



Parks & Recreation
Volunteer Consent for Background Check
City of Panama City Beach
 16200 Panama City Beach Pkwy
 Panama City Beach, FL 32413
 Ph. (850)233-5045 Fax. (850)233-5161

PCBPD Background Completed: _____
 Date: _____

Today's Date: _____

| PERSONAL INFORMATION | |
|---|---|
| Name: _____ Date of Birth _____ <div style="display: flex; justify-content: space-around; font-size: small;"> (Last) (First) (Middle) </div> | |
| Mailing Address: _____ <div style="display: flex; justify-content: space-around; font-size: small;"> (Street and Number) </div> | |
| Home Phone: _____ Business Phone: _____ | |
| Email Address: _____ <div style="display: flex; justify-content: space-around; font-size: small;"> (City) (State) (Zip) </div> | |
| Cell Phone Number: _____ | |
| Person to call in an emergency: _____ | |
| Years experience: _____ Driver's License # _____ Activity _____ | |
| | |
| <i>All potential volunteers for the City of Panama City Beach 18 years of age and older are subject to a criminal background check</i> | |
| Have you ever been arrested or convicted as an adult for any violation of the law? Provide all arrest or conviction dates, location(s) and penalties below. Exclude traffic violations under \$150.00. Each case will be given individual consideration. Failure to list all arrests other than those excluded may disqualify you from further consideration (If Yes – Explain under Remarks) Listing arrests or convictions does not disqualify you from being a volunteer. ___ Yes ___ No | Has your driver's license ever been suspended or revoked? ___ Yes ___ No |
| List All Arrests (attach additional sheets if necessary) | |
| Have you ever had a background check by the City of Panama City Beach Parks & Recreation Department? YES / NO YES – Date (Mo/Yr) _____ NOTE: Until background check has cleared coaches will not receive a practice time. | |
| I understand that my driver's license will be required in order for a background check to be completed. _____ INITIAL | |
| I authorize the City of Panama City Beach Police Department to run a criminal background check. I understand that, as an official I am representing the City of Panama City Beach and will adhere to the guidelines set forth by the program. | |
| Signature _____ Date _____ <div style="text-align: right; font-size: small;">MM/DD/YYYY</div> | |
| If you are under 18 years of age, a parent/guardian must sign and a participation waiver must be attached. | |
| I give permission to my child to officiate for the City of Panama City Beach. | |
| Parent/Guardian Signature _____ Date _____ <div style="text-align: right; font-size: small;">MM/DD/YYYY</div> | |