



Shaping
our community
together

CITY
OF **LACEY**

420 COLLEGE ST SE
LACEY, WA 98503

CITY COUNCIL

ANDY RYDER

Mayor

CYNTHIA PRATT

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JASON HEARN

LENNY GREENSTEIN

MICHAEL STEADMAN

RACHEL YOUNG

CAROLYN COX

CITY MANAGER

SCOTT SPENCE

February 11, 2019

Dear Lacey Family Fish In Volunteer:

The 2019 Lacey Family Fish In event will be held Saturday, April 13.

If you plan to volunteer again this year, please complete the enclosed authorization release form. New forms and background checks are done every year.

Looking forward to another successful event.

Sincerely,

Jenny Wilson

Recreation Supervisor

Lacey Parks and Recreation Department

360-491-0857

jwilson@ci.lacey.wa.us



TDD Relay
1-800-833-6388

City Council
(360) 491-3214

City Manager
(360) 491-3214

City Attorney
(360) 491-1802

Community Development
(360) 491-5642

Finance
(360) 491-3212

Park & Recreation
(360) 491-0857

Police
(360) 459-4333

Public Work
(360) 491-5600

Fax #
(360) 438-2669

Department/Person making request: PARKS & REC. / Jenny Wilson

Position being applied for: fish-in volunteer Is this a volunteer position? **(YES)** / NO (please circle one)



Authorization Release Form

I, Jenny Wilson, hereby authorize Sound Screening Services, Inc. ("SSS") and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report be generated for employment/seasonal employment/volunteerism with the City of Lacey.

I have received and read a Notice and Disclosure and I understand that the scope of the consumer report and/or investigative consumer report may include, but is not limited to, the following areas: without limitation, information concerning: verification of social security number, criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions, motor vehicle records to include traffic citations and registration. I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me to or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me to the City of Lacey or its agents. I further authorize the complete release of any records or data pertaining to me that the individual, company, firm, corporation, or public agency may have, including information data received from other sources.

I hereby release the City of Lacey, the Social Security Administration, and its agents, officials, representatives, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may, at any time, result to me, my heirs, family, or associates because of compliance with this authorization and request to release. You may contact me as indicated below.

I understand that this authorization is not an offer for employment/seasonal employment/volunteerism by the **City of Lacey** and that any false or misleading information I have provided to SSS may result in a refusal to hire, promote, reassign, or continue employment; or accept as a volunteer.

I also understand this authorization automatically expires 90 days from the date executed below and that I have the right to revoke the authorization at any time provided I do so in writing.

City of Lacey reserves the right to refuse to consider any application unless all questions are answered completely and honestly.

Date: _____ Signature _____

By checking this box, I have indicated that I would like a copy of a credit report if one is obtained by the **City of Lacey**.

Print Name: _____
(First) (Middle) (Last) (Maiden)

Former Name(s) and Dates used: _____

Current Address Since: _____
(Mo/Yr) (Street) (City) (State/Zip)

Previous Address Since: _____
(Mo/Yr) (Street) (City) (State/Zip)

Social Security #: _____ Date of Birth: _____

Telephone number: (____) _____ Drivers Lic # & State: _____

College: No ___ Yes ___ Name of College: _____

Location: _____
(City, State) _____

Dates Attended: _____ Graduation Date: _____ Degree: _____

Have you ever been convicted, pleaded nolo contendere, or paid a fine for any traffic violations in the past three (3) years? ___ Yes ___ No (This information will only be used if the position may drive a City vehicle.)

If yes, please explain ANY traffic violations in the past three years:

Convictions: ANY illegal drug activity? ___ Yes ___ No ANY crimes and/or felonies? ___ Yes ___ No

Please explain ANY convictions/incidents:

By signing below I acknowledge the above information is accurate and that I have read and understand the disclosure(s) given to me.

Signature: _____ Date: _____

Email address: _____

Lacey Family Fish In Volunteer
Return form to:
Lacey Parks and Recreation Dept.
Attn: Jenny Wilson
420 College ST SE
Lacey, WA 98503