



**Newport School District-Screening Form  
Request for Criminal History Information  
Child / Adult Abuse Information Act  
RCW 43.43.830 through 43.43.845  
WASHINGTON STATE PATROL**



**Newport School District**

**In accordance with Chapter 43.43 RCW, prospective volunteers are required to complete this disclosure form.**

**Volunteers: Please return this form to the school or program.**

The Washington State Legislature has helped us assure security for children by allowing background checks on all people who work with children in schools. The Newport School District supports this requirement. All volunteers must complete this form and undergo a background check prior to beginning as an active volunteer, yearly.

**APPLICANT \* Fill out this section completely\* PLEASE PRINT CLEARLY**

\*Last Name \_\_\_\_\_ \*First Name \_\_\_\_\_ \*MI \_\_\_\_\_

\*Date of Birth(MM/DD/YYYY) \_\_\_\_\_ \* Gender \_\_\_\_\_

\*Maiden Name \_\_\_\_\_

\*Other Names Used \_\_\_\_\_

\*Other Names Used \_\_\_\_\_

\*Other Names Used \_\_\_\_\_

\*Phone Number(s) \_\_\_\_\_

\*Applicant Signature \_\_\_\_\_ \*Date \_\_\_\_\_

\* Name of child(ren) in school, if any \_\_\_\_\_

**Prospective volunteers are required to complete the questions on the next page.**

Answer YES or NO to each of the listed items. If the answer is YES to any of the items, please explain in the area provided, indicating the charge or finding, the date and the court(s) involved.

(1) Have you in the past year, been arrested for any crimes?

Answer \_\_\_\_\_ If yes, please explain:

(2) Have you been convicted of any crimes?

Answer \_\_\_\_\_ If yes, please explain:

(3) Have you been found in any dependency action under Chapter 13.34 RCW to have sexually assaulted or exploited any minor or to have physically abused any minor?

Answer \_\_\_\_\_ If yes, please explain:

(4) Have you been found by a court in a domestic relations proceeding under Title 26 RCW to have sexually assaulted or exploited any minor or to have physically abused any minor?

Answer \_\_\_\_\_ If yes, please explain:

(5) Have you been found in any disciplinary board final decision to have sexually abused or exploited any minor or to have physically abused any minor?

Answer \_\_\_\_\_ If yes, please explain:

(6) Other than any matter above, is there any fact or circumstance involving you and your background that would call into question you're being entrusted with the supervision, guidance and care of young people, vulnerable adults or developmentally disabled persons?

Answer \_\_\_\_\_ If yes, please explain:

**NOTICE:**

An inquiry will be made to the Washington State Patrol and/or Federal Law Enforcement Agency to determine whether you have been (a) convicted of any offense against persons as described in this disclosure form; (b) found in any dependency action under RCW 13.34.040 to have sexually assaulted or exploited any minor or to have physically abused any minor; (c) found by a court in a domestic relations proceeding to have sexually abused or exploited any minor or to have physically abused any minor. A copy of any response received from the Washington State Patrol pursuant to such inquiry, when requested, will be made available to you.

**Failure to answer truthfully will automatically disqualify you from volunteer and employment opportunities with Newport School District.**

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 in the Newport School District is contingent upon an acceptable response from the Washington State Patrol and/or Federal Law Enforcement Agency.

Volunteer Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

School Verification	
<input type="radio"/> CLEARED (State Patrol Criminal History Check)	Date Ran _____
<input type="radio"/> DID NOT PASS	Initials of school official _____
Comments _____	
_____	