



APPLICATION
DEPARTMENT OF PARKS AND RECREATION

DEPARTMENT OF PARKS AND RECREATION

INCLUDE A COPY OF THE FRONT AND BACK OF A GOVERNMENT ISSUED PHOTO ID

Check only one of the following options that applies to your application:

- Camp Contractor
Class Contractor
Volunteer
Volunteer Coach
Temporary Employee

PLEASE PRINT ALL INFORMATION

NAME: Last First Middle Suffix (Jr, III, etc.)

ADDRESS: Street City State Zip Code

HOME PHONE: WORK PHONE:

LENGTH AT ABOVE RESIDENCE:

IF LESS THAN 3 YEARS, PROVIDE PREVIOUS ADDRESS:

ADDRESS: Street City State Zip Code

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CRIMINAL HISTORY INFORMATION

The information below is required to conduct a criminal history check. Having a criminal history will not automatically disqualify you for this position. The nature of the offense and when it occurred will be considered. The information below and any criminal history record will be kept confidential and only used to determine your eligibility.

RACE: SEX: DOB: / / HEIGHT: WEIGHT:

PLACE OF BIRTH: SS# - -

EYE COLOR: HAIR COLOR:

1. Have you ever been detained or charged or convicted (including traffic offense)?  
 YES  NO
  
2. Are you currently on Probation/Parole?  YES  NO

If Yes to either of the above, please provide date, place, charge, court, fines or sentence for each conviction. Give all the facts so that a decision can be made (attach additional sheet if necessary)

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I certify that every statement I have made in this application is true and complete to the best of my knowledge. **I understand that any false or incomplete information may be grounds for denying this application.** I understand that this application is the property of the Arlington County Sheriff's Office and will not be returned. I understand that I must notify the Department of Parks and Recreation of any change in my name, address, phone number or any other pertinent information.

I authorize a review of and full disclosure of all records, or any part thereof, and any other forms of information regardless of form or format concerning myself whether the said records are of a public, private or confidential nature.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

***THIS APPLICATION IS NOT COMPLETE UNTIL THE DEPARTMENT OF PARKS AND RECREATION RECEIVES A COPY OF THE FRONT AND BACK OF AN UNEXPIRED GOVERNMENT ISSUED PHOTO ID***

For Office Use Only:	Month/Year Received _____	By Whom _____
Contractor: _____	Payment Received _____	