



## NOTICE OF BACKGROUND CHECKS, CONSENT, AND AUTHORIZATION

**Please read the following paragraphs and complete the information below.**

Cascade Christian Schools values the safety of our employees and those we serve. Accordingly, Cascade Christian Schools conducts criminal background checks through the Department of Social and Health Services, Washington State Patrol, and Intellicorp (multi-state), for employees, volunteers, and contractors.

In consideration for my future or continued employment, volunteer services, or contractual relationship with Cascade Christian Schools (CCS), I agree to submit to CCS' investigative background inquiry. This inquiry may include criminal history information as indicated above, credit history (if applicable), motor vehicle reports, social security number verification and other federal and local reports from Washington and other states where I may have resided. If I have unsupervised access to children and have resided in Washington State for less than three years, I understand State Patrol/FBI fingerprint checking may also be required.

I understand that before I am denied consideration for future or continued employment, volunteer, or contracted services based on the investigation results, I will be provided a copy of the report (under the Fair Credit Reporting Act), along with an opportunity to dispute its findings or otherwise address the information contained therein within three (3) business days of receipt. If my relationship to CCS is contractual, a copy of my report may also be given to my employer, if other than CCS. **Information obtained will remain confidential on a need-to-know basis, and be available only to those performing the background investigation or making employment-related decisions.**

By signing below, I authorize CCS to obtain investigative information as specified above, from any agency, at any time, during my employment, volunteerism, or contractual relationship. I understand that any misrepresentation, falsification, or omission of facts herein may be grounds for immediate termination or disqualification.

**Complete this section – please print legibly.**

My relationship to CCS (check one below):

- Employee                       Contractor/Extended School; Company Name: \_\_\_\_\_  
 Volunteer                       Intern/Student Teacher                       Coach                       Host Family

Campus (check one below):

Position: \_\_\_\_\_

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> District Office           | <input type="checkbox"/> Frederickson Early Learning Center | <input type="checkbox"/> Puyallup Early Learning Center |
| <input type="checkbox"/> Junior High               | <input type="checkbox"/> Frederickson Elementary            | <input type="checkbox"/> Puyallup Elementary            |
| <input type="checkbox"/> High School               | <input type="checkbox"/> Frederickson Extended School       | <input type="checkbox"/> Puyallup Extended School       |
| <input type="checkbox"/> Secondary Extended School | <input type="checkbox"/> McAlder Early Learning Center      | <input type="checkbox"/> Tacoma Early Learning Center   |
| OTHER: _____                                       | <input type="checkbox"/> McAlder Elementary                 | <input type="checkbox"/> Tacoma Elementary              |
|  | <input type="checkbox"/> McAlder Extended School            | <input type="checkbox"/> Tacoma Extended School         |

Name in Full (First, Middle, Last): \_\_\_\_\_

Maiden Name or Alias: \_\_\_\_\_

Current Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Previous States of Residence as an Adult: \_\_\_\_\_ Email: \_\_\_\_\_

Social Security No. \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Driver's License No. \_\_\_\_\_

Gender:  Male                       Female                      Phone No. (\_\_\_\_) \_\_\_\_\_

The above information is correct and up-to-date. I fully understand the purpose and contents of this document and authorize the investigative background inquiries.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Applicant Disclosure Form**  
**Pursuant to Chapter 43.43 RCW**

PLEASE ANSWER YES OR NO TO EACH QUESTION AND SIGN THE FORM.

Your volunteer registration cannot be completed without this form.

1. **Have you ever been convicted of any crimes against persons listed below or any of these crimes as they may be renamed in the future? If the answer is "yes" to any item, briefly explain below, including the date and the court involved.**

- Yes  No Arson (1<sup>st</sup> degree)
- Yes  No Assault (Simple)
- Yes  No Assault (1<sup>st</sup>, 2<sup>nd</sup>, or 3<sup>rd</sup> degree)
- Yes  No Burglary (1<sup>st</sup> degree)
- Yes  No Child abuse/neglect (defined by RCW 26.44020)
- Yes  No Child molestation (1<sup>st</sup>, 2<sup>nd</sup>, or 3<sup>rd</sup> degree)
- Yes  No Child buying or selling
- Yes  No Child abandonment
- Yes  No Child abuse (violating restraining order)
- Yes  No Communication with a minor for immoral purposes
- Yes  No Criminal mistreatment (1<sup>st</sup> or 2<sup>nd</sup> degree)
- Yes  No Extortion (1<sup>st</sup> or 2<sup>nd</sup> degree)
- Yes  No Felony – indecent exposure
- Yes  No Incest
- Yes  No Indecent liberties
- Yes  No Kidnapping (1<sup>st</sup> or 2<sup>nd</sup> degree)
- Yes  No Malicious harassment
- Yes  No Manslaughter (1<sup>st</sup>, 2<sup>nd</sup>, or 3<sup>rd</sup> degree)
- Yes  No Murder (aggravated)
- Yes  No Murder (1<sup>st</sup>, 2<sup>nd</sup>, or 3<sup>rd</sup> degree)
- Yes  No Patronizing a juvenile prostitute
- Yes  No Promoting pornography
- Yes  No Promoting prostitution
- Yes  No Prostitution
- Yes  No Rape of a child (1<sup>st</sup>, 2<sup>nd</sup>, or 3<sup>rd</sup> degree)
- Yes  No Rape (1<sup>st</sup> or 2<sup>nd</sup> degree)
- Yes  No Robbery (1<sup>st</sup> or 2<sup>nd</sup> degree)
- Yes  No Selling or distributing erotic material to a minor
- Yes  No Sexual exploitation of minors
- Yes  No Sexual misconduct with a minor (1<sup>st</sup> or 2<sup>nd</sup> degree)
- Yes  No Unlawful imprisonment
- Yes  No Vehicular homicide

Explanation, if needed:

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2. **Have you ever been found in any dependency action under RCW 13.34.040 or found in a Court in a domestic relations proceeding under Title 26 RCW to have sexually abused or exploited any minor?**

- Yes  No

If yes, explain:

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3. **Have you been found by a Court in a protection proceeding under Chapter 74.34 RCW or any disciplinary board final decision to have sexually or physically abused or exploited any minor or developmentally disabled person OR to have abused or financially exploited a vulnerable adult? Or under Title 26 RCW to have sexually abused or exploited any minor or to have physically abused any minor?**

- Yes  No

If yes, explain:

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4. **Within the past ten (10) years, have you been convicted of ANY offense or placed on deferred sentence for ANY offense?**

- Yes  No

If yes, explain nature of crime, date and place:

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5. **Within the past ten (10) years, have you been released from jail, prison, probation or a work release program?**

- Yes  No

If yes, explain nature of crime, date and place:

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6. **Have you ever been convicted of crimes related to drugs, including, but not limited to, manufacture, delivery or possession with intent to manufacture or deliver a controlled substance?**

- Yes  No

If yes, explain:

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**PLEASE READ AND SIGN BELOW:**

I have read the information contained herein and 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 Cascade Christian Schools to make such investigations and inquiries as may be necessary in arriving at an employment or volunteer assignment decision. I hereby release Cascade Christian Schools and its employees from all liability in responding to inquiries in connection with my employee or volunteer application. In the event of an employment or volunteer assignment, I understand that any offer of employment or volunteer placement is contingent upon an acceptable outcome of the criminal history check. I agree that Cascade Christian Schools may, at its discretion, preclude me from employment or volunteer service if, among other reasons, I provide misleading or incomplete statements. I understand that I am required to abide by all policies, procedures and regulations of Cascade Christian Schools.

Signature

Date

Print Full Name

**PARENT/LEGAL GUARDIAN SIGNATURE FOR APPLICANT UNDER 18 YEARS OF AGE:**

Parent/Legal Guardian Signature

Date

Print Full Name

**CAMPUS AUTHORIZATION:**

Campus Administrator Signature

Date