



Volunteer Information Packet

Name _____ Date _____

Address _____ City _____

Home Phone _____ Work Phone _____

References

Name _____ Phone Number _____

Name _____ Phone Number _____

Name _____ Phone Number _____

Emergency Contact _____ Phone Number _____

- I am a: Parent Grandparent Retired Community Member
 Business Person College Student Other

Referred by _____

Special Talents/Interests _____

Requested Volunteer Activity _____

Grade Level/Days/Hours Preferred _____

Placement _____
Supervisor _____ Days/Hours _____
Location _____
Supervisor _____ Days/Hours _____
<input type="checkbox"/> References Checked

WASHINGTON STATE PATROL

Identification and Criminal History Section

PO Box 42633

Olympia WA 98504-2633

(360) 534-2000

<https://watch.wsp.wa.gov>



REQUEST FOR CONVICTION CRIMINAL HISTORY RECORD (RCW 10.97)

INSTRUCTIONS: PLEASE COMPLETE THIS FORM WHEN REQUESTING **CONVICTION** CRIMINAL HISTORY RECORD INFORMATION FROM THE IDENTIFICATION AND CRIMINAL HISTORY SECTION. MAIL REQUEST TO ADDRESS NOTED ABOVE WITH \$17.00 CHECK OR MONEY ORDER OR COME TO OUR OFFICE AT 3000 PACIFIC AVENUE, OLYMPIA, WA. **NOTE: IT MAY TAKE 7 TO 14 BUSINESS DAYS FOR RESPONSE WHEN MAILED. FOR AN IMMEDIATE RESPONSE, ACCESS OUR WEB SITE LISTED ABOVE TO CONDUCT YOUR CRIMINAL HISTORY REQUEST FOR \$10.00 USING A CREDIT CARD.**

NOTARIZED LETTERS ARE AN ADDITIONAL \$5.00 PER NOTARY SEAL _____ Notarized Letter(s)
(available by mail only)

NOTE: The requested record information is furnished solely on the basis of name and/or description similarity with the subject of your inquiry. Positive identification or non-identification can only be effected upon receipt of fingerprints. Applicant may be advised of inquiry.

A SUBJECT INFORMATION: (Please type or print clearly)

Applicant's Name: _____
Last First Middle

Alias/Maiden Name: _____

Date of Birth: _____ Sex: _____ Race: _____
Month/Day/Year

B REQUESTOR INFORMATION: (Please type or print clearly)

DATE: ____/____/____ (print) Name/Title of Requestor Requestor's Signature
Mo. Day Yr.

Receive background results electronically

Phone No. (____) _____

Email address

Password (must be at least 8 characters)

REQUESTOR'S ADDRESS: (type or print clearly)

Right Thumb Print (Optional)

Name

Address

City State ZIP Code

Disclosure Form for Volunteer Pursuant to Chapter 43.43 RCW

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

1. Have you ever been convicted of any crimes against persons as defined in Section 43.43 RCW and listed as follows: *Aggravated murder; first or second degree murder; first or second degree kidnapping; first, second, or third degree assault; first, second, or third degree assault of a child; first or second degree rape; first, second, or third degree rape of a child; first or second degree robbery; first degree arson; first degree burglary; first or second degree manslaughter; first or second degree extortion; indecent liberties; incest; vehicular homicide; first degree promoting prostitution; communication with a minor; unlawful imprisonment; simple degree criminal mistreatment; child abuse or neglect as defined in RCW 26.44.020; first or second degree custodial interference; malicious harassment; first, second, or third degree child molestation; first or second degree sexual misconduct with a minor; patronizing a juvenile prostitute; child abandonment; promoting pornography; selling or distributing erotic material to a minor; custodial assault; violation of child abuse restraining order; child buying or selling; prostitution; felony indecent exposure; or any of these crimes as they may be renamed in the future?*

Yes No If yes, explain below: _____

2. Have you ever been convicted of any related to financial exploitation if the victim was a vulnerable adult as defined in Chapter 43.43.830(6) RCW amended, and listed as follows: *First, second, third degree theft; first or second degree robbery; forgery; or any of these crimes as they may be renamed in the future?*

Yes No If yes, explain below: _____

3. Have you ever been found in any dependency action under RCW 13.34.040 to have sexually assaulted or exploited any minor or to have physically abused any minor?

Yes No If yes, explain below: _____

4. Have you ever been convicted of any crime for any violation of any law (*excluding minor traffic violations*)? For the purposes of this question, the term "convicted" means and includes: (1) all instances in which a plea of guilty or nolo contendere is the basis for the conviction and (2) all proceedings in which a charge has been deferred from prosecution or the sentence has been suspended or deferred. A conviction does not necessarily exclude you from employment with the Centralia School District.

Yes No If yes, explain below:

5. Have you ever been found by a court in a domestic relations proceeding under Title 26 RCW to have sexually assaulted or exploited any minor or to have physically abused any minor?

Yes No If yes, explain below: _____

6. Have you ever been found in any disciplinary board final decision, or by the director of the department of licensing in the following businesses or professions, to have sexually or physically abused any minor or developmentally disabled person or to have abused or financially exploited any vulnerable adult: (*chiropractic, dentistry, dental hygiene, naturaphy, massage, midwifery, osteopathy, physical therapy, physicians, practical nursing, registered nursing, psychology, real estate brokers, and salespersons*)?

Yes No If yes, explain below: _____

7. Have you ever been found by a court in a protection proceeding under Chapter 74.34 RCW to have abused or financially exploited a vulnerable adult?

Yes No If yes, explain below: _____

Pursuant to RCW 9A.72.085, I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. (*You may be required to resign this document in the presence of authorized personnel/designee only, once you have been hired by the Centralia School District.*) I authorize the Centralia School District to inquire with former employers or references and obtain any and all information regarding my job related background. I release and discharge the Centralia School District, my former employer and all references, from any and all liability in obtaining or disclosing such information. I agree that if I have provided false or incomplete information, the district may, at its sole discretion, without further notice or due process procedures, terminate my employment contract. If such action is taken by the district, the contract shall be deemed void from its inception.

Name (*please print*) _____ Date _____

Signature _____