



Today's Date: _____

(509)244-4845 | 11405 W Deno Rd Airway Heights, WA 99001 | www.airwayheightsparksandrec.org

VOLUNTEER APPLICATION

Note: Completion of volunteer application and background check does not guarantee placement into a volunteer position.

Volunteer Information:

First & Last Name: _____ Are you over 18 years of age: YES NO

Phone: H _____ C _____ Email: _____

Mailing Address: Street _____ City _____ St _____ Zip _____

Shirt Size : Small Medium Large X-Large XX-Large

What area of Parks & Recreation are you interested in volunteering?

Youth Sports Coach After School Programs Senior Citizens Programs Office/Admin

Special Event Other (please explain): _____

Why are you interested in volunteering?

Community Involvement Gain Work Experience Service Learning

Community Service - # of Hours: _____ Reason: _____

Other (please explain): _____

Availability:

Long Term (2+ Months) Short Term (3-8 weeks) Special Project (Less than two weeks)

Day of Week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Time Available						

Previous volunteer experience: Where? _____ When? _____

What did you do there? _____

Hobbies and interests _____

Skills and certifications _____

Please provide a brief statement explaining why you would like to volunteer for Airway Heights Parks & Recreation and what you hope to gain through your experience.

Criminal History: (Conviction will not automatically bar you from volunteering. Relevance to assignment will be considered.)

Notification and Authorization for Background Investigation Disclosure Statement

Do you have any criminal convictions? No Yes - If Yes, please explain _____

In compliance with RCW 43.43.834, all applicants who have been offered a position as a volunteer, and in which position the person may have unsupervised access to children under sixteen years of age, to developmentally disabled persons, or to vulnerable adults, are required to disclose the following information:

1.	Have you ever been convicted of any crime against children or other persons*? * "Crime against children or other persons" (as identified in RCW 43.43.834) means a conviction of any of the following offenses: 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, second or third 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 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.	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	Have you ever been convicted of a crime relating to the financial exploitation where the victim was a vulnerable adult, as follows: first, second or third degree extortion; first, second or third degree theft; first or second degree robbery; forgery?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Have you 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	Have you 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Have you been found in any disciplinary board final decision to have sexually or physically abused or exploited any minor or developmentally disabled person, or to have abused or financially exploited a vulnerable adult?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	Have you been found by a court in a protection proceeding under Chapter 74.34 RCW, to have abused or financially exploited a vulnerable adult?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If the answer is YES to any of the previous questions, please describe the location, date and facts of the conviction and make reference to the question being answered:

References: List two to three personal references other than a family member.

First & Last Name: _____ **Relationship:** _____

Phone: Home _____ **Cell** _____ **Other** _____

.....
First & Last Name: _____ **Relationship:** _____

Phone: Home _____ **Cell** _____ **Other** _____

.....
First & Last Name: _____ **Relationship:** _____

Phone: Home _____ **Cell** _____ **Other** _____

Emergency Contact:

First & Last Name: _____ **Relationship:** _____

Phone: Home _____ **Cell** _____ **Other** _____

Volunteer Acknowledgement:

I understand that I am not an employee of the City of Airway Heights, and that any duties that I perform are as a volunteer. In consideration of the benefits derived from being a volunteer for the City of Airway Heights, I do hereby voluntarily waive any and all claims against the City of Airway Heights, the sponsors, directors, and administrators, for any and all caused injuries or death which may arise in connection with being a volunteer in any activities associated with the City.

By my signature, I authorize the City of Airway Heights to conduct a background check of my driving record and my criminal record. The City of Airway Heights shall make an inquiry to Protect Youth Sports, regarding an applicant's conviction record, disciplinary board final decision, or civil adjudication record. Applicants will be notified of the response within 10 working days of receipt of this information. A copy of the response will be made available to the applicant.

I acknowledge that I have read the entire Notification and Authorization for Background Investigation Disclosure Statement, which I understand the requirements, and I grant permission to the City of Airway Heights to make inquiry to the aforementioned organization under the provisions of this law. 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.

Signature _____

Date _____

FOR OFFICIAL USE ONLY

Background Check Status: _____ Ordered By: _____ Date Conducted: _____

Approved to Volunteer

Denied _____