

## Sevier County Volunteer Application

Name \_\_\_\_\_ Date \_\_\_\_\_  
Last First Middle

Previously used names (Maiden Name) \_\_\_\_\_

Current Address \_\_\_\_\_

Current Work Phone \_\_\_\_\_ Current Home Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone/Pager \_\_\_\_\_

Date of Birth (M/D/Y) \_\_\_\_\_ Social Security Number \_\_\_\_\_

Drivers License Number \_\_\_\_\_ Is your drivers license current and valid Y or N

Do you currently have the minimum vehicle insurance coverage as required by the State of Utah? Y or N

**HISTORY:** Answering "yes" to these questions is not grounds for automatic rejection. More information may be requested from you before you can be considered as a volunteer for Sevier County.

1. Have you ever been convicted of a criminal offense Y or N
2. Have you ever been convicted for sale or use of controlled substance? Y or N
3. Have you ever been charged, investigated or convicted of child/neglect/abuse or domestic violence Y or N
4. Have you ever had your license suspended or driving privileges revoked? Y or N

If the answer to any of the questions asked above change during the course of your service with Sevier County, you are required to notify Sevier County Human Resource Office. If you responded yes to any of the history questions, please describe the conviction/problem and state what steps you have taken to correct the problem. Please list the state, county, the offense date that the conviction was issued, and whether the conviction was a felony or a misdemeanor. Use additional sheet of paper if necessary.

**IN SIGNING THIS APPLICATION I UNDERSTAND THAT**

- \* I have read the information provided on this form and I apply for a volunteer appointment with Sevier County.
  - \* I affirm that the information I have given on this form is true, correct and complete. I understand that any falsification of information herein, regardless of the time of discovery, constitutes cause for dismissal from Sevier County Programs.
  - \* I understand it is possible that records and criminal background or reference checks could be conducted on me at any time during the application process or during volunteer service with Sevier County.
  - \* I do hereby release and agree to hold harmless from liability all persons, organizations or government agencies and the officers, employees and volunteers thereof from any damages, or resulting from, furnishing such information.
  - \* I agree to provide/release information as requested for records and criminal history checks (e.g., court, police, child abuse registry, national criminal investigation clearinghouse, Department of Children and Family Services, Division of Motor Vehicles, etc.)
  - \* Information released to Sevier County will be treated as confidential material that is the property of Sevier County and handled in accordance with Sevier County policy on access to records.
- I understand that my appointment with Sevier County is subject to annual review.
- \* I have read and understand the above information and I agree to the terms and duties specified for Sevier County Volunteers.

**Prospective Volunteer Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

SEVIER COUNTY VOLUNTEER AGREEMENT

I desire to engage in volunteer services for Sevier County. I understand that there may be risks involved. Notwithstanding those risks, I want to volunteer my services, and I do so freely and voluntarily.

I accept and fully assume all the risks that I may suffer while engaging in volunteer activities for Sevier County. I also agree to release and hold harmless Sevier County for any claims, losses, damages or liabilities that may result or be caused by my negligence or intentional acts or omissions, and should any arise, I will pay for and indemnify Sevier County from any such actions.

I agree to abide by and comply with all rules, regulations, policies and procedures of Sevier County while engaged in volunteer services.

I HAVE READ AND I UNDERSTAND THAT THIS IS A BINDING LEGAL DOCUMENT WHICH WAIVES MY RIGHT TO SUE AND MAKES ME LIABLE FOR MY ACTS AND OMISSIONS.

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_