

APPLICATION FOR HUNTER EDUCATION VOLUNTEER INSTRUCTOR



Washington Department of
FISH and WILDLIFE

Instructions: Complete this application and mail to: **Washington Department of Fish & Wildlife - Hunter Education,
600 Capitol Way North – Olympia, WA 98502**

Legal Last Name: _____ Legal First Name: _____ MI: _____ Male Female Age: _____

Maiden Name: _____ Date of Birth: _____ Social Security Number: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Telephone #: _____ Office / Cell # _____ May we contact you at work? _____ E-mail Address: _____

Occupation: _____ Education Level: High School: _____ College: _____ Graduate: _____ Other: _____
(Enter last grade completed) (Enter years)

Briefly list any special qualifications, training, skills, or interest: _____

Briefly list your outdoor and / or education experience: _____

Clubs and other memberships: _____

Have you completed a Hunter Education course as a student within the past two years? Yes No If yes, when, where? _____

Have you completed a first aid course within the past three years? Yes No If yes, when, where? _____

Have you ever received a citation or been arrested for a violation of state or federal fish and wildlife laws? Yes* No *Answering yes does NOT automatically exclude you from consideration. (If you marked yes, please describe in detail on a separate sheet and include with application.)

Have you ever been charged and convicted of any other crime? Yes* No *Answering yes does NOT automatically exclude you from consideration, with the exception of any felony convictions. (If you marked yes, please describe in detail on a separate sheet and include with application.)

If selected as a Department of Fish & Wildlife volunteer instructor, I will volunteer the time to teach classes in accordance with policies and procedure outlined by the Department of Fish and Wildlife. I further certify that under penalty of perjury I have not committed a felony or crime of moral turpitude and that I will accept my responsibility as a Department of Fish and Wildlife Volunteer Instructor. I understand that any misrepresentations or concealment of material fact will be sufficient grounds for rejection of my application for certification. I also understand that a background investigation will be conducted as part of this application process. I hereby authorize such action by my signature below. Finally, pursuant to Section 1, Chapter 20, Laws of 1971, I hereby register as a volunteer worker for the State of Washington, Department of Fish and Wildlife.

SIGNATURE: _____ DATE: _____

Medical History (allergies and/or medical conditions)	_____
_____	_____
_____	_____
Emergency Contact Name	_____
Phone	_____
Day Phone #	Evening Phone #

As a registered volunteer for Washington State Department of Fish and Wildlife (WDFW) I agree to:

- volunteer my services to WDFW by my own free choice. I understand that I will receive no wages for the work performed.
- perform only volunteer duties that are assigned to me, according to WDFW policies, procedures.
- adhere to all WDFW standards regarding ethics, safety, nondiscrimination, confidentiality and respect for others, as well as abide by the laws and regulations of the State of Washington.
- complete any required training and adhere to all safety requirements. I will not accept any work assignment for which I feel I am not prepared.
- take responsibility for the safe use, maintenance and repair of any tools and safety equipment.
- assume all risks related to my assignment. I waive all claims for personal injuries or damages to property against the state of Washington and WDFW, and hold its officers and employees harmless from all claims and liabilities of whatsoever nature arising out of my participation in any, and all, aspects of WDFW's volunteer program.

DISCLOSURE AND AUTHORIZATION TO OBTAIN CONSUMER REPORTS FOR VOLUNTEER REGISTRATION PURPOSES

Please Read Carefully Before Signing the Authorization

DISCLOSURE

In considering you for the position of a volunteer Hunter Education Instructor, Washington Department of Fish and Wildlife (WDFW) will conduct a background check by ordering a consumer report about you that we obtain from a consumer reporting agency. The consumer report will focus on criminal history records. WDFW may rely on the material in the report in determining your suitability to serve as a Hunter Education Instructor.

Under the Fair Credit Reporting Act (FCRA), WDFW must have your written authorization before it can order a consumer report about you. If WDFW declines to accept you as a Hunter Education Volunteer Instructor and its decision is based in any part on information contained in the consumer report, WDFW will provide a copy of that report to you along with the name, address, and telephone number of the consumer reporting agency, and a summary of your rights under the FCRA.

AUTHORIZATION

I have read and understand the Disclosure, and by my signature below I authorize Washington Department of Fish and Wildlife to obtain and rely upon consumer reports in considering me for volunteer registration as a Hunter Education Instructor.

I also agree that this Disclosure and Authorization in original, faxed, photocopied, or electronic (including electronically signed) form will be valid for any consumer reports that may be requested about me by WDFW.

Printed Name

Applicant Signature

Date

Parent or Legal Guardian Signature
(for searches conducted on minors under
the age of 18)

Date