Volunteer Clearance
Application

Return to:
Volunteer Services
CONFIDENTIAL

Spokane Public Schools complies with all federal and state rules and regulations and does not discriminate in the admission, treatment, employment, or access to its programs or activities on the basis of age, sex, marital status, race, color, creed, national origin, the presence of any sensory, mental, or physical disability, to the use of a trained guide or service animal by a person with a disability, sexual orientation including gender expression or gender identity, or honorably discharged veteran or military status. This holds true for all students who are interested in participating in educational programs and/or extracurricular school activities, and provides equal access to the Boy Scouts and other designated youth groups.

Inquiries regarding compliance and/or grievance procedures may be directed to the school district’s Title IX/Staff Civil Rights Officer, ADA Officer, Harassment, Intimidation, Bullying (HIB)/Student Civil Rights Officer and/or 504 Compliance Officer.

The following Civil Rights Compliance Coordinators have been designated to handle questions and complaints of alleged discrimination:

• Civil Rights Coordinator and Title IX Coordinator: Jodi Harmon, 509.354.7344
• Section 504 Coordinator: Melanie Smith, 509.354.7284
VOLUNTEER DISCLOSURE STATEMENT

In order to provide the safest environment for our children, all volunteers are required to complete this disclosure. Information provided will be kept confidential and will not necessarily bar you from volunteering in the district. If you prefer to place this sheet in a sealed envelope prior to submitting it with your volunteer application, please do so. It will be reviewed by Volunteer Services in the Administration Building and not by your building volunteer coordinator.

NAME: __________________________________________ DATE OF BIRTH: ______________________

Please provide a thorough explanation for each “Yes” answer in the space provided on the following page. Include the nature, date and location of the charge(s) and any further details explaining the situation. Applications that do not provide a thorough explanation will be returned for completion. To expedite the clearance process, please include copies of any legal documentation that would apply to any dropped or dismissed charges.

☐ YES ☐ NO 1. Have you ever had an educational or job related license, permit, or certificate revoked or suspended, or been subject to discipline, from a licensing or certification agency, such as the State Board of Education or Professional Educators Standards Board, in this State or any other jurisdictions?

☐ YES ☐ NO 2. Have you ever been on a plan of improvement or placed on probation with any employer?

☐ YES ☐ NO 3. Have you ever been placed on administrative leave pending investigation of allegations of misconduct with any employer?

☐ YES ☐ NO 4. Have you ever been disciplined, discharged, non-renewed or threatened to be disciplined, discharged or non-renewed from any employment (including regular, part-time, and extracurricular positions)

☐ YES ☐ NO 5. Have you ever resigned or otherwise separated from any employment in order to avoid discipline, discharge, nonrenewal, threatened discipline, discharge or nonrenewal, or perceived future discipline, discharge or nonrenewal?

☐ YES ☐ NO 6. Are you presently charge with, but not convicted of, any crime? Exclude civil infractions such as minor traffic citations. DUI and DWI convictions are not minor traffic citations and must be reported. If yes, include an explanation of the nature of the charge, place, date, and court. A pending criminal charge will not necessarily bar you from volunteering in the District.

☐ YES ☐ NO 7. Have you ever been convicted of any crime? (The term “convicted” means all adverse dispositions, including a finding of guilty, a plea of guilty or nolo contendere, an Alford plea, a stipulation to the facts, a deferred or suspended sentence, or a deferred prosecution. Exclude civil infractions, such as minor traffic citations. DUI and DWI convictions are not minor traffic citations and must be reported.)

☐ YES ☐ NO 8. 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? (Vulnerable adult means adults of any age who lack the functional, mental or physical ability to care for themselves.)

☐ YES ☐ NO 9. Have you ever been convicted of any crime involving the manufacture, delivery, or possession with intent to manufacture or deliver a controlled substance?

☐ YES ☐ NO 10. Have you ever been found in any dependency action under R.C.W. 13.34.040 to have sexually assaulted or exploited any minor or to have physically abused any minor?

☐ YES ☐ NO 11. Have you ever been found by a court in a domestic relations proceeding under Title 26 R.C.W. to have sexually abused or exploited any minor, or to have physically abused any minor?

☐ YES ☐ NO 12. Have you ever been found in any disciplinary board final decision to have sexually or physically abused any minor or developmentally disabled person, or to have abused or financially exploited any vulnerable adult? (“Disciplinary board final decision” means (a) any final decision by the director of the Department of Licensing for real estate brokers and salespersons and (b) any final decision by a disciplinary authority under Chapter 18.130 R.C.W. of the secretary of the Department of Health for the following businesses or professions: chiropractic, dentistry, dental hygiene, naturopathy, massage, midwifery, osteopathic medicine and surgery, physical therapy, physicians, practical nursing, registered nursing, and psychology.)

☐ YES ☐ NO 13. Are you presently charged with, but not convicted of, any of the crimes or offenses described in questions 9 through 12 above?

☐ YES ☐ NO 14. The above questions pertaining to criminal history disclosure is not exhaustive. Have you ever been charged, arrested or convicted of another crime?
Please provide a thorough explanation for each “yes” answer in the box provided below.

15. Check any of the following for which you have been charged and/or convicted, including any of these crimes as they may have been renamed: (Provide explanation in space provided or attach separate sheet.)

- Custodial Assault
- First, Second, or Third Degree Assault of a Child
- First, Second, or Third Degree Assault
- Simple Assault
- First or Second Degree Custodial Interference
- Incest
- First, Second, or Third Degree Rape of a Child
- Child Abandonment
- Child Abuse or Neglect as Defined in RCW 26.44.020
- Violation of Child Abuse Restraining Order
- Child Buying or Selling
- First or Second Degree Kidnapping
- First, Second, or Third Degree Child Molestation
- Indecent Liberties
- Felony Indecent Exposure
- Vehicular Homicide
- Unlawful Imprisonment
- Malicious Harassment
- Endangerment with a Controlled Substance
- Forgery
- First or Second Degree Sexual Misconduct with Minor(s)
- Patronizing a Juvenile Prostitute
- Selling or Distributing Erotic Material to Minor(s)
- Sexual Exploitation of Minor(s)
- Communication with a Minor for Immoral Purposes
- First Degree Arson
- First Degree Burglary
- Aggravated Murder
- First or Second Degree Murder
- First or Second Degree Extortion
- First or Second Degree Manslaughter
- First, Second, or Third Degree Rape
- First or Second Degree Robbery
- Criminal Abandonment
- First or Second Degree Criminal Mistreatment
- Promoting Pornography
- First Degree Promoting Prostitution
- Prostitution
- First or Second Degree Custodial Sexual Misconduct
- First or Second Degree Theft

Please provide an explanation for all YES answers in the previous questions or any box checked in #15: (Please indicate the question number above that you are referring to.) Include the nature, date and location of the charge(s) and any further details explaining the situation. Attach additional sheet if necessary. Applications that do not include a thorough explanation will be returned for completion.

CERTIFICATION, AUTHORIZATION AND RELEASE

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. If necessary to obtain volunteer status, I authorize Spokane Public Schools to conduct a background investigation into my past employment, education, vocational, and other activities such as my criminal background. To conduct this investigation, I authorize the District to obtain any information regarding me to evaluate my suitability for volunteer status. I understand that the information may include, but is not limited to, criminal background information. I further authorize any current/former employer, person, firm, corporation, educational or vocational institution, or government agency to provide the District to which I am applying to volunteer with any information regarding me. I further authorize the District to disclose any information they may have regarding me if such information is requested by a potential future employer of me. I hereby release and discharge said District and those who provide, receive or use such information from any and all liability as a result of furnishing and receiving this information. I understand and agree that false or misleading information, including omissions, in my application shall be sufficient cause to limit or remove opportunities to volunteer. References and personal information that become a part of this application will be regarded as confidential and shall not be revealed to me. I understand that any offer to volunteer that may be made to me is conditional and subject to the acceptable outcome of criminal history background information check; and the approval of the District’s representatives.

Signature: ___________________________ Print Name: ___________________________ Date: ___________________________

APPLICATION ON BACK PAGE
Volunteer Program Application

Full name: ________________________________________________________________

Alias/maiden name(s): _______________________________________________________ E-mail _______________________________

Street address: __________________________________________ City, State: ___________ Zip code: ________________

Phone number: __________________________ Date of birth: __________________________ Female ☐ Male ☐

Emergency contact: Name _______________________________ Relationship _____________________ Phone _________________

Do you have a child(ren) attending the school?  ☐ Yes  ☐ No  Name(s) of child(ren)/grade(s): ______________________

School/site preferred: ______________________________________________________

ID verified (Driver's license or other ID with name and birth date) ☐ Initials of school representative who verified I.D. __________

How long have you lived in the state of Washington?  _____ Years _____ Months

Program Information

Please check ONLY what applies to your volunteer service at this time

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<thead>
<tr>
<th>Affiliation Activity</th>
<th>Please Check:</th>
<th>Please Check:</th>
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<tbody>
<tr>
<td>☐ Parent, Guardian, Family Member</td>
<td>☐ Classroom Helper</td>
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<tr>
<td>☐ Community Organization Name: __________________________</td>
<td>☐ Field Trip Chaperone</td>
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<tr>
<td>☐ University Service Learning Name: ______________________</td>
<td>☐ Office, Library, Playground Helper</td>
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<td>☐ Service Club Name: __________________________</td>
<td>☐ Enrichment (Art, Drama, Music)</td>
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<td>☐ Business Name: __________________________</td>
<td>☐ Mentoring</td>
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<td>☐ Faith Organization Name: __________________________</td>
<td>☐ Tutoring</td>
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<td>☐ High School Student School: __________________________</td>
<td>☐ Attendance Review Boards</td>
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<td>☐ Other</td>
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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. I understand that this offer to volunteer with Spokane Public Schools is contingent upon an acceptable response from the Washington State Patrol and/or federal law enforcement agency, whose criminal history review will be sought of all applicants on a biennial basis. I agree that Spokane Public Schools may, at its discretion, preclude me from volunteer service if, among other reasons, I provide misleading or incomplete statements. Furthermore, I have received and reviewed the volunteer manual from the Spokane Public Schools Volunteer Program and agree to comply with its contents.

Applicant signature __________________________________________________________ Date ______________

Parent signature if under 18 __________________________________________________________ Date ______________

Please submit this form to your school of choice. Or, return to Volunteer Services at 200 N. Bernard St., Spokane, WA 99201.