

Name:

Other Names Used / Maiden:

School:	

Male

(Middle)

Female

## South Kitsap School District Volunteer Application

Nurturing growth, Inspiring achievement, Building community

Each individual school will develop a list of prospective volunteers who may have unsupervised access to children during school or at school sponsored events. All persons on that list will have successfully completed this volunteer application and background check through the Washington State Patrol or an approved committee appeal. Volunteer applications are valid for a period of no more than two years.

Information on this form is used for volunteer purposes only. Please type or print clearly.

Date of Birth: (required)		
Mailing Address:(Street)	(P.	O. Box or Apt. #)
	Email:	
(City)	(Zip)	
Phone: (Home)		(0.11)
		(Cell)
Students:	<del></del>	<del></del>
Are you currently, or have you ever been	n an employee or substitute of the So	outh Kitsap School District?
Yes ☐ No ☐ If so, pl	ease provide the dates:	
	,	
Applicant's Signature:	Da	ate:
		Please fill out other side >
Please return complete	ed forms to your school's Vo	olunteer Coordinator
To be completed by Volunteer Co	·	
·	ordinator or office staff upon re	eceipt.
To be completed by Volunteer Coe  I have attached a copy of this volunteer	ordinator or office staff upon re	eceipt. he name and date of birth listed above.
To be completed by Volunteer Co	ordinator or office staff upon re	eceipt.
To be completed by Volunteer Coe  I have attached a copy of this volunteer	ordinator or office staff upon re	eceipt. he name and date of birth listed above.
To be completed by Volunteer Coe  I have attached a copy of this volunteer	ordinator or office staff upon reer's photo identification and verified to the determinant of the determinan	eceipt. he name and date of birth listed above.
To be completed by Volunteer Coe  I have attached a copy of this volunteer  Authorized Signature:  To be completed by Volunteer Coe  As of this date, the applicant named abo	ordinator or office staff upon receiver's photo identification and verified to Date ordinator ONLY.  Description of the properties of the	eceipt. he name and date of birth listed above.
To be completed by Volunteer Code  I have attached a copy of this volunteer  Authorized Signature:  To be completed by Volunteer Code As of this date, the applicant named about RCW 43.43.830 through 43.43.845.	ordinator or office staff upon receiver's photo identification and verified to Date ordinator ONLY.  Description of the Date of Date ordinator or office staff upon received and verified to Date or ordinator or office staff upon received and verified to Date or ordinator or office staff upon received and verified to Date or or office staff upon received and verified to Date or or office staff upon received and verified to Date or or office staff upon received and verified to Date or or office staff upon received and verified to Date or or office staff upon received and verified to Date or or office staff upon received and verified to Date or office staff upon re	eceipt. he name and date of birth listed above.

## The following persons shall be disqualified from volunteering in South Kitsap School District:

- 1. Anyone who makes a false statement on the volunteer paperwork or fails to disclose criminal convictions.
- 2. Anyone convicted of a misdemeanor or gross misdemeanor committed within the previous five years. This disqualification does not apply to simple misdemeanor traffic offenses unless the offense was drug or alcohol related.
- 3. Anyone convicted of a felony committed within the previous seven years.
- 4. Anyone convicted of more than one criminal offense, regardless of when each crime was committed. This disqualification does not apply where a person was convicted of more than one count arising from the same conduct committed at the same time.
- 5. Anyone convicted of any "crime against children or other persons" as defined in RCW 43.48.830(5).
- Anyone convicted of a crime which would disqualify the person from employment by the district under RCW 28A.400.320 as now existing or hereafter amended, regardless of when the crime was committed.
- Anyone convicted of committing or attempting to commit any crime of violence or of a sexual nature against a minor not listed above, regardless of whether the crime of conviction was a misdemeanor, gross misdemeanor, or felony, and regardless of when the crime was committed.

Please answer the following questions completely and sign the declaration.

1. Have you been convicted of ANY crime (misdemeanor or felony) within the past 10 years? This includes DUI or negligent driving and convictions in other states.				
The mended 20101 negligent arring and control	Yes No			
If "Yes", please identify the offense(s), provide Kitsap County Superior Court), and the sentence impo	the date(s) of the conviction(s), the name of the court (e.g.			
exploitation, or financial exploitation of a child in a or administrative proceedings as well as findings the Department of Health that you have not challen	or domestic violence, abuse, sexual abuse, neglect, any legal proceeding? These proceedings include judicially Department of Social and Health Services (DSHS) or neged or appealed.  Yes No which agency or court made the finding(s), the date(s) of the			
Are you presently under investigation for possible	charges or warrants for your arrest pending against you criminal charges? Yes \( \square\) No \( \square\) able the South Kitsap School District to evaluate, including the			
and undertake whatever background check of me that appropriate to determine my fitness as a volunteer.	up School District, its agents and employees, to inquire into t South Kitsap School District, in its sole discretion, deems			
I release and hold harmless the South Kitsap S references or other sources of information from any an about me.	School District; its agents and employees, and all all liability in obtaining or providing such information			
incomplete information in response to the above quest	ermines, in it's sole discretion, that I have provided false or cions, or the District decides, with or without cause, not to itsap School District may, without notice or other process,			
Applicant's Signature:	Date:			