



**Sunrise Elementary School  
Volunteer Application/Disclosure**

\_\_\_\_\_  
**Legal Name: First Middle Last (PLEASE PRINT) Current Address**

\_\_\_\_\_  
**Email Address**

**Date of Birth:** \_\_\_\_\_ **Phone #** \_\_\_\_\_ **Female**  **Male**

**Child's Name:** \_\_\_\_\_ **Teacher's Name** \_\_\_\_\_

**Are you a returning Volunteer? Y / N** If yes, the last year you volunteered \_\_\_\_\_ **Name of School** \_\_\_\_\_

**Clearance Application and Disclosure, pursuant to Chapter 486, Law of 1987, State of Washington**  
Answer yes or no to each listed item. If the answer is yes to any item, please attach an explanation, indicating the charge or finding, the date and the court(s) involved.

**Have you ever been:**

**1.** Convicted of any crime against children or other persons (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; first or second degree rape of a child; 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?

NO  YES

**2.** Found in any dependency action or by a court in a domestic relations proceeding or in any disciplinary board final decision to have physically or sexually assaulted, exploited or abused any minor?

NO  YES

**3.** Released from prison?

NO  YES

**4.** Convicted of any offense that involved drugs?

NO  YES

**5.** Convicted of any felony or misdemeanor other than those listed?

NO  YES

**Please Indicate Volunteer Type**

Classroom Volunteer  
 Work room/Copying non-student volunteer  
 One-time event; classroom party  
 Field Trip Chaperone with student groups  
 Field Trip with own child, not alone with other students

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 the Enumclaw School District 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

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**

**Please return to:** Sunrise Elementary School  
Volunteer Rep: **Sarah Gosnell**

**All Volunteer application/disclosures forms must be turned in NO later than April 30th**



2929 McDougall Avenue  
Enumclaw, Washington 98022

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Volunteer Application/Disclosure**

**APPLICANT FIRST NAME** \_\_\_\_\_  
Please Print

**APPLICANT LAST NAME** \_\_\_\_\_  
Please Print

Child's Name: \_\_\_\_\_ Teacher's Name \_\_\_\_\_

Did you complete an application last year?

- No**      If No, Complete the reference section below
- YES**      If Yes, do not need to fill out the reference section below

**Written References:** Please list the names and daytime contact information of the two references that will be filling out your written reference form. The written references must be returned and verified prior to volunteer approval.

| Name/Relationship | Street Address, City | State | Zip | Phone |
|-------------------|----------------------|-------|-----|-------|
|                   |                      |       |     |       |
|                   |                      |       |     |       |

I authorize the Enumclaw School District No. 216 to solicit information from former employers or references and obtain any and all information regarding my job/volunteer related background. I release and waive Enumclaw School District No. 216, my former employer and all references from any and all liability in obtaining or disclosing such information.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date