



School(s) Where You Wish To Volunteer

Student's Name

VOLUNTEER APPLICATION FORM

Section 1:

This section must be completely filled out or this application will be rejected.

Full Legal Name: first middle last			Date of Birth:
Address:		City and Zip:	
Home Phone:		Work Phone:	
E-mail Address:		Cell Phone:	
Alias/Maiden Name(s):			
In Case of Emergency please notify:			Phone:

Section 2:

- Senior Citizen/RSVP High School Student Other _____
 Parent Community Member

Previous Volunteer Experience:							
Area in which you would like to volunteer:							
Reading <input type="checkbox"/>	Math <input type="checkbox"/>	Community Resource <input type="checkbox"/>	Computers <input type="checkbox"/>	Arts <input type="checkbox"/>			
World Language <input type="checkbox"/>	Senior Projects Judge <input type="checkbox"/>	Clerical <input type="checkbox"/>	Other <input type="checkbox"/>				
Grade Level Preferred:	K-3 <input type="checkbox"/>	4-5 <input type="checkbox"/>	6-8 <input type="checkbox"/>	9 -12 <input type="checkbox"/>	Special Ed <input type="checkbox"/>		
Days of Availability:	Mon <input type="checkbox"/>	Tues <input type="checkbox"/>	Wed <input type="checkbox"/>	Thu <input type="checkbox"/>	Fri <input type="checkbox"/>	Wknd <input type="checkbox"/>	Other <input type="checkbox"/>
Times of Availability:	Morning <input type="checkbox"/>	Afternoon <input type="checkbox"/>	Evening <input type="checkbox"/>	Other <input type="checkbox"/>			

If you believe you might have difficulty performing any of the duties of the volunteer position for which you are applying, can you suggest any reasonable accommodations which might enable you to perform the duties of the position?

Please completely fill out (front and back) and sign the back of this form
Attach a copy of your current driver's license (or state issued identification)

Section 3:

In accordance with Chapter 43.43 RCW applicants and prospective volunteers are required to complete this disclosure form. In addition, a background check will be performed on all applicants through the Washington State Patrol. Volunteer approval is conditional upon a satisfactory background investigation. A conviction record will not necessarily bar you from serving as a volunteer in the Sumner School District.

Answer YES or NO to each listed item. If the answer is YES to ANY item, explain in the area provided indicating the charge or finding, the date and the court(s) involved.

1. Have you ever been convicted of any crime(s) against children or other persons?

Yes	No	Charge	Yes	No	Charge
		Arson (1 st degree)			Incest
		Assault (simple)			Indecent Liberties
		Assault (1 st , 2 nd or 3 rd degree)			Kidnapping (1 st or 2 nd degree)
		Burglary			Malicious Harassment
		Child Abuse/Neglect(defined RCW 26.44.020)			Manslaughter(1 st , 2 nd , 3 rd degree)
		Child Molestation (1 st , 2 nd , 3 rd degree)			Murder (1 st or 2 nd degree or aggravated)
		Child Buying or Selling			Patronizing a Juvenile Prostitute
		Child Abandonment			Promoting Pornography
		Child Abuse (violating restraining order)			Promoting Prostitution
		Communication with a Minor			Prostitution
		Criminal Abandonment			Rape of a child (1 st , 2 nd or 3 rd degree)
		Criminal Mistreatment (1 st , 2 nd or 3 rd degree)			Rape (1 st , 2 nd or 3 rd degree)
		Custodial Assault			Robbery (1 st or 2 nd degree)
		Custodial Interference (1 st , 2 nd or 3 rd degree)			Selling or Distributing Erotic Materials to a Minor
		Custodial Sexual Misconduct (1 st or 2 nd degree)			Sexual Exploitation of Minors
		Extortion			Sexual Misconduct with a Minor (1 st or 2 nd degree)
		Endangerment with a Controlled Substance			Unlawful Imprisonment
		Felony Indecent Exposure			Vehicle Homicide

2. Have you been convicted of crimes relating to financial exploitation if the victim was a vulnerable adult? (Crimes relating to financial exploitation means: a conviction for 1st, 2nd or 3rd degree theft; 1st or 2nd degree robbery, forgery, or as renamed. A “vulnerable adult” is a person sixty years of age or older who has the functional mental or physical inability to care for him/her self or patient in state hospital as defined in chapter 72.23 RCW. Yes No If answer is yes, please explain:

3. Have you been found in any dependency action under RCW 13.34.040 or found in court in domestic relations proceeding under Title 26 RCW to have sexually abused or exploited any minor? Yes No If answer is yes, please explain:

4. Have you been found by a court in a protection proceeding under Chapter 74.34 RCW or any disciplinary board final decision to have sexually or physically abused or exploited any minor or developmentally disabled person or to have abused or financially exploited a vulnerable adult? Title 26 RCW to have sexually abused or exploited any minor or to have physically abused any minor? Yes No If answer is yes, please explain:

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I have read the information contained herein and pursuant to RCW9A.72.085. I certify under penalty of perjury under the laws of the State of Washington the foregoing is true and correct. I authorize the Sumner School District to make such investigations and inquiries as may be necessary in arriving at a volunteer assignment decision. I hereby release employers, schools or persons from all liability in responding to such inquiries in connection with my application. I understand that any voluntary assignment may be revoked if false or misleading information is given in my application or interview. I understand that I am required to abide by all policies, procedures and regulations of the district.

Applicant's Signature

Date

Parent's Signature (if applicant is under 18)

Date