

Madrona K-8

Volunteer Background Check Form

9300 236th ST SW

Edmonds, WA 98020

Student Name	Center Name or Program

Please print legibly

Name:			
Legal Name Required	Last	First	Middle (required)
DOB:		Gender:	

Have you ever used another name? (i.e. Nick name, maiden name, other last names) Please list below:

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Address:			
	Street	Apt/Ste #	
	City	State	Zip

Phone:			
	Cell Phone	Home Phone	Work Phone

Email:	
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Have you ever been convicted of a crime? Yes No

Have you ever had findings made against you in any civil adjudicative proceedings? Yes No

Have you ever had both a conviction and findings made against you? Yes No

If you answered YES, to any of the above please an explanation below:

I am certifying that everything in this document is true and accurate. I am agreeing to have my background check run by Madrona K-8 for the purpose of volunteering at the school, for school field trips, and for school functions.

	Official Use Only
Print Name	
Signature Today's Date	