



*Our promise – “Every student in the Stanwood-Camano School District is empowered to learn in an inclusive setting and is prepared for the future of their choice.”*

# VOLUNTEER APPLICATION

Thank you for your interest in volunteering in the Stanwood-Camano School District!  
**Print neatly in INK, no pencil. Complete both sides of this form and the attached Acknowledgement.**  
 Be prepared to show photo ID to school personnel for verification or attach a copy to this form.

<b>YOUR FULL NAME AS IT APPEARS ON YOUR GOVERNMENT-ISSUED ID</b>		<b>How would you like to volunteer?</b> <input type="checkbox"/> Classroom/Building Support <input type="checkbox"/> Field Trips <input type="checkbox"/> Athletics <input type="checkbox"/> WATCH D.O.G.S. <input type="checkbox"/> Other _____ _____
<b>LAST NAME</b>		
<b>FIRST NAME</b>		
<b>MIDDLE INITIAL</b>	<b>OTHER NAME(S) USED</b>	
<b>DATE OF BIRTH (MM/DD/YYYY)</b>	<b>SEX:</b> <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> OTHER	
<b>ADDRESS</b>		
<b>CITY/STATE/ZIP</b>		
<b>PHONE</b>		
<b>EMAIL</b>		

<b>NAME(S) OF CHILDREN</b>	<b>TEACHER(S)/GRADE(S)</b>

I agree to complete the following disclosure information and understand that a satisfactory State Criminal History Background Clearance is required and that my service as a volunteer is dependent upon approval. I understand this time spent is in a volunteer capacity only and I have read and agree to comply with district, school and classroom rules, including: **Maintaining Professional Staff/Student Boundaries – Policy 5253/5253P, Prohibition of Harassment, Intimidation & Bullying – Policy 3207/3207P, Sexual Harassment – Policy 5011, Drug-Free Schools, Community & Workplace – Policy 5201, Nondiscrimination & Affirmative Action – Policy 5010P and Civility in the Workplace – Policy 5161.** These are viewable under the School Board tab at [www.stanwood.wednet.edu/](http://www.stanwood.wednet.edu/) and in the Volunteer Handbook. The Stanwood-Camano School District reserves the right to terminate or revoke a volunteer’s status at any time.

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

The Stanwood-Camano School District does not discriminate in employment, 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. Inquiries regarding compliance and/or grievance procedures may be directed to the District’s Title IX/Affirmative Action Officer and Civil Rights Compliance Coordinator, Christine Del Pozo (cdelpozo@stanwood.wednet.edu), or the Section 504/American Disabilities Act Coordinator, Robert Hascall (rhascall@stanwood.wednet.edu) Stanwood-Camano School District, 26920 Pioneer Hwy, Stanwood, WA 98292. Telephone: (360) 629-1200.

**APPLICANT DISCLOSURE STATEMENT PURSUANT  
TO CHAPTER RCW 43.43.830 THROUGH 43.43.845**

**VOLUNTEER'S PRINTED NAME** \_\_\_\_\_ **DATE OF BIRTH** \_\_\_\_\_

**Please Answer YES or NO** to each listed item. If the answer is YES to any item, explain in the area provided, indicating the charge or finding, the date of the conviction or finding, the court(s) involved, and the penalty imposed. I understand that the Stanwood-Camano School District may inquire of state and federal law enforcement or other agencies and examine court or agency records regarding my criminal history and civil adjudications.

1. Have you **ever** been convicted of any crime?

The term **'convicted'** means all adverse dispositions, including a finding of guilty, a plea of guilty or nolo contendere, an Alford plea, stipulation to the facts, a deferred or suspended sentence, or a deferred prosecution.

YES     NO    **If YES, PLEASE EXPLAIN** \_\_\_\_\_

2. Have you **ever** had findings made against you for domestic violence, abuse, sexual abuse, neglect, exploitation or financial exploitation of a child or a vulnerable adult in any civil adjudicative proceeding.

A civil adjudicative proceeding includes a judicial or administrative proceeding as well as findings by the Department of Social and Health Services or the Department of Health that you have not administratively challenged or appealed.

YES     NO    **If YES, PLEASE EXPLAIN** \_\_\_\_\_

3. Are you currently under investigation for any crime or are there any outstanding criminal charges and/or warrants pending against you?

YES     NO    **If YES, PLEASE EXPLAIN** \_\_\_\_\_

***Any misrepresentation or omission of facts shall be sufficient cause for rescission of or termination of volunteer status.***

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. Further, I authorize the Stanwood-Camano School District to make a Washington State Patrol Background Check each year I am associated with the district.

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

**VOLUNTEER TRAINING REQUIRED EACH SCHOOL YEAR**

All volunteers must complete the online Harassment, Intimidation & Bullying (HIB) training on the district website each school year. Scan the QR code to the right or go to [www.stanwood.wednet.edu/get\\_involved](http://www.stanwood.wednet.edu/get_involved) to complete the training now.



**To inquire about the status of your volunteer application or if you have questions,  
please contact the school office or the district administration office.**

### VOLUNTEER RELEASE AND ACKNOWLEDGEMENT

I have reviewed the following Stanwood-Camano School District policies/protocols:

- Policy 5253/5253P – Maintaining Professional Staff/Student Boundaries
- Policy 3207/3207P – Prohibition of Harassment, Intimidation, and Bullying
- Policy 5011 – Sexual Harassment
- Procedure 5010P – Nondiscrimination and Affirmative Action
- Policy 5161 – Civility in the Workplace
- Policy 5201 – Drug-Free Schools, Community and Workplace

I shall respect the privacy concerns of students and staff, and I shall hold in confidence all information learned in the course of my volunteer service, whether that information is obtained through electronic or written records or daily interaction. I will not disclose an individual’s confidences to anyone, except: 1) as mandated by law; 2) to prevent a clear and immediate danger to a person or persons.

I understand that I am responsible for following District procedures regarding maintaining professional staff/student boundaries, incident reporting, and consequences of engaging in boundary invasions. I understand that while school volunteers are not legally mandated reporters of suspected child abuse, the District’s expectation is that volunteers contact an administrator or staff member promptly regarding any inappropriate incident, conduct, or behavior.

Under district policy 6530, volunteers are eligible for liability indemnification while acting in compliance with the policies and procedures of the District and within the scope of their assigned volunteer activities. I understand that I am a volunteer for the Stanwood-Camano School District, not an employee. I acknowledge that the District does not provide any accidental medical insurance coverage for volunteer activities and that I am aware of and assume all risks of injury or damage to my person or property. As a volunteer, I do not qualify for workers’ compensation benefits and I assume financial responsibility for any injuries I may incur while performing volunteer services.

I have read the volunteer handbook, or had it read to me and I am familiar with its contents. I understand that the handbook is intended to cover the procedures, rules and policies most often applied to day-to-day volunteer activities, and that some of the information will change from time to time as procedures evolve. The handbook is available for viewing and download on the volunteer page of the district website or I may request a printed copy from the district.

My signature below indicates that I acknowledge the information above and I agree to comply with all district, school and classroom rules, procedures and policies. I further agree to follow the directions of District faculty and staff when on school grounds and/or at school-sponsored events.

<i>Volunteer’s Name - <b>PLEASE PRINT</b></i>	<i>Location/School</i>
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<i>Volunteer’s Signature</i>	<i>Date</i>
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**Please return your completed application (all 3 pages) to the school office or the district administration office.**

**To inquire about the status of your volunteer application or if you have questions, please contact the school office or the district administration office.**