



North Lake School District No. 14

57566 Fort Rock Road, Silver Lake, OR 97638 • 541-576-2121 • FAX 541-576-2705

Volunteer Application

VOLUNTEER INFORMATION

Please state your reason for volunteering		
North Lake School is a smoke free campus. Will you abstain from smoking on campus?	Yes	No

NAME INFORMATION

Please provide your full legal name. You may provide up to two additional last names that you use, or have previously used, including maiden name.

Name (Last)	(First)	(Middle Name)
-------------	---------	---------------

Other Last Name(s)

--	--

CONTACT INFORMATION

Address (Physical Address)	(City)	(State)	(Zip)	Home Telephone () -
Address (Mailing Address if different)	(City)	(State)	(Zip)	Other Telephone () -
E-Mail Address	May our parent group contact you for help with events? Yes No			

IDENTIFICATION INFORMATION

Driver's License/ ID Card Number	Issuing State	Date of Birth	Sex Male Female
----------------------------------	---------------	---------------	--------------------

BACKGROUND INFORMATION

Have you EVER been convicted of a sex related crime?	Yes	No
Have you EVER been convicted of a crime involving violence or threat of violence?	Yes	No
Have you EVER been convicted of a crime involving criminal activity in drugs or alcoholic beverages?	Yes	No
Have you EVER been convicted of any other crime except a minor traffic violation? (Includes traffic crimes)	Yes	No
Have you been arrested within the last three years for a crime for which there has not yet been an acquittal or dismissal?	Yes	No

CRIMINAL HISTORY CHECK CONSENT

Advisory: A check of the applicant's criminal history will be made by North Lake School District to verify the responses to the preceding questions.

I hereby grant North Lake School District permission to check civil or criminal records to verify any statement made on this form. Regardless of whether the applicant grants consent, North Lake School District will conduct a criminal offender record check of applicants for the position of school bus driver, volunteer, or other prospective school employees working with or around children. The applicant is entitled to review his/her criminal history for inaccurate or incomplete information. Discrimination by an employer on the basis of arrest records alone may violate federal civil rights law. The applicant may obtain further information concerning the applicant's rights by contacting the Bureau of Labor and Industries, Civil Rights Division, State Office Building, Suite 1070, Portland, Oregon 97232, telephone (503) 731-4075.

I acknowledge reading and the receipt of this notice.

CRIMINAL HISTORY VERIFICATION OF APPLICANTS

**THIS FORM MUST BE ENCLOSED WITH THE 581-2281-N SCHOOL/DISTRICT COVER FORM AND A CHECK FOR \$5.00 PER APPLICANT.
ALL DOCUMENTS MUST BE MAILED TOGETHER TO THE DEPARTMENT OF EDUCATION.**

Please type or print clearly.

As Appears on License

Name: _____ Date of Birth: _____ Sex: _____
(Last Name) (First Name) (Middle Name) MM/DD/YY

List Other Names Previously Used: _____
(includes Maiden Name)

Social Security No.: _____ Driver License/Identification Card No.: _____

Providing your social security number on this form is voluntary. If you choose not to disclose the social security number, this will not be a basis for denial of employment or any rights, services or benefits to which you are otherwise entitled. If you do provide the number the Oregon State Police will use it as an additional identifier to search for any criminal record you may have. Your social security number will be used as stated above. State and federal laws protect the privacy of your records.

Mailing Address: _____
Full Street Address/Post Office Box

City: _____ State: _____ Zip + 4: _____

A. Have you **EVER** been convicted of a sex-related crime? Yes No

If yes, was the conviction in Oregon or another state? (Please specify if another state.) State: _____

If yes, did the crime involve force or minors? Yes No

B. Have you **EVER** been convicted of a crime involving violence or threat of violence? Yes No

If yes, was the conviction in Oregon or another state? (Please specify if another state.) State: _____

C. Have you **EVER** been convicted of a crime involving criminal activity in drugs or alcoholic beverages? Yes No

If yes, was the conviction in Oregon or another state? (Please specify if another state.) State: _____

D. Have you **EVER** been convicted of any other crime except a minor traffic violation?(Includes Traffic Crimes) Yes No

E. Have you been arrested within the last three years for a crime for which there has not yet been an acquittal or dismissal? Yes No

Advisory: A check of the applicant's criminal history will be made by the Oregon Department of Education to verify the responses to the preceding questions.

I hereby grant to the Oregon Department of Education permission to check civil or criminal records to verify any statement made on this form. Regardless of whether the applicant grants consent, the Oregon Department of Education will conduct a criminal offender record check of applicants for the position of school bus driver, volunteer, or other prospective school employees working with or around children. The applicant is entitled to review his/her criminal history for inaccurate or incomplete information. Discrimination by an employer on the basis of arrest records alone may violate federal civil rights law. The applicant may obtain further information concerning the applicant's rights by contacting the Bureau of Labor and Industries, Civil Rights Division, State Office Building, Suite 1070, Portland, Oregon 97232, telephone (503) 731-4075.

I acknowledge reading and the receipt of this notice.

Applicant's Signature: _____ Date: _____