



SPS Volunteer Application Packet 2017-2018

Instructions and Check List

Applicant Name:
Volunteer Site:

Thank you for your interest in volunteering with Seattle Public Schools!

Please complete and mark each check box below before delivering this packet to your school. You may start volunteering after SPS confirms completion of all requirements and approves your application. Processing can take up to three weeks.

SPS VOLUNTEER ON-BOARDING CHECK LIST

Check box	Applicant requirements	How often?	Principal Designee Initials
	Complete pages 2-4 of this packet. Make sure to initial, sign and make a copy for your records of legal agreements on page 3. Check in with staff if you have questions about this important section.	Annually	
	Did you include a copy of a government-issued photo ID? This copy will be shredded after your background check process is complete.	Annually	
	Visit www.seattleschools.org/asmvolunteer to complete the Adult Sexual Misconduct Prevention course. Attach completion certificate or share the date you took the course here _____	Annually	
	Review Volunteer Handbook at www.seattleschools.org/volunteerhandbook or request to review one in the school office.	Annually	

SPS is committed to providing students with a safe educational environment. This includes ensuring every volunteer and staff member completes a criminal background check. **Volunteer applicants who have lived in WA State for the past three years are screened by SPS staff using a free state database. Applicants who are newer to our state, or will spend regularly scheduled time with students with no other unrelated adults present, must go through a one-time \$31 U.S.-wide background check. To expedite processing, you may order your national background check now at <http://bit.ly/vv4sps> (enter code "VOLSPSD" if prompted).** If you do not have a debit/credit card or access to the internet, or are unable to pay the fee, please notify staff so we can assist.

Check box	Applicant requirements	How often?	Principal Designee Initials
	If you've lived in WA State for the past 3 years, was your current photo ID issued more than 3 years ago? If not, include another proof such as property tax statement or rental agreement, tax records, school records, utility bill, etc. Those items will be shredded.	Once	
	Did you disclose your criminal history? Due to risk management restrictions, SPS staff is unable to approve applicants who don't disclose all arrests and charges. Criminal records will not automatically disqualify your application; however, they may restrict your roles.	Annually	
	Bring your entire application packet and attachments to the school's principal-designee – she or he will verify your identity in person and initiate a state background check, if applicable.	Annually	

PRINCIPAL'S DESIGNEE BELOW THIS LINE ONLY

Check box	Applicant requirements	How often?	Principal Designee Initials
	Did you verify the applicant's identity in person using a government-issued photo ID?	Annually	
	Was background check cleared? WATCH Verified Volunteers	Annually	

Volunteer Approver Name/Title (Print)

Volunteer Signature

Date:



SPS Volunteer Application-Screening-Disclosure Form

To be completed by applicant and approved by the building administrator or program manager

VOLUNTEER GENERAL INFO

First Name: Middle Initial: Last Name:
 Aliases/Maiden Name: Gender: Date of Birth (mm/dd/yyyy)
 Address: City, State, Zip
 How long have you lived in Washington State? Record years of residency
 Primary Phone: Email:
 Relationship to SPS: Parent/Guardian Relative Community Other

If you have a student at the school, please specify their name:

Do you require any special accommodations in a work environment? No Yes, please describe:

VOLUNTEER EMERGENCY INFORMATION

Emergency Contact Name: Relationship:
 Emergency Contact Phone: Email
 Your Doctor's Name: Dr. Contact #

VOLUNTEER PERSONAL OR PROFESSIONAL REFERENCES

References will be used as need in the background clearance process. Please share at least one personal references.

Name (First, Last) Relationship
 Phone Email
 Name (First, Last) Relationship
 Phone Email

VOLUNTEER AREA OF INTEREST

Best Days: Monday Tuesday Wednesday Thursday Friday Other:

Best Time:

VOLUNTEER AREA OF INTEREST

Student Enrichment

1 to 1 Small Group Classroom Assistance Math Reading Writing Drama Arts/Crafts Music Other:

Administrative/Clerical/Non-Academic Support

Lunch/Playground Supervision Office/Library Support Classroom Support Other:

Field Trip Volunteer

Chaperone (for overnight trips, please also complete Chaperone Check List)
 Driver (please also complete Driver Check Lists)
 Other (specific project or department help, or is there a special skill or talent you would like to share), please specify:

Athletic Coaches Do not use this form. Complete an online application at <http://bit.ly/spscoach>

Please submit your completed packet to principal-designated SPS staff member at least 2 weeks prior to expected volunteer service start date. Your background must be cleared and application approved before this date. Thank you!



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PLEASE READ & INITIAL EACH STATEMENT BELOW. KEEP A COPY FOR YOUR RECORDS.

Safety and Liability (please initial each statement after you read it)

_____ As the relationship with a student progresses, student will likely begin to trust and confide in you. You should take time to listen and show them that you care. It is best practice to avoid making promises and make sure to report to staff any behaviors or communications that concern you.

_____ Personal information about yourself should be shared only as it is relevant to the work you are doing with the student. Do not give any personal contact information to student, including your social media contact information.

_____ Some students, typically at elementary level, will naturally become attached and show affection. Handle the situation with sensitivity. Front hugs are NOT allowed. Instead, carefully put your arm around a child's shoulder and turn it into a side hug or give "high fives." Students should **never** sit on your lap regardless of age.

Working with Children from Diverse Backgrounds (please initial each statement after you read it)

_____ Students in Seattle Public Schools come from many different families, cultures, and communities--each with its own set of values and beliefs. Be mindful of different cultural norms that every student has. Understanding the students' cultures and helping students' to understand the school culture will increase their ability to learn. Please do not impose your personal values and belief onto the students.

Confidentiality (please initial each statement after you read it)

_____ Students in Seattle Public Schools have the right to expect that information about them will be kept confidential by all volunteers. Additionally, all information contained within a student's educational record is considered confidential and protected by a federal law, the Family Educational Rights and Privacy Act ("FERPA"), 20 U.S.C. Section 1232g. Volunteers are expected to maintain student confidentiality.

_____ Each student you work with has the right to expect that nothing that happens to or about him or her will be repeated to anyone other than authorized school department employees, as designated by the administrators at your volunteer site.

_____ You may NOT share information about a student with anyone, including your best friend, significant other, or individuals who are genuinely interested in the student's welfare, such as social workers, scout leaders, clergy, grandparents, or nurses/physicians. Thus, you must refer all such questions to authorized school employees, typically the student's teacher or principal.

_____ Information about a student may be communicated to school staff and school administration. Information shall be communicated immediately if it is a medical emergency OR if a student shares information that indicates a threat of imminent physical injury to the student or others.

_____ Before you speak about a student to another person, remember that violating a student's confidentiality is not only impolite; it's also against the law.

Volunteer Agreement: I (print name), _____ will take the above statements (and the remaining guidelines in the Volunteer Handbook) into consideration during and after my time as a volunteer for SPS. I acknowledge that I have been made aware of where to find the Volunteer Handbook for future reference and to whom I can speak to regarding any questions or concerns I may have. I also acknowledge that I will need to review the Online Adult Sexual Misconduct Video AND meet criteria for background check clearance prior to volunteering with SPS students. In addition, while volunteering, I understand that my photo could be used in a SPS publication unless I opt out with the site coordinator. I understand that volunteering at a school or in a program with students is a privilege and that the Principal or Program Manager can terminate my eligibility to volunteer.

Volunteer Name (Print)

Volunteer Applicant Signature

Date

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Request for Criminal History Information in accordance with Child/Adult Abuse Information Act (RCW 43.43.830 through 43.43.845)

The Washington State Legislature has helped us assure security for children by allowing background checks on all people who work with children in schools and in accordance with Chapter 43.43 RCW, prospective volunteers are required to complete this disclosure form. Seattle Public Schools care about our students and therefore we support this requirement and work to ensure all volunteers complete this form and undergo a background check each school year prior to beginning as an active volunteer.

Prospective volunteers are required to complete the disclosure questions below by answering YES or NO to EACH. If the answer is YES to any question, please explain in the area below as much detail as possible including the charge/ finding, date and the court(s) involved. Please use the next page to add any additional info (you can also attach an additional page if needed).

1. **Have you been arrested or convicted for any crimes?**
No Yes explain:

2. **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?**
No Yes explain:

3. **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?**
No Yes explain:

4. **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?**
No Yes explain:

5. **Other than any matter above, is there any other fact or circumstance involving you and your background that would call into question you being entrusted with the supervision, guidance and care of young people, vulnerable adults or developmentally disabled persons?**
No Yes explain:

I have read the information contained in this application. 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 authorize Seattle School District No. 1 to conduct a background check and to obtain any and all information needed to process my volunteer application. I further authorize any person contacted by the Seattle School District to provide information to the Seattle School District about my volunteer application. I understand that information from others will not be made available to me. I hereby release and hold harmless Seattle School District No. 1 and all references from any and all liability in obtaining or disclosing such information about my background. I understand that the District may, at its discretion, exclude me from volunteering for any reason, including any misleading or incomplete statements on this application. I understand that the failure to answer any question truthfully will automatically disqualify you from volunteer and employment opportunities with Seattle Public Schools.

Volunteer Name (Print)

Volunteer Applicant Signature

Date

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