

WASHINGTON STATE PATROL

Identification and Criminal History Section
PO Box 42633, Olympia WA 98504-2633



REQUEST FOR CRIMINAL HISTORY INFORMATION CHILD/ADULT ABUSE INFORMATION ACT RCW 43.43.830 THROUGH 43.43.845

<p>A REQUESTING AGENCY/ADDRESS</p> <p>Mount Baker School District Agency Tammy Baidson Attn P.O. Box 95 / 4956 Deming Road Address Deming, WA 98244 City/State/Zip</p> <p>I certify this request is made pursuant to and for the purpose indicated.</p> <p>_____ Authorized Signature Date</p> <p>_____ Title () Area Code/Phone Number</p>	<p>B PURPOSE Check appropriate box</p> <p><input checked="" type="checkbox"/> Educational School District (ESD)/School District Volunteer – no fee</p> <p><input type="checkbox"/> Non-Profit Business/Organization – no fee (Excluding Schools & ESD's)</p> <p><input type="checkbox"/> Profit Business/Organization - \$17</p> <p><input type="checkbox"/> Adoptive Parent - \$17</p> <p><input type="checkbox"/> Receive background results electronically</p> <p>Email address _____</p> <p>Password _____ (must be at least 8 characters)</p> <p>Fees: Make payable to Washington State Patrol by check, money order, or business account.</p> <p>Notary letters certifying the results are available upon request. There is an additional \$10.00 processing fee per notary seal.</p> <p>_____ Notarized Letter(s)</p>
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C APPLICANT OF INQUIRY (Please provide as much information as possible; name and date of birth are mandatory.)

Applicant's Name: _____
Last First Middle

Alias/Maiden Name(s): _____

Date of Birth: _____ Sex: _____ Race: _____
Month/Day/Year

Secondary dissemination of this criminal history record information response is prohibited unless in compliance with statute.

D WASHINGTON STATE PATROL IDENTIFICATION & CRIMINAL HISTORY SECTION

As of this date, the applicant named below has no record pursuant to RCW 43.43.830 through 43.43.845.

Mount Baker School District
Requesting Agency

Applicant's Signature

Applicant's Name

Address

City/State/Zip



VOLUNTEER APPLICATION

GENERAL INFORMATION

Name: _____ Home Phone: _____
Address: _____ Cell Phone: _____
Email Address: _____ Date of Birth: _____

Have you been known by another name? Yes No Former Name(s): _____

In what area are you interested in volunteering? _____

Do you have children in the Mount Baker School District? Yes No If yes, please list below.

Student Name	School	Grade/Teacher
_____	_____	_____
_____	_____	_____
_____	_____	_____

EMPLOYER INFORMATION

Current Employer: _____ Address: _____
Occupation: _____ Phone Number: _____

REFERENCES

Non family members whom we may contact:

Name: _____	Name: _____
Address: _____	Address: _____
Phone Number: _____	Phone Number: _____
Relationship: _____	Relationship: _____

In case of any emergency notify:

Name: _____	Phone Number: _____
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APPLICANT DISCLOSURE FORM PURSUANT TO CHAPTER 486, LAWS OF 1987

1. Have you ever been convicted of any crimes against persons? Yes No
If yes, please explain:
2. Have you ever been found in any dependency action, domestic relations proceeding or disciplinary board final decision to have sexually abused or exploited any minor or to have physically abused any minor? Yes No
If yes, please explain:

I certify under penalty of perjury according to the laws of the state of Washington that the forgoing is true and correct.

Signature of Applicant _____

Date _____



VOLUNTEER ASSUMPTION OF RISK

As a private citizen, not an employee of the Mount Baker School District, I hereby acknowledge that I have read, understood and agreed to the following:

1. I acknowledge that the volunteering may entail known and unanticipated risks which could result in physical or emotional injury, paralysis or death, as well as damage to my property, or to third parties.
2. I certify that I have no medical or physical conditions which could interfere with my safety in this activity, or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.
3. I acknowledge the District will make every attempt to insure my safety while participating in this volunteer project, but there are certain inherent risks involved that may be unavoidable resulting in bodily injury or property damage to me or others.

I further acknowledge the District does not provide any accidental medical insurance coverage or volunteer workers compensation coverage for the activity and that I assume all risks of injury or damage to my person or property. I agree to hold and save harmless the Mount Baker School District, its School Board and Employees, and assigns for any claims, suites or damages, (including but not limited to defense and indemnification) which might result from my participating in the above-described event.

4. I understand the Mount Baker School District makes no promises, guarantees, representations or warranties as to the safe condition, functionality or operability of any tools or equipment that I may use during this project.
5. I understand that the Mount Baker School District is not responsible for loss or damage to any equipment owned by me or others which I use during this project.
6. I understand that this is a volunteer activity and I will not make any wage or benefit claim against Mount Baker School District in connection with my voluntary participation in this activity.

Signature

Date

Signature of Parent or Guardian if volunteer is a minor (Under 18)

Date

Use of Tobacco and Nicotine Products and Delivery Devices

The board of directors recognizes that to protect students from exposure to the addictive substance of nicotine, employees and officers of the school district, and all members of the community, have an obligation as role models to refrain from use of tobacco products and delivery devices on school property at all times. Tobacco products and delivery devices include, but are not limited to, cigarettes, cigars, snuff, smoking tobacco, smokeless tobacco, nicotine, electronic smoking/vapor devices and vapor products, non-prescribed inhalers, nicotine delivery-devices or chemicals that are not FDA-approved to help people quit using tobacco, devices that produce the same flavor or physical effect of nicotine substances and any other smoking equipment, device, material or innovation.

Any use of such products and delivery devices by staff, students, visitors and community members will be prohibited on all school district property, including all district buildings, grounds and district-owned vehicles, and within five hundred feet of schools. Possession by, or distribution to minors is prohibited.

The use of Federal Drug Administration (FDA) approved nicotine replacement therapy in the form of a nicotine patch, gum or lozenge is permitted. However, students and employees must follow applicable policies regarding use of medication at school.

Notices advising students, district employees and community members of this policy will be posted in appropriate locations in all district buildings and at other district facilities as determined by the superintendent and will be included in the employee and student handbooks. Employees and students are subject to discipline for violations of this policy, and school district employees are responsible for the enforcement of the policy.

Cross References:	Policy 3200 Policy 3241 Policy 3416 Policy 5201 Policy 5280	Student Rights and Responsibilities Classroom Management, Corrective Actions or Punishments Medication at School Drug-Free Schools, Community And Workplace Termination of Employment
Legal References:	RCW 28A.210.310 Chapter 70.155 RCW RCW 28A.210.260	Prohibition on use of tobacco products on school property Tobacco – Access to Minors Public and private schools- Administration of Medication- Immunity from liability- Discontinuance, procedure.
Management Resources:	<i>Policy and Legal News</i> , July 2016 <i>Policy and Legal News</i> , February 2014 <i>Policy News</i> , December 2010 <i>Policy News</i> , October 2010	Use of Tobacco and Nicotine Substances policy updated to address vapor devices Addressing the Use of “Electronic” Cigarettes Electronic Cigarettes

Adoption Date: 01.13.11
Mount Baker School District
Classification: Essential
Revised: 08.08.13; 03.13.14; 08.16

I hereby acknowledge that I have read and understand MB Policy 4215:

Printed Name: _____

Signature: _____ Date: _____

Drug-Free Schools, Community and Workplace

The board has an obligation to staff, students and citizens to take reasonable steps to provide a reasonably safe workplace and to provide safety and high quality performance for the students who the staff serve.

For purposes of this policy, the "workplace" is defined to mean the site for the performance of work done, which includes work done in connection with a federal grant. The "workplace" includes any district building or any school property; any district-owned vehicle or any other district-approved vehicle used to transport students to and from school or school activities; and off district property during any school-sponsored or school-approved activity, event or function, such as a field trip or athletic event, where students are under the jurisdiction of the district which could also include work on a federal grant.

Prohibited Behavior

To help maintain a drug-free school, community, and workplace, the following behaviors will not be tolerated:

- A. Reporting to work or the workplace under the influence of alcohol, illegal and/or controlled substances, including marijuana (cannabis) and anabolic steroids.
Using, possessing, transmitting alcohol, illegal and/or controlled substances, including marijuana (cannabis) and anabolic steroids, in any amount, in any manner, and at any time in the workplace.
- B. Any staff member convicted of a crime attributable to the use, possession, or sale of illegal chemical substances or opiates will be subject to disciplinary action, including termination.
- C. Using district property or the staff member's position within the district to make or traffic alcohol, illegal and/or controlled substances, including marijuana (cannabis).
- D. Using, possessing or transmitting illegal and/or controlled substances, including marijuana (cannabis) and anabolic steroids.

Notification Requirements

Any staff member who is taking prescribed or over the counter medications will be responsible for consulting the prescribing physician and/or pharmacist to ascertain whether the medication may interfere with the safe performance of his/her job. If the use of a medication could compromise the safety of the staff member, other staff members, students or the public, it is the staff member's responsibility to use appropriate personnel procedures (e.g., use leave, request change of duty, or notify his/her supervisor of potential side effects) to avoid unsafe workplace practices. If a staff member notifies his/her supervisor that the use of medication could compromise the safe performance of his/her job, the supervisor, in conjunction with the district office, (e.g. human resources) then will determine whether the staff member can remain at work and whether any work restrictions will be necessary.

As a condition of employment, each employee will notify his or her supervisor of a conviction under any criminal drug statute violation occurring in the workplace. Such notification will be provided no later than 5 days after such conviction. The district will inform the federal granting agency within ten (10) days of such conviction, regardless of the source of the information.

Disciplinary Action

Each employee will be notified of the district's policy and procedures regarding employee drug activity at work. Any staff member who violates any aspect of this policy will be subject to disciplinary action, which may include termination. As a condition of eligibility for reinstatement, an employee may be required to satisfactorily complete a drug rehabilitation or treatment program approved by the district, at the employee's expense. Nothing in this policy will be construed to guarantee reinstatement of any

employee who violates this policy, nor does the district incur any financial obligation for treatment or rehabilitation ordered as a condition of eligibility for reinstatement.

The district may notify law enforcement agencies regarding a staff member's violation of this policy at the district's discretion or take other actions as the district deems appropriate.

Cross References:	Policy 4215	Use of Tobacco, Nicotine Products and Delivery Devices on School Property
	Policy 5280	Separation from Employment
Legal References:	RCW 69.50.435	Violations committed in or on certain public places or facilities — Additional penalty — Defenses — Construction — Definitions
	21 U.S.C. § 812	Controlled Substance Act
	20 U.S.C §§ 7101-7117	Safe and Drug-Free Schools and Communities Act
	41 U.S.C. §§ 8103	Drug Free Workplace Act Requirements for Federal Grant Recipients
Management Resources:	<i>Policy & Legal News</i> , December 2015	Policy Revisions
	<i>Policy & Legal News</i> , February 2013	Changes in WSSDA's <i>Policy Reference Manual</i>
	<i>Policy News</i> , December 2011	Bus drivers still tested for marijuana
	<i>Policy News</i> , February 1999	

Adoption Date: 08.13.09
Mount Baker School District
Classification: Essential
Revised: 06.10.10; 06.27.13; 1.28.16

I hereby acknowledge that I have read and understand MB Policy 5201:

Printed Name: _____

Signature: _____ Date: _____