



Richland School District

615 Snow Avenue www.rsd.edu
Phone 509-967-6000 Fax 509-942-2401

Volunteer Application

All volunteers will complete annually the Volunteer Application which includes a Washington State Patrol identification Background Search (RCW 43.43.830 through 43.43.845).

Washington State Patrol Identification & Criminal History Search

Name _____
Maiden Name or Alias _____
Birth Date _____
Address _____
City _____ State _____ Zip _____ Phone _____
Emergency contact person _____ Phone _____

Location Specifications

I would prefer to volunteer with Elementary Middle High school students

List School(s) preferred _____

Type of work preferred _____

Education and Training

Circle last year of school completed 9 10 11 12 College degree(s) _____

Vocational Training Yes No

Technical Skills _____

Employment Information

Company _____ Phone _____

Your job title _____ Your supervisor _____

Volunteer experience _____

Do you have any limitations that should be considered in your volunteer placement? Yes No

If yes, explain: _____

Do you have transportation? Yes No

I understand that by registering with the Richland School District, I may choose among the volunteer jobs referred to me and I am under no obligation to accept any placement unless I choose to do so. I also understand the above activities may involve an element of risk and agree to hold the Richland School District harmless against all claims, loss or liability.

Volunteer Signature _____

If under age 18, Parent/Guardian Signature also required _____