BE COACHING YOUR CHILD? YES  NO

CHILD(REN) NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

AS AN ASSISTANT COACH YOU WILL BE ASSIGNED TO A HEAD COACH. IS THERE A HEAD COACH YOU ARE WANTING TO BE ASSIGNED TO?

NAME: \_\_\_\_\_

IF YOU DO NOT HAVE A CHILD PARTICIPATING IN A SPORT OR DO NOT WISH TO COACH YOUR CHILDS TEAM PLEASE COMPLETE THE FOLLOWING INFORMATION

AGE GROUP YOU WOULD LIKE TO COACH: 5-6  7-8  9-10  11-13

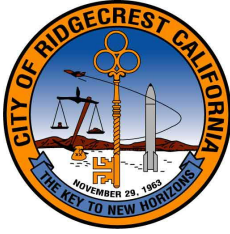
DAY/TIME YOU WOULD LIKE TO PRACTICE:

DAY: TUESDAY  FLAG FOOTBALL WEDNESDAY  THURSDAY   
TIME: 5:30 – 6:30  6:30 – 7:30

DAY: MONDAY  BASKETBALL WEDNESDAY  THURSDAY   
TIME: 5:00 – 6:00  6:00 – 7:00  7:00 – 8:00

DAY: TUESDAY  SOCCER WEDNESDAY  THURSDAY   
TIME: 5:30 – 6:30  6:30 – 7:30

# PARKS & RECREATION DEPARTMENT



## EMPLOYEE/VOLUNTEER/CONTRACTOR BACKGROUND APPLICATION

CITY OF RIDGECREST  
100 W. CALIFORNIA AVE.  
RIDGECREST, CA 93555

FOR OFFICIAL USE ONLY	
CONTRACTOR <input type="checkbox"/>	POSITION: _____
VOLUNTEER <input type="checkbox"/>	POSITION: _____
EMPLOYEE <input type="checkbox"/>	POSITION: _____
BACKGROUND DONE BY: _____	
DATE: _____	
APPROVED <input type="checkbox"/>	DENIED <input type="checkbox"/>

**\*\* ALL WRITING NEEDS TO BE CLEAR AND LEGIBLE \*\***

### PERSONAL INFORMATION

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

MAILING ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_  
(STREET AND NUMBER)

\_\_\_\_\_ HOME PHONE: \_\_\_\_\_  
(CITY) (STATE) (ZIP)

EMAIL ADDRESS: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

**ALL POTENTIAL EMPLOYEES/VOLUNTEERS/CONTRACTORS FOR THE CITY OF RIDGECREST ARE SUBJECT TO A CRIMINAL BACKGROUND CHECK. IF 18 YEARS OF AGE OR OLDER A LIVE SCAN WILL BE PERFORMED UPON BACKGROUND CLEARANCE.**

HAVE YOU EVER BEEN CONVICTED AS AN ADULT FOR ANY VIOLATION OF THE LAW? PROVIDE DATES, LOCATION(S), AND PENALTIES. EXCLUDE TRAFFIC VIOLATIONS UNDER \$150. EACH CASE WILL BE GIVEN INDIVIDUAL CONSIDERATION. FAILURE TO LIST ALL CONVICTIONS OTHER THAN THOSE MENTIONED ABOVE MAY DISQUALIFY YOU FROM FURTHER CONSIDERATION (IF YES – EXPLAIN UNDER REMARKS)

YES \_\_\_\_\_ NO \_\_\_\_\_

REMARKS (ATTACH ADDITIONAL SHEETS IF NECESSARY):

HAVE YOU BEEN LIVE SCANNED BY THE CITY OF RIDGECREST PARKS AND RECREATION DEPARTMENT?

YES \_\_\_\_\_ WHEN? \_\_\_\_\_ NO \_\_\_\_\_

I UNDERSTAND THAT MY SOCIAL SECURITY NUMBER AND DRIVERS LICENSE WILL BE REQUIRED ON THE DAY OF LIVE SCAN APPOINTMENT.

INITIAL: \_\_\_\_\_

I AUTHORIZE THE CITY OF RIDGECREST POLICE DEPARTMENT TO RUN A CRIMINAL BACKGROUND CHECK. I UNDERSTAND THAT AS AN EMPLOYEE/VOLUNTEER/CONTRACTOR I AM REPRESENTING THE CITY OF RIDGECREST AND WILL ADHERE TO THE GUIDELINES SET FORTH BY THE PROGRAM.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

IF YOU ARE UNDER 18 YEARS OF AGE, A PARENT/GUARDIAN MUST SIGN AGREEING TO THE BACKGROUND CHECK AND PARTICIPATION OF SAID PROGRAM.

I GIVE PERMISSION TO MY CHILD TO WORK/VOLUNTEER FOR THE CITY OF RIDGECREST.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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M. LAW DONE BY: _____	DATE: _____
LIVE SCAN DONE BY: _____	DATE: _____