



Recreation and Parks

AUGUSTA RECREATION AND PARKS DEPARTMENT Criminal Background Checklist

1. All Coaches, Head Coach and Assistant, must fill out a Criminal Background Check before being assigned a team.
2. Only the Athletic Manager or Athletic Supervisor may take the completed forms to the Sheriff's Department and pick them up.
3. If anything shows up on the Criminal Background Form, the following procedure will be implemented:
 - a. The Athletic Manager or Athletic Supervisor will notify the individual to set up a meeting immediately.
 - b. The Athletic Manager or the Athletic Supervisor will meet with the individual to discuss the problem within two (2) days.
 - c. The Individual will have no contact with the team until after the above meeting.
 - d. Each incident on the Background Check will be reviewed and the following will apply:
 1. Simple Battery, where the victim is a minor. (Immediate Dismissal)
 2. Aggravated Battery, where the victim is a minor (Immediate Dismissal)
 3. Cruelty to Children. (Immediate Dismissal)
 4. Contributing to the delinquency of a minor. (In the last 5 years-Immediate Dismissal)
(More than 5 years – 1 Year Probation)
 5. Any sexual offense (Immediate Dismissal)
 6. Violation of any controlled substance act. (Felony in the last 10 years-Immediate Dismissal) (Misdemeanor in the last 5 years – Immediate Dismissal)
 7. Alcohol related violations (DUI in the last year – Immediate Dismissal)
 8. Murder or Felony Murder (Immediate Dismissal)
 9. Criminal attempts to commit any above named offenses. (Felony in the last 5 years, except #7 – Immediate Dismissal) (Misdemeanor – 1 Year Probation)
 10. Crimes involving family violence (Immediate Dismissal)
 11. Any felony not listed above. (Within last 5 years – Immediate Dismissal) (Later than 5 years – 1 Year Probation)
 12. Any other crime that bears upon fitness to have responsibility for the safety and well being of children. (Misdemeanors within the last 5 years – 1 Year Probation) (Felony within the last 10 years – Immediate Dismissal)

Residents of California and Maine only:

Under state law you have a right to receive a copy of your investigative consumer report and/or consumer credit report, free of charge, if one is requested by Client. By checking the box below a copy of your report will be provided to you at the address you provide on this Disclosure and Authorization.

I wish to receive a copy of any report on me that is requested.

Signature TODAY'S DATE _____

LAST NAME _____ FIRST NAME _____ MIDDLE NAME/INITIAL _____

HOME ADDRESS _____

CITY _____ COUNTY _____ STATE _____ ZIP _____

SSN _____ D/L or STATE ID _____ STATE ISSUED _____

EMAIL ADDRESS _____

For identification purposes only, please provide FULL DOB: _____

Please List Other Names Used _____

Protect Youth Sports, Inc.
14499 Dale Mabry Hwy, Ste 201 South
Tampa, FL 33618
Phone: 877-319-5587 Fax: 800-319-5582
www.protectyouthsports.com



Recreation and Parks

CONSENT TO CONDUCT BACKGROUND CHECK

FULL LEGAL NAME: _____

ADDRESS: _____ CITY: _____ ST: _____ ZIP: _____

DATE OF BIRTH: _____ SEX: _____ RACE: _____
For Statistical Purposes

PLACE OF BIRTH: _____ SOCIAL SECURITY #: _____

I, THE UNDERSIGNED BY EXECUTION OF THIS DOCUMENT, GIVES AUGUSTA-RICHMOND COUNTY PERMISSION TO CONDUCT A BACKGROUND CHECK REGARDING MY QUALIFICATIONS TO PARTICIPATE IN AUGUSTA RECREATION DEPARTMENT PROGRAMS AS A VOLUNTEER COACH OR VOLUNTEER SUPPORT PERSON. THIS BACKGROUND CHECK INCLUDES, BUT IS NOT LIMITED TO, A RECORD CHECK TO DETERMINE WHETHER I HAVE EVER BEEN CONVICTED OF A CRIME OR HAVE A CRIMINAL RECORD.

AUTHORIZE:

(Name of Agency/Individual)

(Address)

(Phone Number)

TO RECEIVE MY CRIMINAL HISTROY RECORD FROM THE RICHMOND COUNTY SHERIFF'S DEPARTMENT.

I UNDERSTAND THAT I HAVE A RIGHT TO; (1)OBTAIN A COPY OF ANY BACKGROUND CHECK REPORT, AND (2) CHALLENGE THE ACCURACY AND COMPLETENESS OF ANY INFORMATION CONTAINED IN ANY SUCH REPORT. I ALSO UNDERSTAND THAT I MAY BE REQUIRED TO SUBMIT A CLASSIFIABLE FINGERPRINT CARD SHOULD ANY INITIAL RECORDS CHECK REVEAL THAT I HAVE BEEN ARRESTED OR CONVICTED OR THAT I AM CURRENTLY CHARGED WITH ANY OF THE ABOVE ENUMBERATED OFFENSES.

I ACKNOWLEDGE THAT RICHMOND COUNTY MAY CHOOSE TO DENY ME UNSUPERVISED ACCESS TO A CHILD OR CHILDREN PENDING THE COMPLETION OF THE BACKGROUND CHECK. I FURTHER AGREE TO HOLD RICHMOND COUNTY, ITS COMMISSIONERS, OFFICERS, EMPLOYEES AND AGENTS HARMLESS FROM ANY LIABILITY FOR DEFAMATION, INVASION OF PRIVACY, OR ANY OTHER CLAIM BASED UPON GOOD FAITH ACTION PURSUANT TO THE PROVISIONS OF THIS CONSENT.

This _____ day of _____, 20 _____

(APPLICANT SIGNATURE) _____

Sworn to and subscribed before me on this _____ day of _____, 20 _____

Notary Public. My Commission Expires: _____

2027 LUMPKIN ROAD
PO BOX 5605
AUGUSTA, GA 30906
706-796-5025 PHONE 706-796-4099 FAX
Augustaga.gov

DISCLOSURE and AUTHORIZATION – BACKGROUND INVESTIGATION

In connection with my application for employment or to serve as a volunteer with Augusta Recreation, Parks and Facilities Department ("Client"), I understand that a "consumer report" and/or "investigative consumer report", as defined by the Fair Credit Reporting Act, will be requested by Client for employment or volunteer purposes, whichever is applicable, from Protect Youth Sports, Inc., ("Protect Youth Sports"), a consumer reporting agency as defined by the Fair Credit Reporting Act. These reports may include information as to my character, general reputation, personal characteristics or mode of living, whichever are applicable. They may involve interviews with sources such as my neighbors, friends or associates. The report may also contain information about me relating to my criminal history, credit history, driving and/or motor vehicle records, social security number verification, verification of education or employment history, worker's compensation (only after a conditional job offer) or other background checks. Such reports may be obtained at any time after receipt of this Disclosure and Authorization and if I am hired or serve as a volunteer, whichever is applicable, throughout the course of my employment or volunteer service, as permitted by law and unless revoked by me in writing. I understand that I have the right, upon written request made within a reasonable amount time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report to Protect Youth Sports, Inc., 14499 N. Dale Mabry Hwy., Suite 201 South, Tampa, FL 33618 or 1-877-319-5587. For information about Protect Youth Sports' privacy practices, see www.protectyouthsports.com.

Acknowledgement and Authorization

By signing below, I voluntarily and knowingly authorize Client or its authorized agents to obtain or prepare consumer reports or investigative consumer reports about me. I acknowledge receipt of a copy of *A Summary of Your Rights under the Fair Credit Reporting Act* and certify that I have read this Disclosure and Authorization as well as the summary explaining my rights under the Fair Credit Reporting Act

Residents of Minnesota and Oklahoma only:

Under state law you have a right to receive a copy of your consumer report, free of charge, if one is required by Client. By checking the below box, a copy will be provided to you at the address you provide on this Disclosure and Authorization.

- I wish to receive a copy of any consumer report on me that is requested.

Residents of New York only:

Under state law you have the right to inspect and receive a copy of any investigative consumer report requested by Client by contacting Protect Youth Sports directly. You also acknowledge receipt of a copy of Article 23-A of the New York Correction Law by checking the below box.

- I acknowledge receipt of a copy of Article 23-A of the New York Correction Law.

Residents of Washington State only:

Under state law you have a right to request a copy of the Washington Fair Credit Reporting Act's disclosure to consumers (RCW 19.182.070) and a copy of your report by contacting Protect Youth Sports directly.