



Mailing address:  
 Town Administrator  
 1293 Washington Avenue  
 Cedarburg, WI 53012  
 Telephone: 262-377-4509  
 Fax: 262-377-0308

## APPLICATION FOR EMPLOYMENT

Qualified applicants receive equal consideration. No question is asked for the purpose of excluding any applicant due to race, creed, color, national origin, religion, age, sex, handicap, disability, veteran status, marital status, sexual orientation, or any other characteristic protected by law.  
 WE ARE AN EQUAL OPPORTUNITY EMPLOYER.

Date \_\_\_\_\_

Name \_\_\_\_\_  
Last
First
Middle

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

E-mail \_\_\_\_\_

Position for which you are applying: \_\_\_\_\_

Can you with or without reasonable accommodation perform the essential functions of the job for which you are applying? Yes \_\_\_ No \_\_\_

What source led you to make application with us? \_\_\_\_\_

Have you previously applied for employment with the Town? Yes \_\_\_ No \_\_\_

If yes, when? \_\_\_\_\_

Are any of your relatives presently employed by the Town? Yes \_\_\_ No \_\_\_

If yes, please provide name and position: \_\_\_\_\_

**EMPLOYMENT HISTORY** (List present or most recent employer first)

Employer	Employed	Type of work performed	Present or last salary	Reason for Leaving
Address/City	from _____ mo./yr.			
Name of supervisor	to _____ mo./yr.			

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Address/City	from _____ mo./yr.			
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Employer	Employed	Type of work performed	Present or last salary	Reason for Leaving
Address/City	from _____ mo./yr.			
Name of supervisor	to _____ mo./yr.			

Please account for any periods of unemployment other than when you were in school:

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**EDUCATION**

School	Name & Location of School	Circle Last Year Completed	Major Course	Diploma and/or Degree?
High School		9 10 11 12		
College		1 2 3 4 more		
Business or Trade School		Months Attended		

If you served in the U.S. Armed Forces, briefly describe skills acquired: \_\_\_\_\_

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**PERSONAL INFORMATION**

Are you legally authorized to work in the U.S.? Yes \_\_\_ No \_\_\_

(NOTE: You will be required to furnish documents to verify your identity and eligibility for employment in accordance with the Immigration Reform and Control Act and your employment is contingent upon furnishing such documents).

Name, address and telephone number of someone other than a household member we can contact in case of emergency: \_\_\_\_\_

Are you at least 18 years of age? Yes \_\_\_ No \_\_\_

Have you ever been convicted of or pled guilty or no contest to any violation of law other than a minor traffic violation? Yes \_\_\_ No \_\_\_ (A conviction does not automatically bar you from employment.)

If yes, give details: \_\_\_\_\_

If you possess any certifications or specific training please list:

\_\_\_\_\_  
\_\_\_\_\_

Do you have any other skills you wish to mention? \_\_\_\_\_

Are you presently employed? Yes \_\_\_ No \_\_\_ If so, may we contact your present employer? Yes \_\_\_ No \_\_\_

If hired, when would you be available? \_\_\_\_\_ Salary requirements? \_\_\_\_\_

All information provided by me in support of my application for employment is true and correct to the best of my knowledge. I understand that misrepresentations or omissions may be cause for rejection or may be cause for subsequent dismissal if I am hired.

I voluntarily and knowingly authorize any former employer, person, firm, corporation, school or government agency, its officers, employees and agents to release any and all information concerning my former employment to any prospective employer, its officers, employees and agents, or any other person or entity making a written or oral request for such information. I understand that the employment information may include, but is not necessarily limited to, performance evaluations and reports, job descriptions, disciplinary reports, letters of reprimand, and opinions regarding my suitability for employment possessed by it.

I voluntarily and knowingly fully release and discharge, absolve, indemnify and hold harmless such former employer, person, firm, corporation, school or government agency, its officers, employees and agents from any and all claims, liability, demands, causes of action, damages, or costs, including attorneys' fees, present or future, whether known or unknown, anticipated or unanticipated, arising from or incident to the disclosure or release except for the malicious and willful disclosure of derogatory facts concerning my employment made for the express purpose of preventing me from obtaining employment which the officer, employee or agent disclosing such facts knows are untrue.

I understand that any offer of employment is contingent upon successful completion of the background check and satisfactory completion of any required physical examination and/or drug test.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**REFERENCES**

Name of Reference \_\_\_\_\_

Occupation \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_

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Telephone \_\_\_\_\_



# Little League® Volunteer Application – 2024



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

This volunteer application should only be used if a league is manually entering information into JDP or an outside background check provider that meets the standards of Little League Regulations 1(c)(9). THIS FORM SHOULD NOT BE COMPLETED IF A LEAGUE IS UTILIZING THE JDP QUICKAPP. Visit [LittleLeague.org/LocalBGcheck](http://LittleLeague.org/LocalBGcheck) for more information.

A COPY OF VALID GOVERNMENT ISSUED PHOTO IDENTIFICATION MUST BE ATTACHED TO COMPLETE THIS APPLICATION.

All RED fields are required.

Name \_\_\_\_\_ Date \_\_\_\_\_  
First Middle Name or Initial Last

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security # (mandatory) \_\_\_\_\_

Cell Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Home Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Date of Birth \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Special professional training, skills, hobbies: \_\_\_\_\_

Community affiliations (Clubs, Service Organizations, etc.): \_\_\_\_\_

Previous volunteer experience (including baseball/softball and year): \_\_\_\_\_

1. Do you have children in the program?  Yes  No

If yes, list full name and what level? \_\_\_\_\_

2. Special Certification (CPR, Medical, etc.)? If yes, list: \_\_\_\_\_  Yes  No

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

Driver's License#: \_\_\_\_\_ State \_\_\_\_\_

4. Have you ever been charged with, convicted of, plead no contest, or guilty to any crime(s) involving or against a minor, or of a sexual nature?

If yes, describe each in full: \_\_\_\_\_  Yes  No

(If volunteer answered yes to Question 4, the local league must contact Little League International.)

5. 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 5, does not automatically disqualify you as a volunteer.)

6. 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 6, does not automatically disqualify you as a volunteer.)

7. Have you ever been refused participation in any other youth programs and/or listed on any youth organization ineligible list?  Yes  No

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

(If volunteer answered yes to Question 7, the local league must contact Little League International.)

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

League Official  Umpire  Manager  Concession Stand

Coach  Field Maintenance  Scorekeeper  Other \_\_\_\_\_

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

Name/Phone

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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: [LittleLeague.org/BgStateLaws](http://LittleLeague.org/BgStateLaws)

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

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

Applicant Name (please print or type) \_\_\_\_\_

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

### LOCAL LEAGUE USE ONLY:

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

System(s) used for background check (minimum of one must be checked):

Review the Little League Regulation 1(c)(9) for all background check requirements

JDP (Includes review of the U.S. Center of SafeSport's Centralized Disciplinary Database and Little League International Ineligible/Suspended List)\*

OR

National Criminal Database check  U.S. Center of SafeSport's Centralized Disciplinary Database and Little League International Ineligible/Suspended List

National Sex Offender Registry

\* Please be advised that if you use JDP 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 or email directly from JDP 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.

Proof of completion of Abuse Awareness Training for Adults provided to league