



Mississippi Department of Wildlife, Fisheries, & Parks

*Law Enforcement
Background Check Completion Form*

Level 1

Applicants Name: _____

Address: _____

Requesting Bureau:

Wildlife

Fisheries

Parks

Support Services

Law Enforcement

Museum

Desired Park Host Location: _____

Background Check Status:

Acceptable

Unacceptable

Officer

Date



Park Host Application

We are pleased that you are interested in the Volunteer Mississippi State Parks Camp Host Program! Before filling out the application at the end of this packet, please review all the information to acquaint yourself with (1) agency policies that apply to Park Host volunteers, (2) the duties and responsibilities of a Park Host, and (3) terms and conditions of the Park Host Program.

To Apply Online: Save this file to your computer, fill out the PDF, attach a photocopy of your driver's license and social security card, and email it to Sarah.Caylor@wfp.ms.gov. The size of the text should automatically adjust as you type, do not worry about the spacing on the document. Once emailed, please give us two weeks to review your information. If selected, a park staff member will contact you to schedule an interview.

Mailing in your Application: Print this document, fill out this form, and attach photocopies of your driver's license and social security card. Mailing in your application will take longer than emailing; please allow us three weeks to review your information. If selected, a park staff member will contact you to schedule an interview.

Mail all necessary documentation to:

*Sarah Caylor, MS State Parks
1505 Eastover Drive,
Jackson, MS, 39211*

The Park Host Program in Volunteer Mississippi State Parks

What is a Park Host?

A Park Host (Male or Female) completes a systematic application and selection process to contribute their time, talent, and skills to a Mississippi State Park without Compensation. A Park Host must be able to fulfill the position's duties for at least three (3) months.

What is the purpose of the Park Host Program?

The Park Host Program in Mississippi State Parks aims to supplement full-time park staff with knowledgeable and responsible volunteers who can provide clerical, maintenance, light housekeeping, and/or public relations skills.

What are the functions of a Park Host?

Job-specific duties and responsibilities differ at each park depending on the park's unique needs. This determination is made by the Park Manager, who is responsible for coordinating the Parks Host schedule. Some functions a Park Host may be required to perform include but are not limited to:

1. **Visitor Services** - Provide information to park visitors at park entry stations, update bulletin boards, lead nature walks for guests on park trails, explain park rules to visitors, and relate the park's history, the state park system, or the particular locale.
2. **Light Maintenance** - Assist with litter pickup around the park, help clean up a shoreline, construct a trail, repair equipment, paint, cut grass, prepare flower beds, or any other maintenance-type tasks waiting to be done. Light maintenance jobs are unlimited. The park Host will receive training and safety guidelines for using park equipment. At all times, the park host must follow the rules and regulations pertaining to equipment use and the safe operation of the park-issued equipment.
3. **Clerical Assistance** - A Park Host may provide clerical assistance, including data entry, booking reservations, filing, and report preparations.
4. **Collection of Fees and Sales**—Register campground cabin/motel or group camp guests and collect fees; man, an entry station post and collect fees or sell tickets/merchandise. Park Hosts who collect money must provide a \$1000 Surety Bond.

How do you become a Park Host?

A. THE APPLICATION PROCESS

All applicants under the Volunteer Mississippi State Parks Host Program must complete the enclosed application package as the initial step in the application process. If a couple is applying for the program, each person must fill out an application.

All selected applications under the Volunteer Mississippi State Parks Host Program must acknowledge receipt of a copy of this information packet (Park Host Program/Mississippi State Parks/ Mississippi Department of Wildlife Fisheries and Parks) by affixing their signature to the appropriate form contained herein.

The application to participate in the program is a commitment on the part of the prospective Park Host to perform assigned duties satisfactorily, meet scheduled hours of service and responsibilities, and abide by the laws and rules that govern the operation of Mississippi State Parks.

B. INSURANCE REQUIREMENT

Park Hosts are required to have proof of medical coverage as a condition of acceptance into the Park Host Program.

C. STATE VEHICLE USE

A Park host may be authorized to drive state vehicles as a part of his/her assigned duties; property and or personal injury liability claims from a third party resulting from a vehicle accident will be covered by the state Tort Claims Act.

D. APPEARANCE AND DEMEANOR OF PARK HOST

Park Hosts must practice the utmost hospitality when interacting with campers and other park visitors. Agency-issued shirts, patches, name tags, or other identification are required while working during assigned service hours and will be provided by the agency.

SPECIAL CONDITIONS FOR PARK HOSTS

1. The Park Host must set a good example by being a model camper by always maintaining their assigned campsite in a clean and sanitary condition. Outside structures and facilities will not be permitted. No dog pens, horse corrals, poultry cages, or other similar facilities for pets or animals will be allowed. Pets shall always be kept under physical restraint. Upon completion of the volunteer service, the Park Hosts' camping equipment must be removed, and the campsite must be left clean and in good repair.
2. The Park Host shall be available at the campground for a minimum of 4 nights per week, including weekends and holidays, as designated by the Park Manager.
3. Park Hosts will be scheduled for at least 24 hours of service time per week for a minimum of twelve weeks and may not exceed 24 weeks per year. Couples may divide the 24 service hours between the two spouses.
4. The Park Host will report all disturbances or problem campers to park staff. **Park Hosts are not entitled to discipline or apprehend any park violators.**
5. The Park Host will keep written reports of complaints and criticisms of park facilities as relayed by other park visitors. The Park Host will report situations that could affect the health and safety of visitors and any maintenance items that need attention.
6. Park Host shall not have firearms in their possession while on duty at the state park.
7. The Park Host shall not consume alcohol while on duty at the state park.
8. The Park Manager shall be contacted and given advance notice of absence or illness.
9. Overnight visits with the Park Host by dependents, relatives, and friends are discouraged but may be permitted by the park manager on a case-by-case basis.

Park Host Application

Mississippi State Parks, Mississippi Department of Wildlife, Fisheries and Parks

Note: Application for a position as a Park Host shall serve as a Release of the Mississippi Department of Wildlife, Fisheries, and Parks from any and all liability to the Park Host for any injury or loss the Park Host may incur as a result of their services as a Park Host.

Name: _____
First Middle Last

Permanent Address: _____
Street / P.O. Box City
_____ County State Zip Code

SSN: _____ **Date of Birth:** _____

Cell Phone: _____ **Email:** _____

Will you have a pet? _____
Valid proof of rabies vaccination is required.

Volunteer Service References

Agency Name: _____

Address: _____

Dates of Service: _____ **Phone:** _____

Immediate Supervisor: _____

Brief Description of Duties _____

Agency Name: _____

Address: _____

Dates of Service: _____ Phone: _____

Immediate Supervisor: _____

Brief Description of Duties _____

Agency Name: _____

Address: _____

Dates of Service: _____ Phone: _____

Immediate Supervisor: _____

Brief Description of Duties _____

SKILL RATING: Please rate your level of knowledge, skill, training, and experience in the following areas using the numerical scale below.

1 = Little to no experience

2 = Intermediate-level experience

3 = Extensive working knowledge and experience

ADMINISTRATIVE FUNCTIONS:

_____ Information Desk

_____ Record Keeping

_____ Employee Supervision

_____ Cash Sales

_____ Computer Data Entry

_____ Concession Sales

PUBLIC RELATIONS:

_____ Public Speaking

_____ Nature Walks

_____ Campfire Programs

_____ Wildlife and Plant Identification

CAMPING:

- Recreational Vehicle Camping
- Tent Camping
- Backwoods or Dispersed Camping

LANDSCAPING:

- Trail Development or Upkeep
- Horticulture

OTHER:

- Law Enforcement
- First Aid
- CRP

MAINTENANCE:

- Plumbing
- Electrical
- Automotive
- Carpentry
- Other (please specify)

Additional training or certifications you would like to provide:

Dates you will be available for the Park Host Program:

Dates or times you cannot serve:

Have you had any major medical problems in the past five years? If yes, please explain:

PRIOR EMPLOYMENT HISTORY

Most Recent Employment Starting Date: _____

Supervisor Name and Number: _____

Name and Address of Employer: _____

Job Title: _____

Duties: _____

Previous Employment Starting Date: _____

Supervisor Name and Number: _____

Name and Address of Employer: _____

Job Title: _____

Duties: _____

Previous Employment Starting Date: _____

Supervisor Name and Number: _____

Name and Address of Employer: _____

Job Title: _____

Duties: _____

MILITARY RECORD

Have you been in the Military, Reserves, or National Guard? _____ YES _____ NO

If Yes, please provide the following information: _____

Starting Date of Service: _____ To: _____

Branch of Service: _____

Commanding Officer: _____

Were you honorably discharged? _____ YES _____ NO

Please include a copy of your United States Discharge to this application

Have you ever been a defendant in a Court Martial? _____ YES _____ NO

HISTORY OF CIVIL CONVICTIONS

Has a Civil Judgement ever been issued against you? _____ YES _____ NO

Have you ever been found guilty or pled guilty or no contest to a felony charge or misdemeanor?
_____ YES _____ NO

Have you ever been required to submit to a polygraph examination or a drug and alcohol screening that resulted in disciplinary action? _____ YES _____ NO

What is your driver's license number? _____

Has your driver's license ever been suspended or revoked? _____ YES _____ NO

If yes, please explain: _____

Name of State Issuing Driver's License: _____

If you are required to operate a motor vehicle, are you able to do so? _____ YES _____ NO

List any Moving Traffic Citations (not parking tickets) by date, agency issuing ticket, and the disposition in the last 24 months.

Have you ever been addicted to, hospitalized, or undergone court-ordered treatment for substance or alcohol abuse? YES NO

Have you ever been refused a Surety Bond, or turned down a job that required a Surety Bond? YES NO

Have you ever been involuntarily terminated from employment or asked to resign for any reason? YES NO

Have you ever had a certification, license, or privilege revoked, removed, suspended, or involuntarily relinquished under state, federal, or other laws? YES NO

Have you ever received any alternative to sentencing, such as probation before judgment, pretrial diversion, non-adjudication, guilt, or an expungement on your record?
 YES NO

A “YES” to any of the questions above does not automatically bar anyone from consideration for the Volunteer Mississippi State Parks Park Host Program. However, a “YES” answer must be explained in detail, typed or printed in ink on a separate document, and signed/dated by you. You must attach all related court documents to your explanation. All crimes must be reported, including minor drug and alcohol-related convictions. All traffic offenses involving drugs or alcohol must be reported regardless of the fine. Any alternative to sentencing that has been decreed by any political subdivision must be reported, including but not limited to probation, fines, restitution, or community service.

I certify that all information on this application and any attached document is correct and complete to the best of my knowledge. I authorize the Mississippi Department of Wildlife Fisheries and Parks to verify this information. I understand that false statements of material fact in my application are cause for termination of my participation in this or any future Mississippi Department of Wildlife, Fisheries, and Parks programs. I hereby consent to the Mississippi Department of Wildlife Fisheries and Parks conducting a criminal background investigation of me and performing a driver's license record search. I understand that I will not be an employee of the state of Mississippi or the Department of Wildlife Fisheries and Park, that I will not receive compensation, nor will I be covered under Workers Compensation. I am applying to be a volunteer under the Volunteer Mississippi State Parks Park Host program.

Signature

Date

AUTHORIZATION TO RELEASE VERIFY APPLICANT INFORMATION

Please read the following release form carefully and enter your signature, current address, and date in the designated spaces. **FORM MUST BE NOTORIZED.**

Date: _____

TO WHOM IT MAY CONCERN:

Having made an application as a VOLUNTEER PARK HOST with the State of Mississippi, Department of Wildlife Fisheries and Parks and desiring them to be informed of my past record and character, whether it be financial, academic, military, employment, judicial, or personal reference. I, the undersigned, do hereby authorize the release of all such information, privileged or otherwise, to the Department of Wildlife Fisheries and Parks and its representatives. I understand that an investigation will be undertaken into my past record and character. I hereby release all contributing parties of such information from any charges or liability whatsoever because of the furnishing of said information.

Signature

Address

Phone Number

State of _____

County of _____

Sworn To and Subscribed Before Me This _____ Day of _____

Notary Public

PERSONAL REFERENCES

1.	_____	_____
	Name	Phone Number

	Relation to Applicant	
2.	_____	_____
	Name	Phone Number

	Relation to Applicant	
3.	_____	_____
	Name	Phone Number

	Relation to Applicant	
4.	_____	_____
	Name	Phone Number

	Relation to Applicant	
5.	_____	_____
	Name	Phone Number

	Relation to Applicant	