



VOLUNTEER PACKET

Welcome to the Reynoldsburg Parks and Recreation Volunteer in Parks Program!



Reynoldsburg Parks and Recreation Department Mission Statement:

*To provide and promote participation by all Reynoldsburg citizens through educational, park, recreational and leisure opportunities.
Benefits are endless and we can prove it!!*

VIP Purpose Statement:

The purpose of the Volunteer in Parks program (VIP) is to offer opportunities for residents and park patrons to give personal time and talents to supplement RPRD staff in providing quality programs, maintaining parks for public use and preserving natural areas.



*“The success of society lies in the willingness of its citizens to give of themselves, to perform or give a service of their own free will.”
Ralph Waldo Emerson*

Public Parks and Facilities Information

Civic Park

6800 Daugherty Drive
137 acres
4 softball diamonds
13 soccer fields
2 basketball courts
restroom
concession stand
playground
1.3 mile walking trail

Huber Park

42 acres
1600 Davidson Drive
5 ball diamonds
restroom
playground
bikepath

John F Kennedy Park

7232 East Main Street
26 acres
10 ball diamonds (3 lighted)
4 tennis courts (lighted)
restroom
shelter house
skatepark
large playground
picnic area
bikepath

Livingston Community Garden Sites

6305 East Livingston Ave.
6800 Daugherty Drive
5.5 acres
88 plots

Livingston House Park

1792 Graham Road
5 acres
playground
picnic tables
historical home and museum

Pine Quarry Park

West end of Kingsley Drive
39 acres
hiking trails
natural areas

Rodebaugh Park

Rodebaugh Road east of Lancaster
4 acres
playground
picnic area

New Rodebaugh Park

Taylor Road
22 acres
open space
paved path

Senior Citizens

1520 Davidson Drive
nearly 2,000 members

Alexander Livingston House

1792 Graham Road
Historical Site
Museum and rental facility



REYNOLDSBURG PARKS & RECREATION

Volunteer In Parks Application

Have you volunteered with us before? _____ Program/Event: _____ Date Submitted: _____

Area(s) of Interest:		
<input type="checkbox"/> Special Events	<input type="checkbox"/> Park Maintenance	<input type="checkbox"/> Senior Center
<input type="checkbox"/> Scout Badge Project	<input type="checkbox"/> Horticulture	<input type="checkbox"/> Other: _____

Name: _____
(First) (Middle Initial) (Last)

Date of Birth: _____ Maiden and/or Other Names Used: _____
(mm/dd/yyyy)

Drivers License #: _____ State Issued: _____

Street Address: _____ City: _____ Zip: _____

Home Phone #: (_____) _____ Work Phone #: (_____) _____

Cell Phone #: (_____) _____ T-Shirt Size: S M L XL XXL other: _____

E-Mail Address: _____

In Case of Emergency Contact:

Name: _____ Phone #: (_____) _____ Relationship: _____

RELATED EXPERIENCE:

Please list in chronological order, beginning with the most recent, your educational, professional and relevant experiences to include: degrees, certificates, licenses, organizations and/or affiliations.

Have you ever been convicted, plead guilty or no contest to a felony?, Yes _____ No _____

If Yes, Please Explain _____

Do you currently have any criminal charges pending? Yes _____ No _____ If Yes, Please Explain _____

(You may omit convictions for minor traffic violations unless the position for which you are applying requires the operation of a motor vehicle. Conviction will not result in automatic disqualification. The seriousness of the crime, date of conviction, and the relevance of the crime to this position will be considered prior to participation in the Reynoldsburg Parks and Recreation Department (RPRD) programs.)

**Please return completed application to:
City of Reynoldsburg Parks and Recreation Department
7232 East Main Street
Reynoldsburg, Ohio 43068**

VIP Guidelines

1. To accept the guidance and decisions of the staff.
2. To observe all staff rules and RPRD policies and procedures.
3. To recognize the function of paid staff, maintain smooth working relationships and stay within the bounds of volunteer responsibilities.
4. To complete assignments to the best of my ability.
5. To wear appropriate uniform as guided by volunteer coordinator. This may include name badges, specific attire, costume, etc.
6. To report on time as scheduled and check in with volunteer coordinator upon arrival to work.
7. To sign in and out, ensuring that my volunteer time has been verified and accounted for.
8. To inform the volunteer coordinator as soon as possible if unable to keep agreed schedule.
9. To act courteously to patrons and employees, positively representing the City of Reynoldsburg.
10. To maintain the dignity and integrity of RPRD with the public and patron confidentiality.

Printed Name: _____ **Date:** _____

Signature: _____

Parent/Guardian Signature (if under 18): _____



Please mark the Special Event you would be interested in volunteering for:

Breakfast with the Easter Bunny (April 19th)

(Responsibilities could include pre and post event set up, tear down, cooking or serving breakfast, picking up trash, assisting with craft project, dressing in Easter Bunny costume, etc.)

Tartan Day (April 5th)

(Responsibilities could include pre and post event set up, tear down, litter collection, restroom cleaning, etc.)

Plant Reynoldsburg (May 10th)

(Responsibilities could include planting flowers, shrubs or plants at flower beds located outside of City Hall)

Arbor Day (April 25th)

(Responsibilities could include pre and post event set up, tear down, litter collection, educational programming, give away assistance, tree planting, etc.)

Community Clean Up (June 7th)

(Responsibilities could include pre and post event set up, tear down, manning a cleanup station at JFK park, fathering trash and debris in various City parks, assisting with home repairs to senior residents of Reynoldsburg, etc.)

July 4th (July 3rd)

(Responsibilities could include pre and post event set up, tear down, picking up trash, parking cars, manning a carnival type game or bounce house, etc.)

Tomato Festival (Third Friday and Saturday in August)

(Responsibilities could include pre and post event set up, tear down, picking up trash, parking cars, manning a carnival type game or bounce house, etc.)

Community Halloween Party (Saturday before Halloween)

(Responsibilities could include pre and post event set up, tear down, picking up trash, manning a carnival type game or activity, assisting with registration, etc.)

Christmas on the Towne (First Saturday in December)

(Responsibilities could include pre and post event set up, tear down, picking up trash, assisting with food donations at carriage rides, etc.)

1st Annual Heroes for Heroes 5k TEAM Race (October 5th)

(Responsibilities could include pre and post event set up, tear down, picking up trash, pre/post-race route markers, etc.)

Community Garden(s) We have (2) community gardens and there are several ways one can volunteer time @ these locations.

Medical Release and Emergency Authorization

Volunteer's Name: _____ **Birth Date:** _____

Street or Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____ **Telephone:** _____

In considering of my participation in the City of Reynoldsburg Volunteer Program, the undersigned hereby agrees to assume all responsibility for personal injuries and insurance to cover any injuries or illness occurring while volunteering for the City of Reynoldsburg and hold the City of Reynoldsburg, the Parks and Recreation Department and all staff, board and volunteers harmless from any and all liability, actions, causes of actions from or in connection with volunteer activities and voluntarily assumes all risks that are not latent or created by staff.

The undersigned understands that the City of Reynoldsburg liability insurance, health, accident, workers' compensation or life insurance does not cover the work as a volunteer.

It is further understood that the Volunteer should divulge any limitations in his or her ability to carry out activities as assigned, and if a staff member requests the volunteer to perform a task that exceeds the volunteers physical capabilities, the volunteer is responsible for declining the assignment.

In case of emergency the undersigned request that the City of Reynoldsburg notify:

Name _____ Relationship to volunteer _____

Telephone # _____

Or

Name _____ Relationship to volunteer _____

Telephone # _____

In the event reasonable attempts to contact the above are unsuccessful, the undersigned hereby gives consent for administration of any treatment deemed necessary by:

(Physician) Dr. _____ Telephone # _____

(Dentist) Dr. _____ Telephone# _____

Or in the event the designated preferred practitioner is not available, by another licensed physician or dentist and the transfer of the volunteer to:

(Preferred Hospital) _____ or any hospital reasonably accessible.

Personal health and accidental injury insurance as indicated below cover the undersigned volunteer:

I have read and understand the conditions of my participation in volunteer activities.

Signature of Volunteer: _____ Date: _____

Signature of Parent or Guardian (if volunteer is under age of 18): _____ Date: _____

DISCLOSURE and AUTHORIZATION to Obtain Information

In connection with my suitability for employment with the City of Reynoldsburg Parks and Recreation Department (herein 'Client') or if employed, I understand that prior to or at any time after my employment commences a consumer report may be requested for employment purposes from Priority Research, Inc. (herein: "Priority Research") from public records including but not limited to, Social Security number, motor vehicle operation history/driving records, workers' compensation information and criminal history to the extent permitted by law from various local, state and federal agencies. Further, I understand that an Employment Credit Report may be requested. Finally I understand that an investigative Consumer Report may be requested and as required under §606 (a)(1) of the federal Fair Credit Reporting Act (FCRA), is U.S.C. §1681 et seq, I understand that this Report will include information as to my character, general reputation, personal characteristics, mode of living, work habits, performance, experience, along with reasons for termination of past employment, whichever are applicable obtained through personal interviews with associates who have knowledge concerning such items of information.

I VOLUNTARILY AND KNOWINGLY AUTHORIZE ANY PRESENT OR PAST EMPLOYER OR SUPERVISOR, COLLEGE OR UNIVERSITY OR OTHER INSTITUTION OF LEARNING, ADMINISTRATOR, LAW ENFORCEMENT AGENCY, STATE AGENCY, LOCAL AGENCY, FEDERAL AGENCY, CREDIT BUREAU, PRIVATE BUSINESS, MILITARY BRANCH OR THE NATIONAL PERSONNEL RECORDS CENTER, PERSONAL REFERENCE, AND/OR PERSONS TO GIVE RECORDS OR INFORMATION THEY MAY HAVE CONCERNING MY CRIMINAL HISTORY, MOTOR VEHICLE HISTORY/DRIVING RECORD, SOCIAL SECURITY NUMBER, EARNINGS HISTORY, CHARACTER, AND EMPLOYMENT (INCLUDING REASONS FOR TERMINATION), CREDIT HISTORY, CREDIT CAPACITY, OR CREDIT STANDING OR ANY OTHER INFORMATION REQUESTED BY PRIORITY RESEARCH DEEMED PERTINENT TO MY EMPLOYMENT.

In accordance with FCRA and applicable state laws, I understand that I have the right to request a complete and accurate disclosure of the nature and scope of the investigation requested. Further, I am entitled to know if employment is denied because of information obtained by my prospective employer from a Reporting Agency. If so I will be so advised in writing and be given the name, address and toll free number of the agency, a statement that the action was based in whole or in part on information contained in the Report and written notice that I have the right (i) if I request to obtain within sixty days a free copy of the Report from the Reporting Agency (under no circumstances shall such cost exceed the actual costs of duplication), and from any other Consumer Reporting Agency which compiles and maintains files on consumers on a nationwide basis; and, (ii) to dispute the accuracy or completeness of any information in a consumer report furnished by the Reporting Agency. I understand that upon my request with reasonable notice and after furnishing proper identification, Priority Research's trained personnel will provide me with investigative information in my file during normal business hours in person or upon written request by certified mail to a specified addressee or telephone as permitted by law. Further, I understand that should I wish to review my file in person I am permitted to be accompanied by one other person of my choosing who shall furnish reasonable identification and if requested, Priority Research will provide a written explanation of any coded information contained in my file. I understand that Priority Research is a Consumer Reporting Agency and it is Priority Research's policy to not be involved in or make hiring decisions or recommendation.

Priority Research's privacy policy limits the information it provides to the client named herein, however I hereby authorize the client to share such information with parties in interest who have a "need to know" such information to protect them and their employees. Priority Research does not sell or otherwise provide any of the information found in its background investigations to any other party other than the client.

I understand that any consumer report or investigative consumer report requested will be used strictly for employment purposes as defined under §603(h) and authorized under §604(a)(3)(B) of the Fair Credit Reporting Act, as a report to be used for the purpose of evaluation for employment, promotion, reassignment or retention as an employee. I further understand and consent to the furnishing of workers' compensation information, after a conditional job offer which may include my medical information including any and all injuries pursuant to state law and in compliance with the Federal Americans with Disabilities Act. In addition I understand that an offer of employment, promotion, reassignment or retention will be conditional upon receipt of satisfactory information as required by the subscriber and that to be considered for employment, promotion, reassignment or retention I must authorize the procurement of such report(s). A photographic or faxed copy of this form shall be as valid as the original.

The following must be filled out completely and signed for your application to be considered. (Please Print)

LAST NAME _____ FIRST NAME _____ MI _____

HOME ADDRESS _____

CITY _____ COUNTY _____ STATE _____ ZIP _____

SOCIAL SECURITY # _____ DRIVER'S LICENSE # _____ STATE _____ EMAIL _____

For ID purposes please provide FULL DATE OF BIRTH: _____ Please list other names _____

Job Title Applying For: _____

Signature Authorizing the Procurement of the Consumer Report and/or Investigative Consumer Report _____

Today's Date _____

City of Reynoldsburg Background Check

Disqualifying Offenses

No person may serve with youth or children who has ever been convicted of any disqualifying offense, been on probation or received deferred adjudication for any disqualifying offense, or has presently pending any criminal charges alleging a disqualifying offense.

Disqualifying offenses are as follows:

- a. An offense classified as an offense against the person or family.

Examples:

Offenses against the person include, but are not limited to murder, assault, sexual assault, injury to a child, enticing a child, and harboring a child.

Offenses against the family include, but are not limited to bigamy, incest, interference with child custody, enticing a child, and harboring a runaway child.

- b. An offense classified as an offense against public order or indecency.

Examples:

Offenses against public order or indecency include, but are not limited to prostitution, obscenity, sexual performance by a child, possession or promotion of child pornography, and disorderly conduct.

- c. Robbery, arson, or an offense of any law regulating the possession, use, or carrying of weapons.
- d. A violation of any law intended to control the possession or distribution of any substance included as a controlled substance in the state of Ohio.
- e. A violation of any law intended to limit the furnishing of alcohol or tobacco products to a minor.
- f. Any other felony offense which, in the judgment of the Parks & Recreation Director, indicates an unreasonable risk of harm to a minor.

Exceptions: misdemeanor drug or alcohol related convictions and convictions for assault and battery crimes against the person category may be excused if the convictions occurred more than five (5) years prior to the background check.

Acknowledgments

(Please initial)

_____ I understand that, if the responsibilities I am assuming involve contact and/or interaction with minors, a condition for accepting the responsibilities is that I am not one who has ever, or currently abuses minors including, but not limited to abusing them sexually.

_____ I understand that, if the responsibilities I am assuming involve contact and/or interaction with minors, a condition for accepting the responsibilities is that I do not have a paraphiliac diagnosis (e.g. pedophilia, exhibitionism, voyeurism).

Signature

Date