



Volunteer Application

Return completed application to HR to be processed. HR will notify applicant of volunteer status via email after running a criminal background check.

School/Office Use Only

Date to district _____

Verified by _____

WATCH date _____

Approval/Denial Date _____

This is a: ☐ New Application ☐ Renewal

Legal name _____
First Middle Last

List all previous names _____
(maiden, previous married names, etc.)

Date of Birth: _____

Address _____

City _____ State _____ Zip _____

Daytime Phone _____ Cell Phone _____

Evening Phone _____ Email _____

Please check one:

- ☐ Parent/
Guardian ☐ Grandparent/
Relative ☐ Community
Member ☐ Former Everett Public Schools
Student under the age of 21

If you have a child attending an Everett school, please list below:

Child's Full Name	School	Grade
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please check any of the following areas of interest:

- ☐ Classroom Helper ☐ Lighthouse ☐ Natural Leaders

I understand that a State Criminal History Background Clearance is required and that my service as a volunteer and/or community partner depends on approval. I release the Everett Public Schools from any liability as a result of receiving any information. I have received, reviewed, and understand the district Volunteer Handbook, including the confidentiality and guidelines for safe interactions with students (or accessed online at www.everettsd.org under the Community tab).

Signature _____ Date _____

Please return all completed forms to the school in which you would like to volunteer, or to the volunteer office at: Community Resource Center, Volunteers, P.O. Box 2098, Everett, WA 98213-0098 – 425-385-4102 (fax). If you have any questions, please call 425-385-4100.

Everett Public Schools does not discriminate in any programs or activities on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression or identity, disability, or the use of a trained dog guide or service animal and provides equal access to the Boy Scouts and other designated youth groups. The following employees have been designated to handle questions and complaints of alleged discrimination: Title IX/Civil Rights Compliance Officer and ADA Coordinator, Chad Golden, 425-385-4100, CGolden@everettsd.org; Section 504 Coordinator, Dave Peters, 425-385-4063, DPeters@everettsd.org.

VOLUNTEER APPLICANT DISCLOSURE STATEMENT PURSUANT TO CHAPTER 43.43 RCW

Please 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. If you do not understand the following questions or if you are uncertain as to your answer to those questions, do not complete this form until such time as you are certain as to your response.

1. Have you **ever** been convicted of any crime? The term "**convicted**" means all adverse dispositions, including a finding of guilty, a plea of guilty, a plea of guilty or nolo contendere, an Alford plea, stipulation to the facts, a deferred or suspended sentence, or a deferred prosecution.

☐ Yes ☐ No. If yes, explain: _____

2. Have you **ever** had findings made against you in any civil adjudicative proceeding? "**Civil adjudicative proceeding**" means any judicial or administrative adjudicative proceeding that results in a finding of, or upholds an agency finding of, domestic violence, abuse, sexual abuse, neglect, or exploitation or financial exploitation of a child or vulnerable adult under Chapters 13.34, 26.44, or 74.34 RCW, or rules adopted under Chapters 18.51 and 74.42 RCW. "**Civil adjudicative proceeding**" also includes judicial or administrative orders that become final due to the failure of the alleged perpetrator to timely exercise a right afforded to him/her to administratively challenge findings made by the Department of Social and Health Services or the Department of Health under Chapters 13.34, 26.44, or 74.34 RCW, or rules adopted under Chapters 18.51 and 74.42 RCW.

☐ Yes ☐ No. If yes, explain: _____

3. Have you **ever** been the subject of a complaint made to the Office of the Superintendent of Public Instruction regarding whether you have committed an act of unprofessional conduct, as defined in WAC 181-187, or whether you are a person of good moral character and personal fitness as defined in WAC 181-79A-155?

☐ Yes ☐ No. If yes, explain: _____

I agree that if I have provided false, misleading, or incomplete information, the District may, in its sole discretion, disqualify me from volunteering or terminate my opportunity to volunteer with the District. I further agree that if at any time in the future I am convicted of any crime, have findings made against me in a civil adjudicative proceeding, or become the subject of a complaint made to the Office of the Superintendent of Public Instruction, I will immediately notify the Everett Public Schools' Volunteer Coordinator and HR Department at 425-385-4100.

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, correct, and complete. It is understood that this statement and record become the property of Everett Public Schools. Criminal history checks on volunteer applicants may be requested through the Washington State Patrol or federal law enforcement agencies at any time. If such a check is performed, you will be notified of the results and may request a copy of the response.

Sign if you agree with the two statements above.

Print Volunteer Name _____ City/State _____

Volunteer Signature _____ Date _____

Thank you for your willingness to volunteer in Everett Public Schools. You will receive a phone and email message once your application has been processed and approved. For legal purposes, the information will be maintained by the district.