



PAL VOLUNTEER APPLICATION

APPLICATION DATE:

PAL POSITION APPLYING FOR:

NAME:

HOME ADDRESS:

CITY:

STATE:

ZIP:

CELL/HOME PHONE:

EMAIL:

DATE OF BIRTH:

SEX: MALE:

FEMALE:

EMPLOYER INFORMATION - *If the applicant is an unemployed student but enrolled in school, list the school as the employer.*

EMPLOYER:

EMPLOYER ADDRESS:

CITY:

STATE:

ZIP:

TITLE / POSITION:

YEARS WITH EMPLOYER:

HAVE YOU EVER BEEN ARRESTED: YES: NO:

HAVE YOU EVER BEEN CONVICTED: YES: NO:

IF "YES" PLEASE EXPLAIN IN THE SPACE PROVIDED BELOW. DESCRIBE THE NATURE OF THE CRIME, DATE OF THE CONVICTION AND DISPOSITION. CONVICTION OF A CRIME IS NOT AN AUTOMATIC DISQUALIFICATION FOR VOLUNTEER WORK.

WHY DO YOU WANT TO BE A PAL VOLUNTEER?

HOW WOULD YOU HELP THE PAL ORGANIZATION GROW?

I understand that this is an application for and not a commitment or promise for a volunteer opportunity. I certify that I have and will provide information throughout the selection process, including the information provided on this application that is true, correct and complete to best of my knowledge. I understand that the information contained on my application will be verified by the Fort Myers Police Department. I understand that any omissions or misrepresentations may cause for my immediate rejection as an applicant for a volunteer position with the PAL Program and immediate termination as a volunteer.

DATE



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HAVE YOU BEEN INVOLVED IN OTHER ORGANIZATIONS? YES: NO:

IF "YES" PLEASE LIST ANY DETAILS IN THE SPACE PROVIDED.

EDUCATION AND/OR WORK EXPERIENCE RELEVANT TO THIS KIND OF SERVICE:

DO YOU HAVE ANY SPECIAL TRAINING OR CERTIFICATIONS: YES: NO:

IF "YES", PLEASE LIST DETAILS IN THE SPACE PROVIDED.

PLEASE LIST ANY SPECIAL INTERESTS, HOBBIES OR SPORTS:

HOW DID YOU LEARN ABOUT PAL:

HAVE YOU PREVIOUSLY VOLUNTEERED WITH THIS PAL ORGANIZATION OR ANY YOUTH ORGANIZATION IN THE PAST, IF SO PLEASE COMPLETE THE FOLLOWING INFORMATION:

| NAME OF ORGANIZATION | YEARS WITH ORG. | POSITION(S) WITH ORGANIZATION |
|----------------------|-----------------|-------------------------------|
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DO YOU HAVE ANY COACHING, MANAGING OR OTHER SKILLS THAT ARE SPORTS RELATED: YES: NO:
IF "YES" PLEASE LIST DETAILS IN THE SPACE PROVIDED.

REFERENCES

PLEASE PROVIDE (3) THREE REFERENCES - (PERSONAL OR PROFESSIONAL)

NAME: PHONE:
ADDRESS:
CITY: STATE: ZIP:
RELATIONSHIP:

NAME: PHONE:
ADDRESS:
CITY: STATE: ZIP:
RELATIONSHIP:

NAME: PHONE:
ADDRESS:
CITY: STATE: ZIP:
RELATIONSHIP:

A criminal history will be completed as required by the Fort Myers Police Department. All of the information listed above is required and must be completed before the application is submitted. Any criminal charges listed on the application or discovered during the background check will be reviewed by the Police Athletic League (PAL) Board Executive Director and Program Director. Failure of the applicant to properly acknowledge a criminal history, can result in the denial of the application.

Applicant Signature

DATE

Witness Name (Signature):

DATE

Witness Name (Print):