



# MEAD

High School

302 West Hastings Rd  
Spokane, WA 99218  
MeadHS.Mead354.org  
@MeadHighSchool  
Facebook.com/MeadHS  
509.465.7000

## Panther Volunteer Form

Thank you for your interest in volunteering at Mead High School. We believe public schools are meant to be the hub of the community and partnering with you makes us better.

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

Mobile Number: \_\_\_\_\_ eMail: \_\_\_\_\_

Connection to Mead? (child, friend, business, etc.):

\_\_\_\_\_

Why do you want to volunteer @ Mead High School? \_\_\_\_\_

\_\_\_\_\_

### Get involved? YOU belong!

Please mark areas of interest.

- Academic Enrichment Support
- Academic Boosters
- Athletic Boosters
- Council for Learning Improvement (CLI)
- Dance Chaperone
- Panther Posse (presence before school, BIP, lunch, or after school)
- Performing Arts Boosters (list here: \_\_\_\_\_)
- Promote eScrip, Fred Meyer Rewards, other programs / fundraising efforts
- Obtain donations for our Panther PACE program (Character Edu / PBIS)
- Other [explain]: \_\_\_\_\_

I, \_\_\_\_\_, [print name] agree to a Conviction Criminal History Record (RCW 10.97) background check on an annual basis. Additionally, If an active investigation is taking place between checks, I will immediately notify school administration.

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

# WASHINGTON STATE PATROL

Identification & Criminal History Section

P.O. Box 42633

(360)705-5100

Request for Conviction Criminal History Record (RCW 10.97)

Instructions: Please complete this form and personally return to Mead High School for verification of your identification. If you are unable to personally return to Mead High School, a clear and legible photo ID is required. Identification must have photo, name, address, and D.O.B.

Student Requesting Visitor (if applicable): \_\_\_\_\_

Visitor's Name:

\_\_\_\_\_

Visitor's Affiliation [if applicable, i.e., business, organization, etc.]: \_\_\_\_\_

\_\_\_\_\_

NOTE: The requested record information is furnished solely on the basis of name and/or description similarity with the subject of your inquiry. Positive identification or non-identification can only be effected upon receipt of fingerprints. Application may be advised of inquiry.

Subject Information (please type or print clearly):

Applicant's name: \_\_\_\_\_

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

Date of Birth (month/date/year): \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_

Driver's License Number/State: \_\_\_\_\_

Office Use Only:

Check done by: \_\_\_\_\_ Date: \_\_\_\_\_