



KIDS Volunteer Application



- ✓ Complete the following and return with payment to: SafetyNET, 16462 Gothard St., Ste. C, Huntington Beach, CA 92647.
- ✓ All records will be held in confidence and on file at your child's school. Records are available at the applicant's request.

Section 1 – Applicant Information

Full Legal Name (<i>first, middle, last</i>):			
Previous Names (<i>maiden, alias, previous married, pre-adoptive, nicknames</i>):			
Date of Birth (<i>month, day, year</i>):	Social Security Number:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F	Race:
Current Address (<i>number and street, city, state, zip</i>):			
Home Telephone Number: ()	Cellular Number: ()	Email Address:	
List all countries / states resided in the past (10) years, with dates of residences: ----- -----			
Emergency Contact Name (<i>first, last</i>):	Emergency Contact Telephone Number: ()	Relationship with Emergency Contact:	
Have you ever been convicted of a felony or misdemeanor relating to the health and safety of another individual or child? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please explain:			
Have you ever been charged of a felony or misdemeanor relating to the health and safety of another individual or child? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please explain:			
Do you have a current protective order filed against you or do you have a protective order filed against someone else? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please explain:			

Section 2 – To be signed by the applicant of the background check

I hereby consent to a release of information and allow Los Alamitos Unified School District to retrieve from law enforcement agencies, the criminal justice systems and child protective services regarding any prior criminal history, arrest record, or child protective services history. I understand that it is necessary to ensure the safety of children and staff for which I will be involved. This authorization is valid for ninety (90) days from the date of this application. I also affirm, under the penalties of perjury, that the information in Section 1 is true and correct.

Signature:	Printed Name:	Date of Application (<i>month, day, year</i>):
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