



Volunteer Registration Form

Part I – General Information – All information is required unless indicated as optional (Please Print)

First/Given Name:	Middle Name:	Last/Family Name:
Maiden Name:	Suffix: (Jr., III, etc.)	
Gender: Male Female	Social Security Number: - -	
Birthdate (mm/dd/yy):		
Home Address:		
City:	State:	Zip:
Home Phone:	Cell Phone:	Work Phone:
E-mail (optional):		
Employer/School:		
Occupation:		
Emergency Contact:	Emergency Phone:	
Driver's License Number:	County:	

Part 2 – Background Information – Only ADULTS 18 years of age and older, please answer the following questions:

Do you use illegal drugs?	Yes	No
Have you ever been convicted of a criminal offense?	Yes	No
Have you ever been criminally charged with neglect, abuse or assault?	Yes	No
Have you had three or more traffic violations in the past five years?	Yes	No
Has your driver's license ever been suspended or revoked? If, I answered yes, then I agree not to serve as a volunteer driver for Special Olympics, until my volunteer status has been confirmed. This includes driving for Special Olympics Kentucky to and from all sanctioned events.	Yes	No
Have you ever been found liable for civil penalties or damage involving sexual or physical abuse?	Yes	No
Have you ever applied to, volunteered or been employed by any Special Olympics Organization? If yes, what state or local program _____	Yes	No

If you answered YES to any of the above please explain (use an additional sheet of paper to explain):

Part 3 – ADULT Reference Information must be completed if applicant is 18 years of age and older.

Please list two references who are not related to you: (Complete all information)

1. Name _____
 Address _____ City _____ State _____ Zip _____
 Home Phone Number () _____ Work Phone Number () _____
 E-mail Address _____

2. Name _____
 Address _____ City _____ State _____ Zip _____
 Home Phone Number () _____ Work Phone Number () _____
 E-mail Address _____

By providing the above references, I am authorizing Special Olympics Kentucky to contact them in reference to my volunteer application.

Part 4 – MINOR Reference Information must be completed if applicant is 17 years of age and younger.

Please list two references who are not related to you, not your legal guardian and at least 18 years of age:

Reference #1
 By signing below, I confirm the following:

- I know _____ ("Applicant") in either a personal or professional capacity;
- I am at least 18 years of age and am not a legal guardian or relative of Applicant; I am not aware of any reason that Applicant should not be permitted to volunteer on behalf of Special Olympics, and I do not possess any information that would cause me to believe Applicant would pose any undue risk to Special Olympics athletes or others who participate in Special Olympics.

Signed: _____ Printed Name: _____
 Date: _____ Relationship to Applicant: _____
 Organization/Institution: _____

Reference #2
 By signing below, I confirm the following:

- I know _____ ("Applicant") in either a personal or professional capacity;
- I am at least 18 years of age and am not a legal guardian or relative of Applicant; I am not aware of any reason that Applicant should not be permitted to volunteer on behalf of Special Olympics, and I do not possess any information that would cause me to believe Applicant would pose any undue risk to Special Olympics athletes or others who participate in Special Olympics.

Signed: _____ Printed Name: _____
 Date: _____ Relationship to Applicant: _____
 Organization/Institution: _____

Part 5 – Photo Identification (A fax copy is not legible; mail a copy of your state driver's license copy with this form) ATTACH A COPY OF YOUR STATE DRIVER'S LICENSE TO THIS FORM.

Part 6 – Waiver

I certify that the information provided is true and complete to the best of my knowledge. I have not withheld any information that could affect my application unfavorably, if included. I understand that Special Olympics Kentucky may refuse to allow me to volunteer if I provided incorrect information or omission.

In consideration of Special Olympics Kentucky considering my application, I give permission for Special Olympics Kentucky to obtain information relating to my criminal history record, if any, and my motor vehicle driving record. Those records may include arrest and conviction data as well as plea bargains and deferred adjudication. I understand that this information will be used, in part, to determine my suitability for a volunteer position with Special Olympics Kentucky and that as long as I remain a volunteer with Special Olympics Kentucky, the criminal history records check and motor vehicle driving records check may be repeated at any time. Upon my request, I will have an opportunity to review criminal history and motor vehicle driving records obtained by Special Olympics Kentucky.

I WAIVE, RELEASE AND DISCHARGE Special Olympics Kentucky, its officers, directors, employees, volunteers, agents and representatives from any liability for all damages and losses of whatever kind or nature that may result in connection with Special Olympics Kentucky conducting a criminal history records check or motor vehicle driving records check on me.

I understand that my volunteer service can be modified or terminated with or without notice or cause, at any time, at the option of Special Olympics Kentucky or at my option and that Special Olympics Kentucky may, in its sole discretion, decline to accept my application for volunteer with or without cause.

I grant Special Olympics Kentucky and Special Olympics, Inc. permission to use my likeness, voice, and words in or on television, radio, film, and on Special Olympics Kentucky and Special Olympics, Inc.'s Website(s), or in any other form, format, or media, to promote Special Olympics and its mission and to raise funds for Special Olympics.

In signing this application, I have read the foregoing information, and I agree to comply with the volunteer or coach code of conduct and all Special Olympics rules and regulations of the organization.

I HAVE READ AND UNDERSTAND THIS DISCLOSURE AND AUTHORIZATION TO OBTAIN INFORMATION.

Volunteer's Signature: _____ Date: _____

IF MINOR: _____
 Signature of Parent or Guardian Date Print Full Name of Parent or Guardian

Return form and copy of driver's license to: **Volunteers, Special Olympics Kentucky, 105 Lakeview Court, Frankfort, KY 40601-8749**



Special Olympics *Kentucky*

PLEASE ATTACH A COPY (copier/scan) OF YOUR STATE DRIVER'S LICENCE (and/or picture id if you have no driver's license) TO YOUR VOLUNTEER FORM. MAKE SURE THIS COPY IS CLEAR AND LEGIBLE. YOU CAN NOT FAX THE DRIVER'S LICENSE, SO PLEASE MAIL. ALSO, WHEN LISTING AN ADDRESS, PLEASE USE YOUR HOME ADDRESS.

Special Olympics International Volunteer Screening Policy For Special Olympics Kentucky

Today's world presents many challenges to organizations which rely on volunteers to accomplish their mission. Those organizations that work with vulnerable populations must be especially vigilant in protecting those whom they serve. Non-profit and Human Service organizations throughout the country, are faced with the responsibility to provide the safest environment possible for their participants while recognizing the tremendous role each volunteer plays in the success of their programs.

The need to adopt a more stringent screening process is driven by our obligation to not only protect the organization but also, and most importantly, to protect Special Olympics athletes. The Risk Management Task Force reviewed the volunteer screening policies of several other amateur sports organizations before developing the criteria for the new Special Olympics screening policy. The new Special Olympics policy will meet industry standards for criminal background checks.

Special Olympics Kentucky knows and appreciates the dedication that each volunteer brings to our mission and we know that you want each athlete to enjoy the best and safest experience through participation in our programs. This U.S. screening policy has been established to help all of us ensure this experience for our athletes. We understand that, as a volunteer, subjecting yourself to a background check may seem intrusive, but we ask that you join us as we continue to develop a program in which every athlete can achieve.

Class A Volunteers* must have a criminal background check that includes the sex offender registry for each State in which the sex offender registry is available. In addition to the National vendor database, Programs may conduct a statewide criminal background check through their State law enforcement agencies. Motor Vehicle Record checks are required if the applicant answers "yes" to either question regarding their driving record on the Volunteer Application OR if the Program has received information through the background check that the applicant may have had other motor vehicle related charges.

*** Class A Volunteers Include:**

- Volunteers who have regular, close physical contact with athletes such as coaches, chaperones, ALP's mentors, local coordinators, heads of delegation, drivers for athletes and volunteers who have administrative and/or fiscal authority.
- Fundraising event committee members, bookkeepers, games management team members, law enforcement volunteers.
- Parents and siblings of athletes are subject to a criminal background check when they are serving in a Class A Volunteer capacity. Please note that a parent who serves as a Special Olympics coach for his/her child will be considered a Class A Volunteer and is subject to the required criminal background check – even if the only child who is being coached is the parent's own child.

Types of Screening:

- **Adult Class A Volunteers (18 years of age and older)** – Volunteer Registration Form, screen for criminal record, which will include sex offender registry and possible motor vehicle record. **ADULTS MUST COMPLETE SECTIONS 1, 2, 3, 5 and 6 ON FORM.**
- **Minor Class A Volunteers (Younger than 17 years of age)** – Volunteer Registration Form, two personal/professional references sign on the form. **MINORS MUST COMPLETE SECTIONS 1, 4, 5 and 6 ON FORM.**
- **ALL VOLUNTEERS** will be re-screened every three years.