High School Student - Athletic & Activities Program Volunteer for Middle School Application

The Renton School District (RSD) very much appreciates the contribution of volunteers in our athletics & activities programs. We also must manage the risks associated with our programs. In order to do this, and for the safety and well-being of our students, we require completion of the following items/steps in order to approve a volunteer to assist coaches and advisors in RSD Middle School athletics and activities programs:

	□ Name of Volunteer:			
iteer completes: school athletic office		School volunteering at:Sport(s)/Program(s):		
		e-Mail address:Day-time phone:		
	□ Volunteer Screening Form Consent to Background Check filled out, signed in blue or black ink original returned.			
volunteer Turn in to scho		☐ Photo ID provided to building administration/athletics office - Copy of ASB or driver's license.		
Turr	I grant permission for my student to volunteer with the above named program. I understand that it will be up to them to get to and from the school site as transportation is not provided for volunteers.			
	Par	rent/Guardian signature		
etes: @ KEC				
School Completes: Ids to Athletics @ K		Completed forms and copies received by school (initials)Date		
School Comple sends to Athletics		Building Administrator approval:Date		
ser				
Completes		Washington State Background check completed and cleared: YesNo		
KEC C	☐ Badge prepared and sent to building (date):			
	Building Use Only Badge issued by: PrintDate			
Vo	olunteer Signature:Date			



Volunteer Screening Form Consent to Background Check

Request for Criminal History Information Child/Adult Abuse Information Act RCW 43.43.830 through 43.43.845

REQUESTING SCHOOL:	LOCATION:ex. Teacher's Name, Athletic Sport			
STUDENT NAME:		ex. Teacher's Name, Athletic Sport		
	PLICANT INFORMATION (PLEASE PR			
NAME:	First	Middle		
LIST ALL ALIASES / MAIDEN NAME:	RACE:			
DATE OF DIDTH. / / CENIDED, M. / F. DRIVER'S LICENSE / STATE ISSUED ID #.				
DATE OF BIRTH: / GENDER: M / F DRIVER'S LICENSE / STATE ISSUED ID #:				
ADDRESS: (complete mailing address)				
PHONE: CELL (EMAIL:			
In accordance with Chapter 43.43.830 through 43.43.845 of the RCW, prospective volunteers are required to complete this disclosure form and truthfully answer all questions below.				
Please circle YES or NO to answer each question. If you answer YES to any of the items, please explain in the area provided, indicating the charge or finding, the date and the court(s) involved. If you need more room, please continue your answers on the back or attach a separate sheet.				
 Have you ever been convicted of a crime (exclude civil infractions such as minor traffic citations)? Answer: NO YES If yes, please explain: 				
2. Do you currently have any outstanding criminal charges or warrants of arrest pending against you in any state, province, territory and/or				
country?				
Answer: NO YES If yes, please explain:				
3. Are you presently under investigation in any state, province, territory and/or country for possible criminal charges? Answer: NO YES If yes, please explain:				
4. Have you ever been found in any dependency or domes	tic relation matter to have sexually as	saulted or exploited any person?		
Answer: NO YES If yes, please explain:				
5. Have you ever been found in any dependency or domestic relation matter to have physically abused any person?				
Answer: NO YES If yes, please explain:		WSP / Volunteer Office use ONLY		
I have read the information contained in this application. Pursuant to RCW 9A	a.72.085, I certify under penalty of perjury	,		
under the laws of the State of Washington that the foregoing is true and correct. I authorize Renton School District #403 to conduct a background check and to obtain any and all information needed to process my volunteer application. I				
further authorize any person contacted by the Renton School District to provide information to the Renton School District about my volunteer application. I understand that information from others will not be made available to me. I				
hereby release and hold harmless Renton School District #403 and all references from any and all liability in obtaining or disclosing such information about my background. I understand that the District may, at its discretion, exclude me from				
volunteering for any reason, including any misleading or incomplete statements on this application. Failure to answer any questions truthfully will automatically disqualify you from volunteer opportunities with Renton School District.				
		Volid Two Verse from Date of Leve		
Signature of Applicant	Date	Valid Two Years from Date of Issue		