



American Legion Auxiliary
Department of California

GUEST LEADER/COUNSELOR VOLUNTARY DISCLOSURE STATEMENT

Basic Information:		<i>This information is collected for the use of background checks only</i>						
LAST NAME:			FIRST NAME:			MIDDLE INITIAL:		
OTHER NAMES:								
BIRTH DATE:		SOCIAL SECURITY #:		DRIVR'S LICENSE#:		STATE:	EXPIRATION DATE:	
HOME ADDRESS:				CITY:		STATE:	ZIP CODE:	
PHONE NUMBER:				EMAIL:				
History Information:		<i>Previous residence(s) for the last five years</i>						
CITY:				STATE:		YEARS:		
CITY:				STATE:		YEARS:		
CITY:				STATE:		YEARS:		
CITY:				STATE:		YEARS:		
Background Information:							YES	NO
1. Have you ever been arrested and/or charged with a crime? (This includes all arrest and charges whether or not they were dismissed, deemed nolle prosequi, deferred adjudication, or found not guilty.)								
<i>If yes, please explain using a separate sheet.</i>								
2. Have you ever been convicted of any crime relating to any manner to children and/or your conduct with them?								
<i>If yes, please explain using a separate sheet.</i>								
3. Have you ever been adjudged liable for civil penalties or damage involving sexual or physical abuse of children?								
<i>If yes, please explain using a separate sheet.</i>								
4. Have you ever been convicted of any crime including, but not limited to, those listed below and/or any crime similar in any manner to those listed below?								
Indecent assault and battery on a child under fourteen								
Indecent assault and battery on a mentally handicapped person								
Indecent assault and battery on a person who has obtained the age of fourteen								
Rape								
Rape of a child under sixteen with force								
Assault with intent to commit Rape								
Kidnapping of a child under sixteen with intent to commit rape								
Distribution and trafficking of narcotics or other controlled substances								
Intent to commit any of the above crimes								
<i>If yes, please explain using a separate sheet.</i>								

5. Are you now, or have you ever been subject to any court order involving sexual or physical abuse of a minor, including, but not limited to a domestic order or protection?		
<i>If yes, please explain using a separate sheet.</i>		
6. Have your parental rights ever been terminated for reasons involving sexual or physical abuse of children?		
<i>If yes, please explain using a separate sheet.</i>		

I understand that:

- a. The American Legion Auxiliary (ALA) reserves the right to deny involvement as a guest counselor to any person who answers "yes" to any one of questions 1-6. If the ALA later discovers circumstances that would indicate a "yes" answer to any of the above questions, involvement as a guest counselor may be terminated immediately.
- b. The information provided on this form is subject to verification, which may include a criminal history check and request from any central registry of child abusers. *(A separate release form may be required.)*
- c. The ALA may terminate guest counselor involvement of any person if that person is found, regardless of when discovered, to: 1) have a history of complaints of abuse of a minor; or 2) been asked to resign from a position whether paid or unpaid, due to complaint(s) of sexual abuse of a minor; 3) and/or have falsified or omitted information in this disclosure statement.
- d. This disclosure statement must be updated yearly and immediate notification provided to the ALA if any information provided changes.

PRINT NAME:	SIGNATURE	DATE: