



City of Tukwila

RECEIVED

Tukwila City Hall
6200 Southcenter Blvd
Tukwila, WA 98188
Phone: (206) 433-1800 Fax: (206) 433-1833

Email: BoardsComms@tukwilawa.gov
Website: www.tukwilawa.gov

Application for Appointment BOARDS AND COMMISSIONS

Please complete the ENTIRE application form. Applicants may attach a cover letter and/or a resume totaling no more than three pages.

DATE: _____

NAME: _____
Last First M.I.

ADDRESS: _____
Street City Zip

MAILING ADDRESS (if different): _____

HOME PHONE: _____ CELL/MOBILE PHONE: _____

EMPLOYER: _____ E-MAIL: _____

Please check all that apply to you within the City of Tukwila limits:

- Resident
- Business Owner/Representative
- School District Representative
- High School Student

I wish to be considered for appointment to the following board or commission (check all that apply):

- | | |
|--|--|
| <p>COMMISSIONS:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Arts <input type="checkbox"/> Civil Service <input type="checkbox"/> Equity & Diversity <input type="checkbox"/> Parks <input type="checkbox"/> Planning | <p>BOARDS & COMMITTEES:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Community Police Advisory <input type="checkbox"/> Human Services <input type="checkbox"/> Library <input type="checkbox"/> Lodging Tax |
|--|--|

Other/Special Committee: _____

HAVE YOU PREVIOUSLY SERVED ON ONE OF THESE BOARDS OR COMMISSIONS? Yes No

If "yes", please list: _____

AVAILABLE TO ATTEND MEETINGS: Daytime Evenings

Please contact me regarding other City of Tukwila volunteer opportunities (check box):

FOR CITY USE ONLY:		
INTERVIEW DATE: _____	APPOINTED: <input type="checkbox"/> Yes <input type="checkbox"/> No	TERM EXPIRES: _____

Professional/Community Activities (organizations, clubs, service groups, etc):

Hobbies/Interests:

Qualifications as related to this position:

Other comments/additional information for consideration:

Applicant's Signature

Date



Background Screening Standards

The following policy guidelines are a reflection of the “Disqualification Standards” that the City of Tukwila has implemented for its Boards and Commissions and Volunteer Program. A person will likely be disqualified and prohibited from serving if the person has been found guilty of the following crimes:

SEX OFFENSES

All sex offenses – Regardless of the amount of time since offense.

Examples: Child molestation, rape, sexual assault, battery, sodomy, prostitution, solicitation, indecent exposure, etc.

FELONIES

All felony violence – Regardless of the amount of time since offense.

Examples: Murder, manslaughter, aggravated assault, kidnapping, robbery, aggravated burglary, etc.

All felony offenses (other than violence or sex) – within the past 10 years.

Examples: Drug offenses, theft, embezzlement, fraud, child endangerment, etc.

MISDEMEANORS

All misdemeanor violence offenses within the past 7 years.

Examples: Simple assault, battery, domestic violence, hit & run, etc.

All misdemeanor drug & alcohol offenses within the past 5 year or multiple offenses in the past 10 years.

Examples: Driving under the influence, simple drug possession, drunk and disorderly, public intoxication, possession of drug paraphernalia, etc.

Any other misdemeanor within the past 5 years that would be considered a potential danger to children or is directly related to the functions of that volunteer.

Examples: Contributing to the delinquency of a minor, providing alcohol to a minor, theft- if volunteer would be handling monies, etc.

Guilty means that a person was found guilty following a trial, entered a guilty plea, entered a no contest plea accompanied by a court finding of guilty, regardless of whether there was an adjudication of guilt (conviction) or a withholding of guilt.

This does not apply if criminal charges resulted in acquittal, Nolle Prose, or dismissal.

Anyone who has been charged for any of the disqualifying offenses or for cases pending in court will not be permitted to volunteer until the official adjudication of the case.



CITY OF TUKWILA

Boards & Commissions

6200 Southcenter Blvd., Tukwila, WA 98188

206-433-1800

Notification and Authorization for Background Investigation Disclosure Statement

In compliance with RCW 43.43.830-845, all applicants who have been offered a position as a volunteer, and in which position the person may have unsupervised access to children less than sixteen years of age, to developmentally disabled persons, or to vulnerable adults, are required to disclose the following information:

1.	<p>Have you ever been convicted of any crime against children or other persons*?</p> <p>* "Crime against children or other persons" (as identified in RCW 43.43.830) means a conviction of any of the following offenses: Aggravated murder; first or second degree murder; first or second degree kidnapping; first, second or third degree assault; first, second or third degree assault of a child; first, second or third degree rape; first, second or third degree 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; first or second degree custodial sexual misconduct; malicious harassment; first, second or third degree child molestation; first or second degree sexual misconduct with a minor; commercial sexual abuse of a minor; child abandonment; promoting pornography; selling or distributing erotic material to a minor; custodial assault; violation of child abuse restraining order; child buying or selling; prostitution; felony indecent exposure; criminal abandonment; or any of these crimes as they may be renamed in the future.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	<p>Have you been convicted of crimes relating to financial exploitation where the victim was a vulnerable adult?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	<p>Have you been found in any dependency action under RCW 13.34.040 to have sexually assaulted or exploited any minor or to have physically abused any minor?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	<p>Have you been found by a court in a domestic relations proceeding under Title 26 RCW to have sexually abused or exploited any minor or to have physically abused any minor?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	<p>Have you 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 a vulnerable adult?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	<p>Have you been found by a court in a protection proceeding under Chapter 74.34 RCW, to have abused or financially exploited a vulnerable adult?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No

If the answer is YES to any of the previous questions, please describe the location, date and facts of the conviction and make reference to the question being answered:

Please continue on the back →

The City of Tukwila shall make an inquiry to the Washington State Patrol and/or Southeastern Security Consultants, Inc. regarding an applicant's conviction record, disciplinary board final decision, or civil adjudication record. **Applicants will be notified of the results within 10 working days of receipt of this information by the City of Tukwila. A copy of the background screening results will be made available to the applicant upon request.**

I acknowledge that I have read the entire Notification and Authorization for Background Investigation Disclosure Statement, which I understand the requirements, and I grant permission to the City of Tukwila to make inquiry to the aforementioned organizations under the provisions of this law. 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.

**TO EXPEDITE THE BACKGROUND CHECK PROCESS
PLEASE PROVIDE ALL REQUESTED INFORMATION.
INFORMATION WILL BE KEPT CONFIDENTIAL.**

*****PRINT CLEARLY*****

Applicant's Name <i>(Print)</i>			Date of Birth		
Street Address			Social Security Number <small>(application cannot be processed without SSN)</small>		
City	State	Zip Code	Phone Number 1:		
Applicant's Signature		Date	Phone Number 2:		

City of Tukwila Processing Agent					Processed Date	
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Results Date:		Results:	<input type="checkbox"/> PASS	<input type="checkbox"/> FAIL	Applicant Notified:	No	Yes	Date:
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Notes: