



Bellevue School District
Volunteer Application for Advisors & Coaches

Please check appropriate box

- ACTIVITY ADVISOR
- ATHLETIC COACH
- School?
- Program?

| FOR OFFICE USE ONLY | |
|------------------------|--------------|
| WSP: _____ | D.B.: _____ |
| Reference (Sent) _____ | (Rcvd) _____ |
| Reference (Sent) _____ | (Rcvd) _____ |

NAME: _____ GENDER? _____ DATE: _____
 ADDRESS: _____ DATE OF BIRTH: _____
 CITY: _____ ZIP CODE: _____ HOME PHONE: _____
 CELL PHONE: _____ E-MAIL ADDRESS: _____
 EMPLOYER: _____ BUSINESS PHONE: _____
 CURRENT OCCUPATION: _____
 PREVIOUS VOLUNTEER EXPERIENCE: _____

PREVIOUS WORK W/ CHILDREN/YOUTH: _____

REASON FOR VOLUNTEERING: _____

EMERGENCY CONTACT NAME: _____ DAY PHONE: _____

REFERENCES
 (Non-relatives whom we may contact. Please fill in completely.)

| | |
|--------------|--------------|
| NAME | NAME |
| TELEPHONE | TELEPHONE |
| E-MAIL | E-MAIL |
| RELATIONSHIP | RELATIONSHIP |

I understand that all volunteering relationships established through the Bellevue School District take place with student(s) on the school campus during school hours or at other school authorized activities ONLY. I understand that volunteering is a privilege, not a right, and that the District may, in its sole discretion, decide to discontinue any volunteer's participation at any time and for any reason or no reason, with or without notice or warning. **All information in this application is accurate to the best of my knowledge. I have completed and signed the attached Disclosure form and the BSD Volunteer Agreement.**

Signature: _____ Date: _____

If you have questions, please call (425) 456-4154 or e-mail vibes@bsd405.org



Bellevue School District Volunteer Disclosure Form

Washington State Law requires that all prospective volunteers who will have regularly scheduled unsupervised access to children under sixteen years of age, developmentally disabled persons, or vulnerable adults must complete and sign this disclosure form. In addition, the District requires that this form be completed by all volunteers, regardless of whether they are supervised. The District will request a background investigation through the Washington State Patrol Criminal Identification Division, and a copy of the response will be made available to you upon request. Please note that failure to provide complete and accurate information may be grounds for denial of your application to serve as a volunteer. **DO NOT ASSUME THAT ANY CONVICTION HAS BEEN REMOVED FROM YOUR RECORD NO MATTER HOW LONG AGO IT OCCURRED.**

The term "convicted" means all adverse dispositions, including, but not limited to, a finding of guilty, a plea of guilty or nolo contendere, a stipulation to the facts, or a deferred or suspended sentence.

Name:

Telephone:

- NO YES 1. Are you presently charged with, but not convicted of, a crime?** A pending criminal charge will not necessarily bar you from volunteering in the District. **If yes, attach an explanation of the nature of the charge, place, date, and court.**
- NO YES 2. Have you ever been convicted of a crime?** A conviction record will not necessarily bar you from volunteering in the District. **If yes, attach an explanation of the nature of the crime, place, date, court, and final disposition.** You need not list traffic violations for which a fine or forfeiture of less than \$150 was imposed.
- NO YES 3. Have there ever been any findings against you in any civil adjudications involving domestic violence, abuse, sexual abuse, neglect, or exploitation or financial exploitation of a child or vulnerable adult?** Civil adjudications include a final agency finding that the applicant did not appeal or a judicial or administrative proceeding that affirms an agency finding or results in a finding. **If yes, attach a detailed explanation.**
- NO YES 4. Have you ever been convicted of any crime involving the manufacture, delivery, or possession with intent to manufacture or deliver a controlled substance?** **If yes, attach a detailed explanation.**

I, _____, certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. I understand the any falsification or deliberate misrepresentation, including omission of a material fact, or failure to complete any part of this application or this disclosure form can be grounds for denial of volunteer service or continued volunteer service with Bellevue School District.

Applicant's Signature:

Date:

City and State:

Reference: RCW 43.43.830 - 845



Bellevue School District Volunteer Rules, Requirements, and Agreement

Volunteers agree and commit to do the following:

- follow district/school policies and procedures
- comply with all directives of school administrators and staff
- report any student health or safety concerns to school administrators before leaving the school that day
- engage in positive and supportive relationships with students
- respect culture, religion, and lifestyle diversity
- be respectful of teachers'/coaches' time constraints and their authority
- respect students' dignity
- be positive role models
- be good listeners, patient, flexible, and nurturing
- be non-judgmental and allow students to make mistakes
- separate personal goals from those of the students
- respect the confidentiality of students and staff
- ask for help when needed and follow directions of school staff
- support, not replace, the role of parents or guardians
- remain calm, cool, and collected in frustrating and stressful situations
- reinforce students' successes
- overcome setbacks or disappointments
- be reliable, prompt, and dependable
- Conform to federal and state laws prohibiting discrimination on the basis of race, color, national origin, sex or disability

Volunteers will NOT engage in any of the following while in their volunteer capacity:

- share information about students, except with appropriate school personnel
- recommend or recruit students for non school-sponsored activities
- express, promote, or share personal agendas (e.g., religious or political) during their volunteer experience
- meet with students outside of school and/or school sponsored activities or when directed not to do so
- make contact with students outside of school, via phone, email, or any social networks.
- use cell phones or cameras to photograph or make videos of students
- violate school policies and procedures or directives of school employees
- engage in any illegal activity while volunteering
- miss scheduled meetings/appointments unless impossible to keep and then will give as much notice as possible

(Rules, Requirements, and Agreement continued)

I understand that all volunteering relationships established through the District Programs take place with the student on the school campus, during school hours or at other school authorized activities ONLY.

I also understand that the Bellevue School District has a zero-tolerance policy with regard to sexual harassment, bullying, drugs and alcohol, and weapons. I understand that engaging in any of the prohibited conduct outlined above, or violating any laws or District policies or procedures, will immediately disqualify me from volunteering in any District schools, programs, and/or events.

I understand that I cannot recruit or recommend students for non-school sponsored activities, and I cannot express or share personal (e.g., religious or political) agendas with students.

I understand that volunteering is a privilege, not a right, and that the District may, in its sole discretion, decide to discontinue any volunteer's participation at any time and for any reason or no reason, with or without notice or warning.

I have read and agree with the above Bellevue School District Volunteer Rules, Requirements and Agreement and have received a copy for my records.

Print Name:

Applicant's Signature:

Date:

****Signatures are required on all three forms –**

- 1. Application,**
- 2. BSD disclosure form,**
- 3. Volunteer agreement.**

Remember to include copy of valid photo ID with birth date (driver's license or passport). BSD student ID accepted.

Thank you!