

ST. LOUIS PUBLIC SCHOOLS

**St. Louis Public Schools Consent Form to Obtain
Conviction Criminal History File Searches**

As a prospective volunteer/employee of the St. Louis Public Schools, I understand that it is the policy of the St. Louis Public Schools to secure conviction criminal history information as part of the screening process using the information provided below. (This form has been developed for your safety and the safety of other volunteers/employees and students involved with St. Louis Public Schools).

NAME _____
Last First Middle

Maiden Name/Names Previously used

Race: White ☐ Black ☐ Asian or Pacific Islander ☐
Unknown/Other ☐ American Indian or Alaskan Native ☐

Sex: Male ☐ Female ☐

Birth Date _____ Phone Number _____

Address _____ City _____ Zip Code _____

I understand that the above information is required by the Central Records Division of the Michigan State Police, Lansing, Michigan, and by the Federal Bureau of Investigation. I authorize the St. Louis Public Schools to utilize the above information for the sole purpose of obtaining conviction only criminal history file searches. The district will also be checking the sexual offenders' website.

I understand that information gathered in these criminal history file searches will be used by St. Louis Public Schools in reaching voluntary/employment status decisions.

(Signature of Prospective Volunteer/Employee)

(Date)

(School that you will be volunteering/working at)

Please return this form to: St. Louis Public Schools
Central Office c/o Carol Salladay
113 E. Saginaw
St. Louis, MI 48880
(989) 681-2545

PLEASE READ BEFORE SIGNING:

I understand that:

- I. The information I have provided may be verified, and I give permission to the St. Louis Public Schools to make inquiry of others concerning my suitability to act as a St. Louis Public Schools Volunteer/Employee.
- II. In the course of volunteering/working for the St. Louis Public Schools, I may be dealing with confidential information, and I agree to keep said information in the strictest confidence.
- III. The relationship between the St. Louis Public Schools and volunteers/employees is an “at will” arrangement and may be terminated at anytime without cause by either the volunteer/employee or the St. Louis Public Schools; and
- IV. I grant St. Louis Public Schools permission to use my likeness, voice and words in television, radio film, or any form to promote activities of St. Louis Public Schools.

If there are any changes in the above information, I will inform the St. Louis Public Schools. I affirm that I have read the above information, and the information I have given is true and complete.

Signed _____
(Volunteer/Employee) (St. Louis Public Schools)

Date _____

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