



Submit this form, along with a P-001, to your Appointing Authority. (For job applicants only)

APPLICANT INFORMATION: To be completed by applicant using Full Legal Name

Name as stated on Social Security Card: (Last, First, M)		Maiden Name/All known aliases:		Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Date of Birth:	Social Security Number:	Physical Address:			
Place of Birth:		Mailing Address (if different):			
Height: ft. in.	Weight: lbs.	Hair Color:	Eye Color:	Race:	Country of Citizenship:
Do you have a valid Driver's License: <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If you possess an out-of-state license, you must provide proof that it is valid.)</i>			Driver's License Number:		
			State Issued:		Expiration Date:
CRIMINAL DISCLOSURE: List convictions and incarcerations for (1) all prior felony offense(s), (2) all gross misdemeanor offense(s) and (3) all offense(s) involving theft, violence and/or sexual misconduct. Include those sentences that were suspended and/or deferred and those issued by a juvenile court where the defendant was 15 years of age or older at the time the offense was committed. Do not include convictions vacated by a court and removed from the official record.					
Date(s):	Crime(s):		If incarcerated: Give location(s) & Date(s) If not incarcerated: Please list disposition(s)		
If you have identified any convictions or incarcerations above, have you received final discharge from supervision, including all civil rights being restored? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Parks may not hire, continue to employ, allow volunteering or contracting with individuals who do not consent to a criminal background check or refuse to be fingerprinted; or with individuals who make false statements verbally or in writing regarding their criminal background. Any person making false statements regarding their criminal background may be denied employment or their employment terminated. As an **applicant, volunteer, or independent contractor**, by my signature below, I understand I may be fingerprinted and an FBI background check will be conducted. The information gathered may include, but not be limited to arrests and convictions, prior employment, and education. I understand untruthful or misleading answers or deliberate omissions will be cause for rejection of my application, removal of my name from eligible registers, or dismissal if employed or working as a volunteer or independent contractor.

Applicant Signature: _____ **Date:** _____

By completing, signing, and submitting this form, you are giving your authorization to release information. Please refer to the document provided to you for important information regarding background checks, and non-criminal justice applicant privacy rights.

EMPLOYER SECTION: Employee Requesting Background Check

Name of Person requesting background check:	Title:	Location:	Applicant Park Location:
TYPE OF REQUEST			
<input type="checkbox"/> Job Applicant <input type="checkbox"/> Volunteer <input type="checkbox"/> Concessionaires <input type="checkbox"/> Independent Contractor			

HUMAN RESOURCES/VOLUNTEER PROGRAM USE ONLY

WATCH CHECK

<input type="checkbox"/> CLEARED <input type="checkbox"/> WATCH HIT – Review Needed (See Review Section Below)	
<input type="checkbox"/> Returning employee	Year Finger Printed: _____ <input type="checkbox"/> SSCI
Date Completed:	Completed by:

DRIVER'S LICENSE CHECK

Valid Driver's License <input type="checkbox"/> Yes <input type="checkbox"/> No	Expiration:
Date Completed:	(COMPLETE THIS SECTION IF NOT VALID)
Completed by:	<input type="checkbox"/> License Suspended
	<input type="checkbox"/> License Restricted
	<input type="checkbox"/> License Expired <input type="checkbox"/> Supervisor Notified Date: _____

BACKGROUND HIT REVIEW WATCH PRINTS

Appointing Authority:	<input type="checkbox"/> Approved
Appointing Authority Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Recommended Denial <input type="checkbox"/> Supervisor Notified Date: _____
Completed By:	Signature: _____ Date: _____



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IMPORTANT INFORMATION FOR APPLICANTS/VOLUNTEERS/INDEPENDENT CONTRACTORS

The Washington State Parks and Recreation Commission (Parks) requires criminal background checks, in accordance with WAC 352-18-020, on job applicants, volunteers, and independent contractors who may have unsupervised access to children or vulnerable adults; or with persons who will be responsible for collecting or disbursing agency cash or processing credit/debit card transactions. It's necessary that applicants, volunteers, and independent contractors be carefully screened. A Conviction of a crime will not automatically preclude a person from working, volunteering, or contracting with Parks. The nature of the conviction and any extenuating or mitigating circumstances will be considered.

NON-CRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a non-criminal justice purpose (such as an application for a job or license, and immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification that your fingerprints will be used to check the criminal history records of the FBI.
- If you have a criminal history record, the officials making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the job, license, or other benefit based on information in the criminal history record.
- You have the right to expect that officials receiving the result of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure, or standard established by the National Crime Prevention and Privacy Compact Council.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <http://www.fbi.gov/about-us/cjis/background-checks>.
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34)

~PLEASE GIVE THIS PAGE TO APPLICANT~