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We appreciate your interest in offering a class with Acworth Parks, Recreation and Community Resource Department. The city partners with outside organizations to offer a diverse selection of classes and activities for our community. Any individual or group interested in teaching/instructing a class must fill out all the attached form for approval. Classes will be held at a city location and all instructors are required pass a background check prior to the start of their class. There are several stipulations to determine the cost of hosting a class with the city:

- A. Instructor who is willing to teach the class at absolutely no charge and expects nothing in return from the city. The city will waive the rental fee for all instructors whose applications have been accepted and do not expect anything in return.
- B. Instructor who is willing to teach the class at absolutely no charge and only request donations to a charity, donations to non-profit organization, or donation of community service, from the participants enrolled. The city may waive the rental fee for all instructors whose applications have been accepted and do not expect anything in return to the individual.
- C. Instructor who will charge to teach the class and expect something in return from the city and the participants. The city and the instructor will agree on a split of 80/20 of the fees collected in lieu of a rental fee, with the instructor taking 80% and the city taking 20%. The Parks and Recreation Department must handle all fees and registration for the class.

**\*\*Please Note:** All instructors will be required to provide a Certificate of Liability Insurance for their class. The required amount of General Liability is a minimum of one million dollars per occurrence.

After receiving your request a staff member will contact you and review your proposal. If you have any questions feel free to contact the Parks and Recreation office at 770-917-1234.

Please complete attached:



1. Class Information:

- a. Class Name: \_\_\_\_\_
- b. Class Location: \_\_\_\_\_
- c. Class Dates/Times: \_\_\_\_\_
- d. Number of Participants/Age Group: \_\_\_\_\_
- e. Class Fees: \_\_\_\_\_
- f. Class Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Organization Information:

- a. Who is offering this class: \_\_\_\_\_
- b. Brief overview of organization/personal background: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- c. Relevant Experience/Certifications: \_\_\_\_\_  
\_\_\_\_\_
- d. Other Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ADMIN:

Department: \_\_\_\_\_ Council: \_\_\_\_\_ Rec1: \_\_\_\_\_ Background: \_\_\_\_\_ COI: \_\_\_\_\_ W-9: \_\_\_\_\_ Contract: \_\_\_\_\_

**Please Fax Completed Form  
to 770-966-7891 or Email to  
acworthprcrd@acworth.org**



**City of Acworth  
Coach and Volunteer Application**

Please check one of the boxes below indicating which sport or activity you are submitting this application for:

- Acworth Baseball Association       Horizon League       Acworth Youth Basketball League  
 Acworth Youth Football and Cheerleading Association       Other: \_\_\_\_\_

**Background Check Authorization:**

I hereby **authorize** the **Acworth Police Department** to conduct a criminal background check, which may be in the files of any federal, state or city criminal justice agency nationwide. This criminal history check is being performed at my request and on behalf of the City of Acworth and/or respective volunteer organizations.

I further understand that the findings of the background check can be shared with the City of Acworth and the volunteer organization. Any applicant who does not meet standards will be notified via the contact information below. Applicants are not to begin volunteering until they have been notified by the city and/or organization of their eligibility through the respective approved volunteer list and/or other designated method of notification.

Specifically, I understand that any of the following convictions or pending charges including, but not limited to (1) Any felony during one's lifetime, (2) Any crime against children during one's lifetime and, or (3) any misdemeanor drug offense within the last ten years will disqualify me from serving as a volunteer or coach for the City of Acworth and/or the respective organizations. The City of Acworth reserves the right to reject any applicants based on the best interest of the city and/or the volunteer organization.

Date of Request \_\_\_\_\_

Full Name Printed \_\_\_\_\_

Sex \_\_\_\_\_ Race \_\_\_\_\_

Maiden Name, Aliases, Name Changes \_\_\_\_\_

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

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

Social Security Number \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email Address \_\_\_\_\_

Signature \_\_\_\_\_

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

**Mandated Reporter Acknowledgement:**

I have received and reviewed the Mandated Reporter Training packet from the City of Acworth. The PDF version is attached, along with a video at [http://www.youtube.com/watch?v=OFkQc7\\_U-Mc](http://www.youtube.com/watch?v=OFkQc7_U-Mc). In-person training dates are posted on [www.acworthparksandrecreation.org](http://www.acworthparksandrecreation.org) on the Volunteer Information tab. I understand that I am required by law to report any suspected instances of child abuse to the proper channels and failure to do so can result in criminal charges. The City of Acworth is not responsible for my failure to report suspected instances of child abuse through the proper channels. By signing below, I acknowledge that the City of Acworth has provided me with the information and resources necessary to properly report suspected child abuse.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**For Office Use Only:**

Date Received: \_\_\_\_\_



Background Check:  Meets Standards

Does Not Meet Standards

Officer Signature \_\_\_\_\_


# Mandated Reporter Training

Acworth Parks, Recreation and Community Resource Department



## Mandated Reporting of a Child

- ☞ The law now requires all employees and volunteers that work with children to report suspected abuse or neglect of a child.
- ☞ The law took effect June 1, 2012 that includes volunteers to be considered Mandated Reporters.




## What is your responsibility with this law?

- ☞ You must report any suspected child abuse to the proper authorities within 24 hours.
- ☞ You must have reasonable cause to believe a child has been abused.
- ☞ You are immune from criminal or civil liability if the report is made in good faith.
- ☞ You can be charged with a MISDEMEANOR if you FAIL TO REPORT ANY SUSPECTED CHILD ABUSE.



## What types of abuse are there?


- ☞ Physical injury inflicted upon a child that is non-accidental
- ☞ Neglect or exploitation of a child
- ☞ Sexual abuse of a child
- ☞ Sexual exploitation of a child



## What are indicators of physical abuse?


- ☞ Bite marks
- ☞ Scratches
- ☞ Welts
- ☞ Bruises in a pattern or that take on the shape of an item
- ☞ Fractures/Dislocations that are unexplained
- ☞ Bald spots on the scalp

\*\*These do not always indicate abuse, but if frequent and unexplained, could be an indicator



## What are indicators of neglect?

- ☞ Hoarding or begging for food
- ☞ Poor hygiene
- ☞ Inappropriate clothing or clothes do not fit
- ☞ Frequent and unexplained absences at events
- ☞ Unmet medical or emotional needs
- ☞ Inadequate supervision



## What are indicators of sexual abuse?

- ☞ Difficulty sitting or walking
- ☞ Pain or itching in the genital area
- ☞ Inappropriate sexual overtones while playing
- ☞ Advanced knowledge of sexual activity
- ☞ Fear of people, places or specific activities
- ☞ Change in patterns of behavior and socialization

## What is sexual exploitation of children?

- ☞ Any sexual activity involving a child in exchange for something of value
- ☞ This can include
  - ☞ Street prostitution
  - ☞ Pornography
  - ☞ Pimping
  - ☞ Escort Services
  - ☞ Internet-based exploitation

## What should you do if a child discloses abuse?

- ☞ Stay calm
- ☞ Do not act visibly shaken or upset
- ☞ Praise the child for telling you
- ☞ Don't ask questions that are leading (example: "Did mommy do this to you?")
- ☞ Do not make any promises to the child (i.e. that you'll keep this a secret)

## Who do you report abuse to?

- ☞ Baseball Association
  - ☞ Report Abuse to League Official on Board
- ☞ Football and Cheerleading Association
  - ☞ Report Abuse to League Official on Board
- ☞ Basketball League
  - ☞ Report Abuse to Recreation Coordinator
- ☞ Summer Camp Counselors
  - ☞ Report Abuse to Camp Director
- ☞ Horizon League
  - ☞ Report Abuse to Special Populations Coordinator

## After the Report

- ☞ Please keep all reports confidential.
- ☞ Your obligated responsibility by law is complete.
- ☞ Don't treat children any differently.
- ☞ Don't forget boundaries when volunteering, especially with social media.

## Thank you for volunteering!

For more information:  
Read the full code of O.C.G.A. §19-7-5 or contact  
The Cobb County Division of Children and Family Services at  
770-528-5000