



**CONFIDENTIAL**  
**VOLUNTEER BACKGROUND CHECK AUTHORIZATION**  
**VISTA YOUTH CENTER**

**Applicant Disclosure and Authorization for Background Inquiry**

**Important Applicant Information:**

You are applying for an appointment to a position which may be directly responsible for the care, supervision or treatment of children or developmentally disabled persons. As provided by Washington State Law under RCW 43.43.830, applicants must provide a disclosure statement of certain civil adjudications, conviction records of crimes against persons and disciplinary board final decisions prior to appointment to positions which are directly responsible for the care, supervision, or treatment of children or developmentally disabled persons.

Vista Youth Center will make background inquiries of the above noted disclosures. Such inquiries may be made to State and/or Federal law agencies. Information obtained from the disclosure statement or from the background inquiries will not necessarily preclude appointment, but will be considered in determining the applicant's appointment. The use of these inquiries will be restricted to decisions on possible Vista Youth Center appointment.

If you wish to be considered for appointment, you must complete and sign this Applicant Disclosure and Authorization for Background Inquiry Form. Failure to complete and sign this form will disqualify you from VYC appointment. The information provided on this form will only be considered if you are referred for an interview.

A copy of the background inquiry information from State or Federal law enforcement agencies will be available to you upon request. VYC is not liable for defamation, invasion of privacy, negligence, or any other claim in connection with any lawful dissemination of information under RCW 43.43. VYC will not disseminate this information to a second party in compliance with RCW 10.97.

Upon acceptance of a position, VYC may require that an employee or volunteer provide the Federal Bureau of Investigation, United States Department of Justice with classifiable fingerprints to be used as further inquiry of the employee or volunteer's background, pursuant to and for the purpose set forth in Chapter 486, Laws of 1987.

State and Federal background checks and FBI fingerprinting will be completed at VYC's expense.



PLEASE TYPE OR PRINT

Applicant's Name: \_\_\_\_\_  
Last First Middle

Alias/Maiden Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ pounds Eye Color: \_\_\_\_\_

Please answer YES or NO to each listed item below. If you answer YES to any item, explain in the area provided or attach additional sheets indicating the charge or finding, date, court(s), and state involved.

1. Have you ever been convicted of any crimes against children or other persons as follows:

Aggravated Murder; First or Second Degree Murder; First or Second Degree Kidnapping; First, Second or Third Degree Assault; First, Second or Third Degree Rape; First, Second or Third Degree Statutory Rape (rape of a child); First or Second Degree Robbery; First Degree Arson; First Degree Burglary; First or Second Degree Manslaughter; First or Second Degree Extortion; Indecent Liberties; Incest; Vehicular Homicide; First Degree Promoting Prostitution; Communication with a Minor; Unlawful Imprisonment; Simple Assault; Sexual Exploitation of Minors; First or Second Degree Criminal Mistreatment; Child Abuse or Neglect as defined in RCW 26.44.020; First or Second Degree Custodial Interference; Malicious Harassment; First, Second or Third Degree Child Molestation; First or Second Degree Sexual Misconduct with a Minor; Patronizing a Juvenile Prostitute; Child Abandonment; Promoting Pornography; Selling or Distributing Erotic Material to a Minor; Custodial Assault; Violation of a Child Abuse Restraining Order; Child Buying or Selling; or Prostitution.

NO \_\_\_\_\_ YES \_\_\_\_\_ If YES, explain: \_\_\_\_\_

2. Have you ever been convicted of crimes related to the financial exploitation (First, Second or Third Degree Extortion; First, Second or Third Degree Theft; First or Second Degree Robbery; Forgery) Where the victim was a vulnerable adult?

NO \_\_\_\_\_ YES \_\_\_\_\_ If YES, explain: \_\_\_\_\_

3. Have you ever been found in any dependency action under RCW 13.34.030 (2)(b) to have sexually assaulted or exploited any minor, or to have physically abused any minor?

NO \_\_\_\_\_ YES \_\_\_\_\_ If YES, explain: \_\_\_\_\_

4. Have you ever been found in 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 any vulnerable adult or found by a court in a protection proceeding under RCW 74.34, to have abused or financially exploited a vulnerable adult?

NO \_\_\_\_\_ YES \_\_\_\_\_ If YES, explain: \_\_\_\_\_

I swear, under penalty of perjury that the above information is correct:

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Volunteer Application

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Referred by (if any): \_\_\_\_\_

### What position are you interested in volunteering for at Vista Youth Center?

- Task Force/Committee
- Special Events
- Technical Support
- Administrative Support
- Facility Facilitator  
(See below)
- Other: \_\_\_\_\_

#### **Facility Facilitator Time Preferences:**

There are six shifts for which we need adult facilitators. VYC may be open to youth three days as shown below. Please circle your shift preference on the day that best matches your availability:

Tuesday 3:30 to 6:00pm or 6:00 to 8:30pm

**Thursday 3:00 to 6:00pm or 6:00 to 8:30pm**

Friday 3:30pm - 6:30pm or 6:30pm – 9:30pm

Availability for non- Facility Facilitator volunteers: \_\_\_\_\_

#### **Educational Background:**

Name of School & Location    # of yrs attended    Major    Graduated/Degree

\_\_\_\_\_

\_\_\_\_\_



**Volunteer Experience** (please list any volunteer activities or hobbies you believe to be applicable):

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**Current Employer:**

Name of Company: \_\_\_\_\_

Address & Phone: \_\_\_\_\_

Title & Job Duties: \_\_\_\_\_

Dates of Employment: from: \_\_\_\_\_ to: \_\_\_\_\_

**Please tell us about your experiences relating to the position for which you are applying.** \_\_\_\_\_

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**Skills, interests and hobbies or other information you would like us to consider:** \_\_\_\_\_

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Do you have an existing relationship (i.e. relative, friend, etc.) with any current VYC youth members? (please circle)    Yes    No

If yes, please explain (attach a separate sheet if necessary): \_\_\_\_\_

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**References** (include name, relationship and phone number):

1.) \_\_\_\_\_

2.) \_\_\_\_\_

3.) \_\_\_\_\_



I understand that my volunteering with Vista Youth Center will be contingent upon proof of my identity and checking of my references. Further, I understand that as part of the application process, my background will be checked by the Washington State Patrol and/or FBI for any criminal history information. I certify by my signature below that I have read this statement, and that the information I have provided in this application is true and complete to the best of my knowledge.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**Additional Questions for Facilitators**

**Why are you interested in volunteering as a facilitator at Tri-Cities Youth Center?**

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**Do you have any prior experience working with youth and with at-risk or LGBTQ youth in particular? If so,**

**please describe:** \_\_\_\_\_

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## CONFIDENTIALITY AGREEMENT FOR VOLUNTEERS & VISITORS

Vista Youth Center offers a safe space for lesbian, gay, bisexual, transgender and questioning youth and their allies. Visiting or volunteering at Tri-Cities Youth Center during drop-in hours means that you may become aware of **PRIVILEGED INFORMATION**, such as a youth's sexual orientation or gender expression. In order to respect and protect the youth who access our services we ask that you read and sign this Confidentiality Agreement. Refusal to sign this agreement or abide by its conditions will result in denial of access during drop-in hours and possible termination of a volunteer position.

- Do not disclose under any circumstances the names of any youth, or adult volunteers you may see on our premises.
- Likewise, do not disclose under any circumstances, privileged information regarding any youth, or adult volunteer's perceived sexual orientation or gender expression.
- Do not initiate contact with youth from VYC in other locations. Allow the youth to acknowledge or approaches you first.
- Youth are the most important part of VYC's programs and maintaining their privacy is critical to our success. Even one small breach of confidentiality has the potential to destroy our youth's confidence in us.

I have read the above Confidentiality Agreement and agree to abide by the provisions set forth.

Print Name \_\_\_\_\_

Sign Name \_\_\_\_\_ Date \_\_\_\_\_

Vista Youth Center works with lesbian, gay, bisexual, transgender, intersex, queer and questioning youth and their allies to provide a safe place, education and advocacy to promote positive growth and self empowerment.