



EMPLOYEE SERVICES

C. L. Booth Education Service Center
1215 W. Lewis Street • Pasco, Washington 99301

(509) 543-6700 • FAX (509) 543-6728
www.psd1.org

PASCO SCHOOL DISTRICT VOLUNTEERS

AUTHORIZATION TO CONDUCT WASHINGTON STATE PATROL BACKGROUND CHECK

Thank you for volunteering in the Pasco School District

In order to provide a safe environment for students, Board Policy 5430 requires certain volunteers to undergo a background check through the Washington State Patrol. Volunteers with unsupervised access to students will also be asked to fill out and sign an Applicant Disclosure Form and may be asked to provide fingerprints. The district may decline the services of any volunteer at any time. *This information will be kept strictly confidential and will NOT be shared with any other organizations or entities unless required by law.*

The undersigned authorizes the Pasco School District to conduct a background check through the Washington State Patrol and provides the following information strictly for purposes of the authorized background check:

Full Name: _____ (Required)
(PLEASE PRINT) First Middle Last

Other names you have used: _____ (Optional)*

Current Address: _____ (Required)

Phone Number: _____ (Required)

Date of Birth: _____ (Required)

Social Security Number: ____-____-____ (Optional)*

Signature

Date

***Note regarding "optional" information:** We request this information in order to avoid finding duplicate entries in the State Patrol system. You are not required to provide this information, and choosing not to provide the information will not prevent you from volunteering. If you choose to provide the information, it will be held strictly confidential and will not be disclosed to a third party unless required by law. Search records available upon request within 10 days of submission. **Approved volunteer status is only good for two years. After two years, volunteers must resubmit this form for approval.**

Name of student: (if applicable) _____
Teacher's Name (if applicable) _____ School _____
Reason for volunteering (field trip, event): _____

District or Building Administrator _____

PASCO SCHOOL DISTRICT NO. 1
1215 W. Lewis Street
Pasco, WA 99301
APPLICANT DISCLOSURE

In accordance with RCW 43.43.830, applicants and prospective volunteers are required to complete this disclosure form. In addition, applicants who have been offered employment or volunteer assignments, as outlined in said law, will be required to complete a Request For Criminal History form. These requests will be forwarded to the Washington State Patrol for disclosure of any applicable charges or findings. Applicants may be employed on a conditional basis pending completion of such background investigation. Volunteers will be retained on the same conditional basis.

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 crimes against persons as defined in RCW 43.43.830, and listed as follows: Aggravated murder; first, second or third degree murder; first or second degree kidnapping; first, second or third degree assault; first, second or third degree rape; first, second or third degree statutory rape; 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 assault; sexual exploitation of minors; first or second 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?

ANSWER _____ IF YES, EXPLAIN BELOW:

2. Have you ever been found in any dependency action under RCW 13.34.030 (2) (b) to have sexually assaulted or exploited any minor or to have physically abused any minor?

ANSWER _____ IF YES, EXPLAIN BELOW:

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

ANSWER _____ IF YES, EXPLAIN BELOW:

4. Have you ever been found in any disciplinary board final decision to have sexually abused or exploited any minor or to have physically abused any minor?

ANSWER _____ 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.

Applicant Signature _____

Date _____ Place Signed _____

*Witness Signature _____

(Must be witnessed by Staff member)

Date _____ Position _____

INVESTIGATION CONSENT AND RELEASE OF LIABILITY

I authorize the Pasco School District to make any investigation of a personal, educational, vocational, or employment history. I further authorize any former employer, person, firm, corporation, educational or vocational institution, or government agency to provide the Pasco School District with information and absolve such entities from any and all liability as a result of furnishing this information. Failure to provide accurate responses to questions on the application may result in non-hire or dismissal.

Signature _____ Date _____