



VOLUNTEER APPLICATION

The Village of Savoy and the Savoy Recreation Center maintain a policy for equal opportunity employment for all employees and applicants. We hire, train, promote, compensate and dismiss employees without regard for race, color, religion, sex, sexual orientation, national origin, age, marital or veteran status, disability or citizenship, as well as other classifications protected by applicable state or local laws.

Our equal employment opportunity philosophy applies to all aspects of employment within the Village including recruiting, hiring, training, transfer, promotion, job benefits, pay, and dismissal.

Village of Savoy
611 N. Dunlap Ave.
Savoy, IL 61874
Phone: 217-359-5894
Fax: 217-359-0202
www.village.savoy.il.us

Today's Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone: _____ Evening Phone: _____

Emergency Contact: _____ Phone: _____ Relationship: _____

Age 14 & 15 _____ 16-18 _____ 18 & Over _____

Have you volunteered for the Savoy Recreation Center previously? Yes _____ No _____

Have you been convicted of a felony? Yes _____ No _____
(Conviction will not necessarily disqualify you from volunteer service)
If yes, please explain _____

Do you have a valid driver's license? Yes _____ No _____

How did you learn about volunteering with the Village of Savoy?

Seasonal brochure	Media	Village of Savoy Website
Friend	Savoy Recreation Center	Other

Volunteer Interests: (Please circle all that apply.)

Coach Assistant Coach Sports Official

Have you coached for the Savoy Recreation Center before? Yes _____ No _____

Which sport would you like to volunteer for? _____

Coaching experience in any sport: _____

What age group do you prefer to work with? _____

Your child's name whose team you would like to coach/assistant coach: _____

Your child's age: _____

Additional comments or information: _____

References: (Please provide non-family members)

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

By signing the waiver on the back of this form, you indicate that you are willing and able to complete any necessary training for the volunteer position.

Please read and sign the statement of authenticity on the back of this form, and return the form to:

Savoy Recreation Center
402 W. Graham Dr.
Savoy, IL 61874

STATEMENT OF AUTHENTICITY

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained and information requested in this volunteer application as may be necessary to arrive at a decision. I understand that this application is not, and is not intended to be, a contract for volunteering. I also understand that in the event of my acceptance as a volunteer, I may be subject to discharge for any false or misleading statements or material omissions made in connection with my application. I understand also that I am required to abide by all rules and regulations of the Village of Savoy.

I authorize the Village of Savoy to make a thorough investigation of my past employment, education, job related and volunteerism activities. I hereby authorize all individuals in organizations named or referred to in this application and any law enforcement organization, state agency, investigative organization, or other governmental body to provide the Village of Savoy all information relative to such investigations and hereby release such individuals, organizations and the Village of Savoy from any and all liability for any claim or damage resulting there from. I further understand that any false or misleading information provided during the application or interview process will result in withdrawal from consideration as a volunteer, regardless of when discovered.

I hereby authorize the Village of Savoy to conduct work history and reference checks. I waive written notice from my current and prior employers and authorize them to release information regarding any disciplinary action taken against me within the past four years. I further release the officers, agents, and employees of both the Village of Savoy and my current and prior employers from any liability arising from disclosure of personnel records and information.

Signature: _____

Date: _____

For Personnel Department Use Only

Arrange Interview: Yes _____ No _____

Remarks: _____

Accepted as volunteer: Yes _____ No _____ As of (Date): _____

Volunteer Position: _____

By: _____

Name and Title

Date