VOLUNTEER/INDEPENDENT CONTRACTOR
Application & Background Check

INSTRUCTIONS: Type or print in ink. ***Complete all questions****.*
Application and Background check valid for one year.

Last Name	First	Middle Initial	Home Phone: ( )
Address	City	State Zip	Cell Phone: ( )
E-Mail Address:			

Present or Most Recent School Attended	Address (City & State)	Highest Grad Completed	Major (if applicable)
		8 9 10 11 12 13 14 15 16	
Date(s) available for Volunteering:			
Times available: Days: _____ Evenings: _____ Weekends: _____			

Background Check Authorization

To ensure the safety of all people involved in our programs (volunteers, participants & staff), the Township has instituted a policy to do background checks on Volunteer staff. This background check will be good for one year.

Check One:

☐ Event Volunteer ☐ Independent Contractor ☐ Flag Football Coach

---

Last Name: _____ First Name: _____

Date of Birth: _____ Age:_____ Gender: Female Male

National Origin: American Indian/Alaskan Native Asian/Pacific Islander
Black White Unknown/Other

These items are required to enable Macomb Township to conduct accurate background checks and will be used only for that purpose. Macomb Township supports and complies with the laws which are enacted to protect and safeguard the rights and opportunities of all people, without being subjected or exposed to harassment or discrimination of any kind, including age, national origin, sex, race, religious affiliation, color, height, weight, or marital status.

I authorize Macomb Township to investigate my background as is determined necessary for the particular activity(ies) for which I am interested in working.

_____ _____
Signature (Parent or guardian if under 18) Date

MACOMB TOWNSHIP PARKS & RECREATION DEPARTMENT
20699 Macomb St.
Macomb MI 48042
586-992-2900

Last Revised: 5/23/2012