



EPHRATA SCHOOL DISTRICT NO. 165

Timothy A Payne, Superintendent | www.ephrataschools.org
111 4th Ave NW | Ephrata, WA 98823 | 509-754-2474 | 509-754-4712 (fax)

VOLUNTEER APPLICATION

Name _____ Last _____ First _____ Date _____

Address _____ Street _____ City/State/Zip _____

Phone _____

Person to be notified in case of emergency _____

Phone Number _____ Cell Number _____

Do you have physical limitations that require accommodations? YES NO

Please explain accommodation(s) _____

Education (circle highest grade) 5 6 7 8 9 10 11 12 College 1 2 3 4 Graduate

WORK EXPERIENCE

Position _____ Organization _____

Position _____ Organization _____

Volunteer Experience

Kind of Service _____ Organization _____

Kind of Service _____ Organization _____

Skills and Interest: _____

TYPE OF VOLUNTEER WORK PREFERRED

Classroom Aide Reading Mathematics Other (specify) _____

General Aide Office Aide Enrichment Aide (specify) _____

Sports Coach Name of Sport(s) _____

Check days and hours you can serve

	MON	TUE	WED	THU	FRI
AM					
PM					

Ephrata School District 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: Bryan Johnson, Title IX Coordinator, 333 4th Avenue, 754-5285 tjohnson@ephrataschools.org Travis Eloff, 504 Coordinator, 501 C Street NW, 754-3538 teloff@ephrataschools.org Sharon Scellick, Civil Rights Compliance Coordinator, 111 4th AVE NW, 754-2474, sscellick@ephrataschools.org David Laird, HIB Compliance, 333 4th Avenue, 754-5285, dlaird@ephrataschools.org



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WSP Background Authorization

Name			
Legal Name	First	Middle (required)	Last
	Date of Birth:		

Have you ever used another name? (i.e. Nick Name, maiden name, other last names) Please list below:

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Address:			
	Street		Apt/Ste #
	City	State	Zip

Phone:			
	Cell	Home	Message

Email	
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Have you ever been convicted of a Crime? Yes No
Have you ever had findings made against you in any civil adjudicative proceeding? Yes No
Have you ever had both a conviction and findings made against you? Yes No

If you answered YES, to any of the above please give explanation below:

I authorize the Ephrata School District to conduct a WSP background check on me so that I may volunteer with the District.

Print Name	Signature	Date
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Background check results will be made available to you within 10 days of the report being run, consult our office for details