The Tualatin Hills Park & Recreation District requests to be informed when a non-THPRD personal aid will be attending a program with a patron. We require a background check to be completed every 12 months for all non-THPRD personnel who are 18 years or older and will be attending THPRD programs with minors, older adults, or other vulnerable individuals.

Date: ______________________
Patron Name: ______________________ THPRD #: ______________________
Parent/Guardian Name: ______________________ Relation to Participant: ______________________
Day Phone: ______________________ Cell Phone: ______________________ Email: ______________________
Preferred Language of Communication: ☐ English ☐ Spanish ☐ Other: ______________________

Please list any accommodations the patron may be bringing with the aide (i.e. equipment, service dog):

________________________________________________________________________
________________________________________________________________________

Personal Aid Name: ______________________ Agency (if applicable): ______________________
Day Phone: ______________________ Cell Phone: ______________________ Email: ______________________
List certifications and/or qualifications: ______________________

Has personal aid completed THPRD’s background check within the last year? ☐ Yes ☐ No

Individuals with disabilities who wish to provide their own personal assistant during THPRD programs need to inform THPRD two (2) weeks prior to the start date of ANY program to ensure enough time for a background check to process and to ensure program is able to make adjustments for an additional person in program.

<table>
<thead>
<tr>
<th>Name of Class/Activity</th>
<th>Class Number (Starts with 2 Letters)</th>
<th>Location</th>
<th>Date(s)</th>
<th>Time(s)</th>
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Please use additional sheets if needed

- **RE-APPLICATION REMINDER:** Form must be completed & updated each term (quarter) to keep information current & to ensure adjustment can be made for personal aid in the program
- **PATRON/GUARDIAN RESPONSIBILITY:** Parents/Guardians are responsible to inform THPRD when a new personal aide will be attending program. A THPRD background check needs to have been completed within the last year from the start date of the program

Patron/Parent Signature: ______________________ Date: ______________________

Please email completed form to inclusion@thprd.org or drop off at Athletic Center
Non-THPRD Personal Aide/Caregiver

BACKGROUND CHECK CONSENT FORM

The Tualatin Hills Park & Recreation District is conducting a Background Check Program for all non-THPRD personnel who are 18 years or older and will be in THPRD programs with minors, older adults, or other vulnerable individuals. We are not anticipating any problems but we are committed to maintaining a quality and safe environment for all of the participants. All applications will be processed through the Criminal Information Services, Inc. database. Please supply ALL the requested information.

ALL APPLICATIONS AND RESULTS WILL REMAIN CONFIDENTIAL.

Please print or type all information.

Full Legal Name:

Last
First
Middle

Other Names Used (nicknames, maiden name, etc.):

Address:

Street
City
State
Zip

Birthdate:
Phone Number:

Driver’s License #:
State SSN#:

How long have you lived in Oregon?

If less than 7 years continuous in Oregon, please complete the following:

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<tr>
<th>City</th>
<th>State</th>
<th>County (if known)</th>
<th>Dates</th>
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Have you ever been convicted of any criminal offense? □ Yes □ No

If yes, please provide details below. Failure to disclose convictions will automatically disqualify your application.

Name (when charged)

Conviction Date (approx.)

Where occurred (city and state)

________________________________________________________________________

________________________________________________________________________

Applicants Signature: __________________________ Date: ______________

Witness’s Signature: __________________________ Date: ______________

Have you completed a Background Check Consent Form for THPRD in the past? □ Yes □ No

Year: _______________ I have volunteered for: ____________________________