

Sheridan School District
Volunteer Background Check Release Form

Last Name	First Name	Middle Name or Initial
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Maiden or other name(s) used in any and all other records of birth or records of residence

*Address	Driver's License #/ State of Issuance
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City	County	State	Zip
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Date of Birth	Social Security Number	**Gender	**Race
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Email address	Phone Number
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I, _____, am an applicant for employment/volunteerism with the Sheridan School District and have been advised that as a part of the application process, the Sheridan School District conducts a criminal background history check. I do hereby consent to the Sheridan School District to use any information provided during the application process in performing the criminal history check. The Sheridan School District has informed me that I have the right to review and challenge any negative information that would adversely impact a decision to offer employment/volunteerism. In addition, I have been informed that I will have a reasonable opportunity to clear up any mistaken information reported within a reasonable time frame established within the sole discretion of the Sheridan School District. Under the Fair Credit Reporting Act, I have been advised that upon request I will be provided the name, address and telephone number of the reporting agency as well as the nature, substance and source of all information.

The following are my responses to questions about my criminal history (if any).

1. ____Yes ____No Have you ever been convicted or plead guilty before a court for any federal, state or municipal criminal offense? (exclude minor traffic misdemeanors). If yes, please provide details below.

State: _____ County: _____ Date of Offense: ____ / ____ / ____

Details of Conviction: _____

2. ____Yes ____No Have you ever received deferred adjudication or similar disposition for any federal, state or municipal offense? If yes, please provide details below.

State: _____ County: _____ Date of Offense: ____ / ____ / ____

Details of Offense: _____

3. ____Yes ____No Have you ever received probation or community supervision for any federal, state or municipal offense? If yes, please provide details below.

State: _____ County: _____ Date of Offense: ____ / ____ / ____

Details of Supervision: _____

4. ____Yes ____No Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States? If yes, please provide details below.

State: _____ County: _____ Date of Offense: ____ / ____ / ____

Details of Conviction: _____

5. ____Yes ____No As of the date of this consent form, do you have any pending charges against you? If yes, please provide details below.

State: _____ County: _____ Date of Offense: ____ / ____ / ____

Details of Pending Charges: _____

THIS SECTION IS TO BE USED TO LIST ALL COUNTIES AND STATES OF RESIDENCE SINCE HIGH SCHOOL GRADUATION OR AGE 18.

CITY/TOWN	COUNTY	STATE

I HEREBY CERTIFY THAT ALL INFORMATION PROVIDED IN THIS CONSENT FORM IS TRUE, CORRECT, AND COMPLETE. IF ANY INFORMATION PROVES TO BE INCORRECT OR INCOMPLETE I UNDERSTAND THAT GROUNDS FOR CANCELING OF ANY AND ALL OFFERS OF EMPLOYMENT/VOLUNTEERISM WILL EXIST AND MAY BE USED AT THE DISCRETION OF THE COMPANY.

Signed this _____ day of _____, 20 _____

APPLICANT (PRINT NAME) _____

APPLICANT SIGNATURE _____