



Greetings from the Meridian Parent Partnership Program!

Who we are:

MP3 is a program within the **Meridian School District** which offers educational options to families who desire a greater role in educating their children than traditional public schooling can provide.

Why we have sent you this packet:

Many community partners serve as off-site “Community Based Instructors” (CBI) to these students as part of each family’s choice in education. As such, we are able to reimburse families for approved educational expenses *provided we have approved all necessary information from each CBI.*

The following family has requested your approval as a CBI: _____

If you choose not to participate in our program as a CBI, parents may continue with services, but these services cannot be reimbursed from the student’s educational fund.

What we need from you:

We appreciate your timely completion of the accompanying documentation and look forward to partnering with you to serve MP3 families! Should you have any questions regarding the MP3 program or documentation requirements, please contact Faith Gallatin at (360) 815-0204 or fgallati@meridian.wednet.edu.

<u>Form or Attachment Name:</u>	<u>What we use it for:</u>
1. CBI Questionnaire	Basic information about your service(s)/facility
2. Resume	Specific qualifications/education, experience, and references
3a. Disclosure Statement	Criminal Background Check per RCW 28A.400 and RCW 3.43
b. Fingerprint Card	In addition to above for <u>unsupervised</u> contact with students
4. Policy/Procedures	To communicate clear expectations
5. W-9*	*Optional: Direct pay from the District via a Purchase Order
6. Certificate of Insurance	Proof of liability/homeowners insurance (facility where instruction occurs) (Certificates can also be faxed directly to us by the agent at (360) 398-1759.)

Washington State Patrol Request for Criminal History and Disclosure Statement:

In order to ensure the safety and well-being of our students, we are required to complete a background check on all instructors. If your organization has more than one employee, you may request additional forms *or* provide a written document stating that all employees have passed the WSP background checks. The WSP form should be returned with other forms in this packet.

We encourage all instructors to always have another adult present at the time of instruction, but if your interaction and contact with students will be **unsupervised** at any time (no other adult/parent present), we require a current fingerprint card.

How to get fingerprinted: If your fingerprints are on file with another employer, please submit a legible copy to our office. Otherwise, the following options are available: **1.** The ESD process is electronic and does not require a card, but does require that you travel to Anacortes (travel is not reimbursable). **2.** A fingerprint card and instructions are included with this packet and may be taken to your local police department (Please read instructions carefully).

In order to be reimbursed for your costs in this process, please submit your receipt from the fingerprinting agency with your application documents. Once you are cleared through the OSPI system, MP3 will reimburse you for the \$46.25 OSPI fee plus the agency’s cost.

We will not reimburse any fee for fingerprinting which returns a criminal activity response.

Thank you for your assistance in this process and for your contributions to the educational enrichment of Meridian Parent Partnership Program students. We look forward to working with you!

Sincerely,

Maggie Bagwell, Vice Principal
Meridian Parent Partnership Program (MP3)
mbagwell@meridian.wednet.edu

MP3 Staff:

Please consider my application for approval as a Community Based Instructor. I have enclosed the following:

CBI Questionnaire

Resume/Qualifications

Applicant Disclosure Statement

Board Policy and Procedure Acknowledgement

***Date Fingerprint Card Sent In** (if applicable) ____/____/____

***W-9 form** (only if requesting direct payment)

Certificate of Insurance (___ check if to be faxed by agent)

Please attach the following here, if applicable:

Cancelled fingerprint check or receipts
Brochure or class schedule
Business Card
Hours of Operation
Etc.



Meridian Parent Partnership Program

**Community Based Instructor (CBI)
 Questionnaire**

Business/Organization Information	Contact Information
Name:	Name:
Address:	Position within organization: Director ____ Coach ____ Other: _____
City, State ZIP:	1. Will you or any employees have unsupervised (no other adult present) access to MP3 students? _____ If yes, fingerprint cards are required. 2. Are private lessons available through this organization? _____ 3. Pending approval, may we post a link to this organization on our website? _____ If yes, please clearly print the link address:
Office Phone:	
Cell Phone:	
Fax:	
Email:	
Services/instruction provided by you/your firm and location of services: _____ _____ _____ _____	
Signature: _____ Date completed: _____	