

**Returning Volunteer Application – Used for volunteers who completed the 2017 Little League Volunteer Application and were approved or are returning “approved” volunteers from previous seasons.**

**Instructions:**

- **Complete the Returning Volunteer Application (entire left column).**
- **Print and Sign your name.**
- **Update the right column if any information has changed since last year.**
- **Scan (or take a picture) and email to [admin@highlandll.com](mailto:admin@highlandll.com)**
  - **Completed LL Returning Volunteer Application**
  - **Current/Valid Government Issued Photo ID**

**Important Note: Volunteers must also register as a volunteer (Head Coach or Assistant Coach) for the appropriate division(s), within the Online Registration System.**

The process of applying, as a volunteer will not be considered complete until you are registered within the online system and have submitted the appropriate volunteer app and valid photo ID for review. **Additionally, the completion of this process does not guarantee appointment to the volunteer spot you are registering for.**

# Little League® “Returning” Volunteer Application - 2018

Do not use forms from past years. Use extra paper to complete if additional space is required.

If you filled out a volunteer application last year and your league uses the background check tools provided by Little League International, please fill out the returning volunteer application. Otherwise, please use the standard volunteer application.

1. Have you ever been convicted of or plead no contest or guilty to any crime(s) involving or against a minor?

If yes, describe each in full:  Yes  No

2. Have you ever been convicted of or plead no contest or guilty to any crime(s) Yes  No

If yes, describe each in full:   
 (Answering yes to question 2, does not automatically disqualify you as a volunteer.)

3. Do you have any criminal charges pending against you regarding any crime(s)? Yes  No

If yes, describe each in full:   
 (Answering yes to question 3, does not automatically disqualify you as a volunteer.)

4. Have you ever been refused participation in any other youth programs? Yes  No

If yes, explain: \_\_\_\_\_  
 \_\_\_\_\_

5. In which of the following would you like to participate? (Check one or more.)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> League Official | <input type="checkbox"/> Field Maintenance | <input type="checkbox"/> Concession Stand |
| <input type="checkbox"/> Coach           | <input type="checkbox"/> Manager           | <input type="checkbox"/> Other            |
| <input type="checkbox"/> Umpire          | <input type="checkbox"/> Scorekeeper       |   |

AS A CONDITION OF VOLUNTEERING, I give permission for the Little League organization to conduct background check(s) on me now and as long as I continue to be active with the organization, which may include a review of sex offender registries (some of which contain name only searches which may result in a report being generated that may or may not be me), child abuse and criminal history records. I understand that, if appointed, my position is conditional upon the league receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the local Little League, Little League Baseball, Incorporated, the officers, employees and volunteers thereof, or any other person or organization that may provide such information. I also understand that, regardless of previous appointments, Little League is not obligated to appoint me to a volunteer position. If appointed, I understand that, prior to the expiration of my term, I am subject to suspension by the President and removal by the Board of Directors for violation of Little League policies or principles.

Applicant Name (please print or type)

Applicant Signature \_\_\_\_\_ Date

If Minor/Parent Signature \_\_\_\_\_ Date

*NOTE: The local Little League and Little League Baseball, Incorporated will not discriminate against any person the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.*

Please update **ONLY** the information in this section which has changed since last year.

Name     
First Middle Last

Address

City  State ...  Zip

Home Phone:  Cell Phone

Work Phone:  E-mail Address:

Driver's License#:

Occupation:

Employer:

Address:

Please list three references, at least one of which has knowledge of your participation as a volunteer in a youth program:

Name/Phone <input type="text"/>	/	<input type="text"/>
<input type="text"/>	/	<input type="text"/>
<input type="text"/>	/	<input type="text"/>

Special professional training, skills, hobbies:

Special Certifications (CPR, Medical, etc.):

Special Affiliations (Clubs, Services Organizations, etc.) :

Previous volunteer experience (including baseball/softball and years (s)):

**IF YOU LIVE IN A STATE THAT REQUIRES A SEPARATE BACKGROUND CHECK BY LAW, PLEASE ATTACH A COPY OF THAT STATE'S BACKGROUND CHECK. FOR MORE INFORMATION ON STATE LAWS, VISIT OUR WEBSITE:**

<http://www.littleleague.org/learn/programs/childprotection/state-laws-bg-checks.htm>

**LOCAL LEAGUE USE ONLY:**

Background check completed by league officer \_\_\_\_\_ on \_\_\_\_\_

System(s) used for background check (minimum of one must be checked): Regulation I(c)(9) Mandates First Advantage or another provider that is comparable

\*First Advantage

Sex Offender Registry Data along with National Criminal

Records check of at least 281 million records

\*Please be advised that if you use First Advantage and there is a name match in the few states where only name match searches can be performed you should notify volunteers that they will receive a letter directly from LexisNexis in compliance with the Fair Credit Reporting Act containing information regarding all the criminal records associated with the name, which may not necessarily be the league volunteer.

**Only attach to this application copies of background check reports that reveal convictions of this application.**