

PERSONAL INFORMATION NEEDED FOR BACKGROUND CHECK

Please supply the following information to facilitate a background check on you.

If Chaperoning, Student's Name: _____
Last Name: _____ First Name: _____ MI: _____
Social Security Number: _____ - _____ - _____ Date of Birth: ____/____/____

Other Name(s) Maiden/Married: _____
Driver's License Number: _____ State: _____

Email Address: _____

RESIDENCES (Starting with current. If not enough room, please use back of sheet)

Street Address: _____ City/State: _____ Years: _____
Street Address: _____ City/State: _____ Years: _____
Street Address: _____ City/State: _____ Years: _____
Street Address: _____ City/State: _____ Years: _____

Pursuant to State law, I represent that (check one)

_____ A. I have not been convicted of, or pled guilty or nolo contendere (no contest) to any crimes.

_____ B. I have been convicted of or pled guilty or nolo contendere (no contest) to the attached crimes (use the back or a separate sheet to explain nature of conviction, date and court):

I understand and agree that, pursuant to the law,

- A. The Board of Education must request a criminal history check on me from the police or a Certified Background Check Company as designated by the District;
- B. Until that report is received and reviewed by the District, I am regarded as a conditional employee; and
- C. If the report received from the police or the Certified Background Check Company is not the same as my representation(s) above respecting either the absence of any conviction(s) or any crimes of which I have been convicted, my employment contract is voidable at the option of the District.

I hereby authorize such a records check.

Date Signature Phone Number