



South Sound Reading Foundation

2019-2020 Youth VOLUNTEER APPLICATION

Legal Name:	Pronouns:	
Preferred First Name:	Birth date:	
Address:	City:	Zip code:
Email:	Phone:	

PARENT/GUARDIAN CONTACT

Name:	Phone:
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CURRENT SCHOOL

	Grade:
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Why are you interested in volunteering with us? _____

Previous volunteer experience? _____

Has a relative served in the U.S. military? Yes _____ No _____ Prefer not to answer _____

VOLUNTEER OPPORTUNITIES

- Reading to children in a group setting
- Sorting/stamping children's books
- Being a school book drive liaison
- Community events (passing out books)
- Being the SSRF Mascot
- Behind-the-scenes office work

AVAILABILITY:

- Weekdays
- Weekends
- Mornings
- Afternoons
- Evenings

Please see next page.

For office use only:

		Staff Initial
WSP Run		
Interviewed		
Start Date		
Database		

WSP BACKGROUND CHECK APPLICANT DISCLOSURE

PURSUANT TO RCW 43.43.834 CHILD & ADULT ABUSE INFORMATION ACT

1. Have you ever been convicted of ANY crime? (Convicted includes ALL instances in which a finding of guilty or *nolo contendere* is the basis of conviction and/or all proceedings in which a sentence has been suspended or deferred.) YES NO
2. Have you ever been convicted of a crime relating to sexual abuse, exploitation or physical abuse?
 YES NO
3. Have you ever been convicted of any crimes related to drugs? YES NO
4. Have you ever been convicted of any crimes relating to financial exploitation, including extortion, theft, robbery or forgery? YES NO
5. Do you currently have any outstanding criminal charges or warrants against you in WA or in any other state or country? YES NO
6. Have you ever been convicted of domestic violence or assault? YES NO

IF you have answered yes to any of the above questions, **please attach a supplemental sheet with brief explanation of the conviction** and bring with you when returning volunteer application.

REQUIRED INFORMATION FOR WSP BACKGROUND CHECK:

Legal gender: MALE FEMALE RACE _____

WASHINGTON STATE PATROL CHECK & DECLARATION

South Sound Reading Foundation conducts a routine Washington State Patrol background check on all volunteers. All volunteers must be cleared through the Washington State Patrol Criminal History (WATCH) program. By signing this application, you are granting the South Sound Reading Foundation permission to conduct the background check. *If you do not sign below, we cannot process your request and you will be unable to volunteer.*

- I understand that I must answer this application truthfully and completely. Any falsification or deliberate misrepresentation, including omission of a material fact, and/or failure to notify South Sound Reading Foundation if disclosure information provided changes, can be grounds for denial of volunteer placement or continued volunteer service.
- I certify under penalty of perjury according to the laws of the state of Washington that the foregoing is true and correct.

STUDENTS NAME: _____ DATE: _____

STUDENTS SIGNATURE: _____ DATE: _____

PARENT/GUARDIAN: _____ DATE: _____

Applications can be mailed to:

- South Sound Reading Foundation 305 College Street NE, Lacey, WA 98516

Or hand in a copy to our offices at:

- 200 Sleater Kinney Rd NE, Olympia, WA 98506
 - o Call 360-412-4499 or 412-4411 ext. 35002 prior to visiting our office

You can also email your application to read2me@nthurston.k12.wa.us