

"leave no veteran behind and honor their service"

Veterans Treatment Court Background Check Permission Form

I hereby allow the Spokane Courts Programs to perform a check of my background, including:

- Criminal records
- Volunteer Experience
- Military Service
- Personal references

I understand that I do not have to agree to this background check, but refusal to do so may exclude me from consideration for Veterans Treatment Court volunteer positions and that all such information collected during the check will be kept confidential.

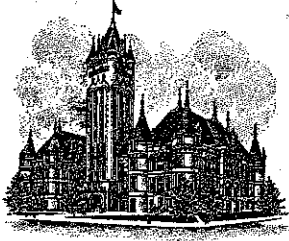
I hereby also extend my permission to those individuals or organizations contacted for the purpose of this background check to give their full and honest evaluation of my suitability for the mentor volunteer position and other such information, as they deem appropriate.

Print Full Name

Signed _____

Date

Date of Birth Phone Number(s)



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Volunteer Application Form

Name _____

Address _____ City _____ State _____ Zip Code _____

Phone (Day) _____ Phone (Evening) _____

E-Mail Address _____

Emergency Contact _____ Phone _____

Past Volunteer Experience (include organization/agency, position, supervisor phone/e-mail)

Employment (include most recent company, position, supervisor phone/e-mail)

Why do you want to volunteer with this organization? _____

How would you like to help this organization? _____

What are your hobbies, interests and skills? _____

Volunteer Experience

Name of Business	Dates	Responsibilities

References: Give the name, address, and phone/e-mail of three non-family members who can provide references on your ability to perform this volunteer position.

1. _____

2. _____

3. _____

Branch of Service (check one): Army Navy Marines Air Force Coast Guard
 Reserve Air National Guard Army National Guard

Dates of Service: From _____ to _____

Type of Discharge: _____

Have you served in a combat zone? (circle one) Yes / No

If Yes, in what combat zone did you serve? _____

What was your job in the U.S. Armed Forces? _____

What type of training did you receive in the Armed Forces? _____

Please send application to Spokane County Veterans Court Coordinator Tom Squires.

TASQUIRES@spokaneCounty.org

Spokane County District Court
Public Safety Bldg. 2nd Floor
1100 W Mallon Ave
Spokane, WA 99260