

SCHOOL DISTRICT OF ELLSWORTH
CONSENT TO CONDUCT CRIMINAL BACKGROUND CHECK

CONFIDENTIAL

NOTE TO APPLICANTS: The School District of Ellsworth conducts criminal background checks for all new hires. A criminal conviction or pending criminal charge may be a factor in the hiring decision. An actual check of conviction records and/or pending criminal charges will be conducted only if you are a finalist for the position. The information requested below is required to conduct a criminal history background check and will not be used for any other purpose. Discrimination on the basis of age, gender, race or any other protected class status is prohibited by District policy.

A record of conviction and/or pending criminal charges is not an absolute bar to employment. Such information will be considered only if there is a substantial relationship between the circumstances of the conviction and/or pending charge and the position being applied for. Your completion of this form is part of your application process. Applicants must fill out the form accurately and completely. Applicants who fail to complete the form will not be further considered for employment. An applicant's failure to accurately and completely disclose his or her criminal conviction history may be grounds for removal from further consideration for a position.

Please print (*for identification purposes only*):

NAME: _____
First Middle Last

OTHER NAMES YOU HAVE USED:

CURRENT ADDRESS

_____ *Street City State Zip*

PREVIOUS ADDRESSES (most recent*) (**Only if you have not lived at your current address for three years*)

_____ *Street City State Zip*

DATE OF BIRTH: _____ SOCIAL SECURITY NUMBER: _____
Month/Day/Year

GENDER: (*Check one*) _____ Female _____ Male

Have you ever been convicted of a felony, misdemeanor or ordinance violation (including receipt of a fine) other than non-moving traffic violations? Failure to disclose a conviction for any felony will be considered an intentional omission. Please make every effort to be as accurate as possible when disclosing felonies, misdemeanors or ordinance violations.

Yes _____ No _____ If yes, indicate below: (*Nature of the Offense, Date of Conviction, Name/Location of Court*)

3. Do you have any charges **pending** against you? Yes _____ No _____ If yes, please indicate the nature of the charges:

Additional Information:

Attach additional sheets if necessary

I agree that the District may conduct a criminal history background check. To the best of my knowledge, the information provided on this form is true and complete. I understand that falsification or omission of information constitutes grounds for not hiring me or for dismissal.

Signature of Applicant Date

FOR OFFICE USE ONLY- To be completed by administrator/person requesting background check

Is this named person a volunteer who works with or has access to students? _____ Yes _____ No

Administrator/requestor signature: _____

For all volunteers identified as "Yes", screening shall be completed through the Sex Offenders Registry Site.

(<http://www.nsopw.gov>) Date of screening: _____ Signature: _____