

Request for Criminal History Information Child/Adult Abuse Information via Washington State Patrol

RCW 43.43.830 through 43.43.845

Please complete, sign, and date this form to be a volunteer in Mill A School District. Washington residents must physically present a valid Washington State Driver's License or State ID card. Return or mail the form to the Mill A School District office.

APPLICANT INFORMATION (Please clearly print name and date of birth)

Applicant Name				
	First	Middle	La	ast
Maiden/Alias Name				
Date of Birth (MM/DD/YYYY)///	Sex	Race	
Drivers Lic. Number				State
Mailing Address				
City			State	Zip Code
Email Address			_ Phone	
Children in School				
By signing below, I authorize Mill A School District personnel to request criminal history information from the Washington State Patrol.				
Applicant Signature			Date	