

Bristol Recreation Department

PO Box 249, Bristol, Vermont 05443

Phone: 453-5885 Fax: 453-5188 or www.RecDirector@BristolVt.org

Work/Volunteer Application

Applicant Information:

DATE OF APPLICATION: _____

Name: _____

First

Middle

Last

Phone Numbers: _____

Home

Cell

School/Work

E-mail address: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Are you 14 years of age or older? YES NO
before? YES NO

Have you worked/volunteered for the Town of Bristol

If so, in which Dept? _____

Have you been convicted of a criminal offense YES NO if yes, please explain:

Volunteer Opportunities Desired:

What Programs or activities would you be interested in Work/Volunteering for?

Availability: Dates- From _____ To _____ Times- _____

Afternoons

Evenings

Weekends

Certifications:

List any certifications that you hold and their expiration dates.

Certification

Organization

Expires

Work/Volunteer Experience:

List the most recent volunteer work that you have participated in.

Organization Name: _____ From _____ To _____

Description of Responsibilities:

Organization Name: _____ From _____ To _____

Description of Responsibilities:

Personal Reference:

List two individuals, not related to you, that can provide a character reference on you.

Name: _____ Work Phone: _____ Home Phone: _____

Address: _____

Street _____ City _____ State _____ Zip _____

Relationship to Applicant: _____ How many years have they known you? _____

Name: _____ Work Phone: _____ Home Phone: _____

Address: _____

Street _____ City _____ State _____ Zip _____

Relationship to Applicant: _____ How many years have they known you? _____

How did you hear about the position you are applying for? (circle those that apply)

Newspaper Job Fair Website Walk-In Friend Other _____

Requirements for Work/Volunteering:

All potential volunteers must meet the following minimum requirements.

- 1. Must be 14 years of age or older at the time of volunteering
- 2. Must complete a release for a criminal background check by VCIC.
- 3. Must complete a release for a child abuse registry check by the Dept. for Children and Families.

Parent/Guardian's Permission: If under 18 parents must fill out and sign

Parent's Names: _____

Home Phone: _____ Work: _____ Cell _____

I have read the Work/Volunteer Application of my child and hereby give permission for him/her to volunteer with the Bristol Recreation Department. I also give permission for my child to have background checks completed.

Signature: _____ Date: _____

Applicant's Waiver Release:

I acknowledge that the information that I have provided on this application, to the best of my knowledge, is the absolute truth. I further acknowledge that if any information herein is determined to be untrue, misleading, or omitted it will result in immediate dismissal, regardless of the time of discovery by the Bristol Recreation Department. I authorize investigation of all statements herein and release the Bristol Recreation Department and all others from liability in connection with same.

I acknowledge that by signing this form I agree to abide by the Bristol Recreation Department's philosophy and I further agree to do my best to provide the participants in the programs or activities a FUN, FAIR, POSITIVE, MEANINGFUL, and/or SPORTSMANLIKE experience.

Applicant's Signature: _____ Date: _____

