



Tahoe City Public Utility District
P. O. Box 5249
Tahoe City, California 96145
Ph. (530) 583-3440
Fax (530) 583-1475

VOLUNTEER APPLICATION

INSTRUCTIONS

- Please print or type and sign the application. The application is not valid unless signed.
- All questions on this application must be completed.
- All Supplemental Documents must be completed.
- Deliver application to TCPUD at 401 West Lake Blvd., Tahoe City, CA; mail to P.O. Box 5249, Tahoe City, CA 96145; fax to 530-583-1475; or email to recreation@tcpud.org.

Volunteer Name _____
First Name, Middle Name, Last Name

Mailing Address _____
PO Box/Street Address, City, State, Zip

Home Phone _____ Cell Phone _____ E-mail _____

Driver's License # and State of Issuance _____ Social Security # _____

Please indicate preferred Sport:

Basketball Baseball Softball Other _____

Please indicate:

Head Coach Assistant Coach Age Level/Division Requested _____

What is your probability of attending?

Practices	<input type="radio"/> All	<input type="radio"/> Most	<input type="radio"/> Some (half)	<input type="radio"/> Few (1/3)
Games	<input type="radio"/> All	<input type="radio"/> Most	<input type="radio"/> Some (half)	<input type="radio"/> Few (1/3)
Tournaments	<input type="radio"/> All	<input type="radio"/> Most	<input type="radio"/> Some (half)	<input type="radio"/> Few (1/3)

Do you have a Coaching Certification? Yes No

Have you coached previously? Yes No

If so; please indicate when, where and at what level in space below.

Have you played the sport you are requesting? Yes No

If so; please indicate when, where and at what level in space below.

What is your coaching philosophy?

Winning

Having Fun

Discipline

Teaching Teamwork

Please expand in space below.

Are you willing to take direction from the Recreation Supervisor?

Yes

No

Have you had First Aid Training?

Yes

No

Are you willing to enforce and promote the District's Code of Ethics for Coaches, Players and Parents?

Yes

No

Do you have any relatives employed by the TCPUD?

Yes

No

If yes, state name(s) of relative(s) in space below.

Have you ever filed an application with the TCPUD before?

Yes

No

If yes, provide date(s) in space below.

Have you previously been employed by or volunteered with the TCPUD?

Yes

No

If yes, state date(s) of employment/volunteerism and position(s) held in space below.

Explanatory Information for Above:

I hereby certify that all statements made in this application are true and complete to the best of my knowledge and belief. I hereby authorize the Tahoe City Public Utility District to investigate any information I have given herein, with the understanding that omission or misrepresentation of facts may be grounds for rejection of the application. I further understand that I will be required to be fingerprinted at no cost to me prior to appointment to this volunteer position.

Signature of Applicant _____ Date _____

Application is not valid unless signed.