

## Trout Lake School District

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### Volunteer Application Instructions

Thank you for your willingness to volunteer at Trout Lake School District. To ensure the safety of our students and staff, you must complete this application packet and be **APPROVED** by the District Office **BEFORE** you can begin your volunteer assignment.

Here is some information on how to complete the volunteer application packet:

#### 1. Volunteer Application Form

*This form provides basic information about you and your volunteer interest.*

- Remember to sign and date at the bottom of the page to indicate that all the information on your form is accurate and that you have read, understood, and agreed to the guidelines included in the handbook.

#### 2. Washington State Patrol (WSP) Criminal History Check Form

*All volunteer applicants must have a criminal history check performed through Washington State Patrol.*

- Please **complete sections C and D** of this form.  
**Section C:** Include any maiden or former names, and nicknames.  
**Section D:** Sign and date the form to indicate that the information you provided is accurate. (Fingerprints are not required).

#### 3. Disclosure Form

*This form provides information about any past or current criminal or civil offenses. It also gives permission for the district to conduct the background check.*

- Please answer each question completely and truthfully. Add an extra sheet of paper if necessary.
- Sign and date the form to indicate that the information you provided is accurate.

#### 4. Review Your Forms

Double-check to make sure you have filled out each form completely and that you have signed and dated all forms in the packet.

#### 5. Provide a Copy of Driver's License

Attach one copy of your current driver's license, or other photo identification that includes your legal name and date of birth. This helps to verify identity during the background check.

**Thank you for your interest in volunteering at Trout Lake School!**

## Trout Lake School District

Volunteer Application

Today's Date \_\_\_\_\_

### Application Information

This is a: \_\_\_\_\_ New Application \_\_\_\_\_ Renewal

I am a: \_\_\_\_\_ Parent/Guardian \_\_\_\_\_ Relative \_\_\_\_\_ Community Member

### Personal Information

Full Legal Name \_\_\_\_\_  
First Middle Last

Maiden name(s)/Nicknames/Aliases \_\_\_\_\_

Date of Birth \_\_\_\_\_ Birthplace (city and state or country) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

E-mail \_\_\_\_\_ Phone # \_\_\_\_\_

Languages spoken (besides English) \_\_\_\_\_

Employer \_\_\_\_\_

Name of child (ren)/student(s) \_\_\_\_\_

### Emergency Contact Information

Name \_\_\_\_\_ Phone # \_\_\_\_\_

### Volunteer Interests and Activities

Grade(s) where I wish to volunteer \_\_\_\_\_

I plan to volunteer: \_\_\_\_\_ Regularly \_\_\_\_\_ Once in a while

Volunteer activities (ex: Field trip chaperone, math help, tutoring, etc.) \_\_\_\_\_

Do you require any accommodations? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, what is the accommodation? \_\_\_\_\_

All information in this application is accurate to the best of my knowledge. As a condition of being permitted to volunteer for Trout Lake School District, I freely accept and voluntarily assume the risks of personal injury or property damage that may result from my volunteer experience, including but not limited to, any activity while volunteering on school property. I hereby agree to waive any and all claims arising out of any such injury or damage.

**Applicant signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Please Attach One Copy of Your Driver's License**

Please return all completed forms to Trout Lake School, PO Box 488, Trout Lake, WA 98650. Make sure you attach one copy of your driver's license.

# Trout Lake School District

## Volunteer Application Disclosure Form

*Please answer the following questions honestly and completely and sign the declaration of the following page. Attach a separate sheet if additional space is needed.*

The Washington State Legislature has helped us to assure security for children by allowing background checks on all people who work with children in schools. Trout Lake School District supports this requirement. Because we care about our students, all volunteers must complete this form and undergo a Washington State Patrol Criminal Background Check.

Any falsification, omission, deliberate misrepresentation or failure to complete any part of this form is grounds for rejection as a volunteer. Trout Lake School District reserves the right to reject any applicant for any legitimate, nondiscriminatory reason. **NOTE:** Criminal convictions DO NOT necessarily restrict you from volunteering. Decisions about volunteer approval status are made on a case by case basis.

1. Have you ever been convicted of a crime? You must include any and all past or current criminal offenses.

\_\_\_\_\_No      \_\_\_\_\_Yes

If "yes," please identify the crime(s), provide the date(s) of the conviction(s), the names of the court(s), (e.g., King County Superior Court) and the sentence(s) imposed.

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2. Have you ever had findings made against you for domestic violence, abuse, sexual abuse, neglect, exploitation of a child in any legal proceeding? These proceedings include judicial or administrative proceedings as well as findings by Department of Social and Health Services (DSHS) or the Department of Health that you have not challenged or appealed.

\_\_\_\_\_No      \_\_\_\_\_Yes

If "yes", please identify the specific finding(s), which agency or court made the finding(s), the date(s) of the finding(s) and the penalty(ies) imposed.

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3. Do you currently have any criminal charges pending against you? Are you presently under investigation for possible criminal charges?

\_\_\_\_\_No      \_\_\_\_\_Yes

If "yes," please provide pertinent details to enable Trout Lake School District to evaluate, including the charge(s), date(s), jurisdiction(s) and status.

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4. Other than any matter listed on the previous page, is there any fact or circumstance involving you and your background that would call into question your being entrusted with the supervision, guidance and care of young people, vulnerable adults or developmentally disabled persons?

\_\_\_\_\_No      \_\_\_\_\_Yes

If "yes," please explain.

\_\_\_\_\_  
\_\_\_\_\_

**Disclosure Statement:**

I hereby authorize and consent to Trout Lake School District, its agents and employees, to inquire into and undertake whatever background check of me that Trout Lake School District, in its sole discretion, deems appropriate to determine my fitness to serve as a volunteer. I understand the inquiry may include computer database searches, interviews with people acquainted with me, employers or references. I understand the information will be kept confidential to the extent permitted by law, but that Trout Lake School District, as a public entity, is subject to the State Public Records Act, RCW 42.56 et seq and the exemptions provided there under, as amended. I release and hold harmless Trout Lake School District, its agents and employees, and all references or other sources of information from any and all liability in obtaining or providing such information about me. I agree that if Trout Lake School District determines, in its sole discretion, that I have provided false or incomplete information in response to the above questions, or the District decides, with or without cause, not to approve or retain me as a volunteer for whatever reason, Trout Lake School District may, without notice or other process, reject my application to serve as a volunteer.

Pursuant to RCW 9A.72.085, I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

**Date**\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ **Signature**\_\_\_\_\_

**Printed Name**\_\_\_\_\_

**Home Address**\_\_\_\_\_

**City and State Where Signed**\_\_\_\_\_

Please return all completed forms to Trout Lake School District, PO Box 488, Trout Lake, WA 98650. Make sure to attach one copy of your driver's license.