

### WESTFALL LOCAL SCHOOL DISTRICT VOLUNTEER APPLICATION

BOARD APPROVAL: DATE: 5/18/2009

RESOLUTION: 09-075 ITEM 1.14

FIRST NAME	LAST NAME	DATE
STREET	CITY	ZIP
HOME PHONE	WORK PHONE	CELL PHONE
E-MAIL		
VOLUNTEER AREA (SPORT; C	LASSROOM; CLUB)	
PAST VOLUNTEER ACTIVITIES	: (SCHOOL OR COMMUNITY)	
DO YOU HAVE A PUPIL ACTIVI	TY SUPERVISORY PERMIT:	EXPIRES:
REFERENCES: (Please list nam	e, address and phone number)	
3		
I authorize the Westfall Local Sch BCI/FBI background checks befor	ool District to contact my references an re approval to volunteer.	d request/view my
VOLUNTEER'S SIGNATURE		DATE
rights. I also understand that I wil	must maintain confidentiality to insure part of the light	ninistrative guidelines
VOLUNTEER'S SIGNATURE		DATE

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### Whell's has bra?

The DMA is a questionnaire that must be completed by certain applicants to certify that they have not provided "material assistance" to a terrorist organization (Sections 2909.32, 2909.33, and 2909.34 of the Ohio Revised Code).





www.homelandsecurity.ohio.gov



WWW.PUBLICSAFETY.OHIO.GOV

HLS 0046 5/10

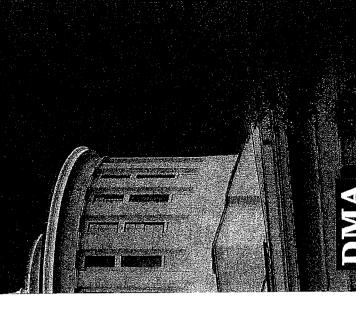
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### AMC

DECLARATION REGARDING MATERIAL ASSISTANCE / NONASSISTANCE TO A TERRORIST ORGANIZATION



### Who Must Complete and Submit the DMA?

The DMA form applies to applicants for:

- Certain state issued licenses
- All candidates under final consideration for public employment
- Business contracts with, and funding from, any state, county or local government entity in an annual aggregate amount greater than \$100,000.00
- Private entities that wish to do business with any state, county or local government entity that adopts procedures requiring precertification

### How are the DMA Forms Distributed?

All DMA forms and reference information can be found on the Ohio Homeland Security Division Web site. The forms are in PDF format. The issuing agency or entity is responsible for either directing applicants to the forms on the Web site, or printing and providing hard copies to the applicant.

# Who Retains the Completed Forms once they are Submitted?

The issuing agency or entity will retain the completed forms along with the application.

# What Procedures are to be Followed if an Applicant Provides a Positive Indication?

The issuing agency must deny the application and notify the Department of Public Safety's Homeland Security Division of the positive indication.

# Can an Applicant Request a Review of a Denial of their Application based on a Positive Indication on the DMA?

An applicant may request a review of the denial of their application. The request must be made to the Department of Public Safety's Homeland Security Division. Instructions for filing a request appear on the DMA forms.

## DMA training for administrators is available online at:

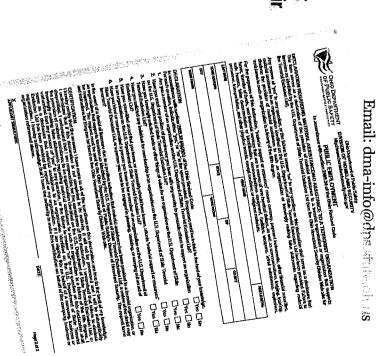
http://www.homelandsecurity.ohio.gov/

The DMA forms, review request forms and reference documents are available online at

http://www.homelandsecurity.ohio.gov/

Please direct questions to Ohio Homeland Security.

DMA Information Hotline: (614) 644-3892
Fax: (614) 752-2419





### OHIO DEPARTMENT OF PUBLIC SAFETY DIVISION OF HOMELAND SECURITY http://www.homelandsecurity.ohio.gov

### PUBLIC EMPLOYMENT

In accordance with section 2909.34 of the Ohio Revised Code

### DECLARATION REGARDING MATERIAL ASSISTANCE/NONASSISTANCE TO A TERRORIST ORGANIZATION

This form serves as a declaration by an applicant for public employment of material assistance/nonassistance to an organization on the U.S. Department of State Terrorist Exclusion List ("TEL"). Please see the Ohio Homeland Security Division Web site for a copy of the TEL.

Any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided. Failure to disclose the provision of material assistance to such an organization or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree.

For the purposes of this declaration, "material support or resources" means currency, payment instruments, other financial securities, funds, transfer of funds, financial services, communications, lodging, training, safe houses, false documentation or identification, communications equipment, facilities, weapons, lethal substances, explosives, personnel, transportation, and other physical assets, except medicine or religious materials.

communications equipment, facilities, weapons, lethal substances, explosives, personnel, transportation, and other physical assets, except medicine or religious materials.								
LAST NAME	RST NAME			MIDDLE INITIAL				
HOME ADDRESS								
CITY	STATE		ŽIP	COUN	ITY			
HOME PHONE		WORK PHO	NE .					
<ul> <li>DECLARATION</li> <li>In accordance with section 2909.32 (A)(2)(b) of the For each question, indicate either "yes," or "no" in the 1. Are you a member of an organization on the U.S. I</li> <li>2. Have you used any position of prominence you ha organization on the U.S. Department of State Terror</li> <li>3. Have you knowingly solicited funds or other things State Terrorist Exclusion List?</li> <li>4. Have you solicited any individual for membership i Exclusion List?</li> <li>5. Have you committed an act that you know, or reas resources" to an organization on the U.S. Department.</li> <li>6. Have you hired or compensated a person you know Department of State Terrorist Exclusion List, or a person you tan act of terrorism?</li> </ul>	space provide Department of Ve With any co- orist Exclusion of Value for an an organizati onably should tent of State Tent of the provided the provi	d. Responses State Terrorist untry to persua List? n organization of ion on the U.S. have known, a errorist Exclusion	Exclusion List?  Inde others to support the U.S. Department of Solution of List?	port an rtment of state Terrorist upport or	knowledge.  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No			
If an applicant's employment is denied due to a positive Safety to review the denial. Please see the Ohio Hom	/e indication or eland Security	n this form, the Web site for ir	applicant may re oformation on hov	equest the Ohio D v to file a request				
CERTIFICATION I hereby certify that the answers I have made to all understand that if this declaration is not communicated. I understand that I am responsible the provision of material assistance to an organize knowingly making false statements regarding may understand that any answer of "yes" to any questerve as a disclosure that material assistance exclusion List has been provided by myself or a organization, I hereby acknowledge that I have the organization referenced above.	all of the quest pleted in its for the correct zation identifit aterial assistation, or the form or gan	etions on this entirety, it was ciness of this ed on the U.S ance to such ailure to ansvi	declaration are ill not be procedeclaration. I to an organization wer "no" to any ideal on the U.	true to the best essed and I will understand that of State Terrorist is a felony of question on this S. Department	of my knowledge. I be automatically failure to disclose Exclusion List, or the fifth degree. It declaration shall of State Terrorist			
APPLICANT SIGNATURE X					DATE			

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Forms not conforming to the specifications listed below or not submitted to the appropriate agency or office will not be processed.

To complete this form, you will need a copy of the Terrorist Exclusion List for reference. The Terrorist Exclusion List
can be found on the Ohio Homeland Security Web site at the following address:

http://www.homelandsecurity.ohio.gov/dma/dma.asp

- Be sure you have the correct DMA form. If you are applying for a state issued license, permit, certification or registration, the "State Issued License" DMA form must be completed (HLS 0036). If you are applying for employment with a government entity, the "Public Employment" DMA form must be completed (HLS 0037). If you are obtaining a contract to conduct business with or receive funding from a government entity, the "Government Business and Funding Contracts" DMA form must be completed (HLS 0038).
- Your DMA form is to be submitted to the issuing agency or entity. "Issuing agency or entity" means the government agency or office that has requested the form from you or the government agency or office to which you are applying for a license, employment or a business contract. For example, if you are seeking a business contract with the Ohio Department of Commerce's Division of Financial Institutions, then the form needs to be submitted to the Department of Commerce's Division of Financial Institutions. Do NOT send the form to the Ohio Department of Public Safety UNLESS you are seeking a license from or employment or business contract with one of its eight divisions listed below.
- Department of Public Safety Divisions:

Administration
Ohio Bureau of Motor Vehicles
Ohio Emergency Management Agency
Ohio Emergency Medical Services

Ohio Homeland Security\*
Ohio Investigative Unit
Ohio Criminal Justice Services
Ohio State Highway Patrol

 \* DO NOT SEND THE FORM TO OHIO HOMELAND SECURITY UNLESS OTHERWISE DIRECTED. FORMS SENT TO THE WRONG AGENCY OR ENTITY WILL NOT BE PROCESSED.