## **CRIMINAL HISTORY RECORD INFORMATION REQUEST**

## Confidential\*

The Code Chapter 22, Su independent contract below is necessary to	bchapter C to revie tors, student teache	ew the criminal hi	story of app unteers. Th	licants, employ	ees,
Please print.					
Name		First			Middle
Driver's License Mailing Address	State and Nun	nber			
	Street	City	S	tate	Zip
Sex: ☐ Male ☐ I	Female	Ethnicity:	☐ Black	☐ White/Othe	er
I understand that the determine eligibility history record inform	for employment be			-	
Signature					
Date					



<sup>\*</sup> This form will be removed from the application and filed separately in the HR office.