



BRISTOL SCHOOL DISTRICT #1

GUARDIAN/VOLUNTEER CRIMINAL BACKGROUND CHECK CONSENT FORM

Bristol School District #1 takes seriously its obligation to provide a safe environment for all individuals involved in education in this district. It is the policy of Bristol School District #1 to conduct comprehensive criminal background checks of guardians and volunteers. The information provided below will only be used to conduct such a background check.

Full Name: _____ Social Security #: _____

Address: _____ City, State, Zip: _____

Phone Number: _____ Driver's License #: _____

Date of Birth: _____ Gender: _____ Race: _____

How long at current address: _____ Number of years as WI resident: _____

If less than 1 year at the address above, provide previous address: _____

Previous City/State if less than 10 years in WI: _____

Has your driver's license ever been suspended or revoked? yes no

Have you ever been convicted of a crime involving a minor (including a deferred imposition of sentence)? yes no

Other than a minor traffic violation, have you ever been convicted of a felony or a misdemeanor? yes no

If "yes", explain: _____

Are there charges pending against you at this time? yes no

If "yes", explain: _____

Have you used or been known by any other name(s)? yes no

If yes, what full name(s) have you used? _____

- I certify to the best of my knowledge that all information provided above is true and correct.
- I understand that misrepresentations or omissions may be cause for rejection.
- I understand that Bristol School District # 1 will review my background, verify information and conduct a complete criminal background check at no expense to me. I voluntarily and knowingly authorize any government agency, its officers, employees and agents to release any and all information regarding my criminal history to Bristol School District # 1, its officers, employees and agents.
- I understand that the District reserves any right to deny my application to volunteer. I further understand that the opportunity to volunteer will depend upon the results of the criminal background check. (Information obtained will not automatically disqualify you from consideration).

With my signature below, I hereby authorize Bristol School District #1 to conduct a criminal background check.

Signature: _____ Date: _____

Child(ren)'s names and grades: _____

Child(ren)'s names and grades: _____

The Privacy Act of 1974 requires that an agency provide the following notice to each individual whom it asks to supply a social security number. The authority for requesting and using your social security number here is found in 20 U.S.C. section 123g. Disclosure of the social security number is voluntary; however, failure to provide the number may result in denial of the application. The social security number will be used for any and all necessary and usual identification and reference purposes associated with your application and continuation as a volunteer.

Bristol School District No. 1 is an Equal Opportunity Employer with established policies prohibiting discrimination on the basis of age, race, creed, religion, color, sex, national origin, disability or handicap, sexual orientation, or political affiliation in an educational program, activity, or employment in the District. Background checks are conducted through the WI Department of Justice's Wisconsin Online Record Check System.

ATTENTION:

DISTRICT OFFICE

BRISTOL SCHOOL DISTRICT #1