

## \*\*THIS INFORMATION WILL BE USED FOR A CRIMINAL BACKGROUND CHECK\*\*

## A COPY OF YOUR DRIVERS LICENSE WILL NEED TO BE PROVIDED TO PERSONNEL IN ORDER TO COMPLETE THE CRIMINAL BACKGROUND CHECK

Last Name:	First Name:				M.I		
Address:						<del> </del>	
City:		State:_		Zip:	1 1 1		
Phone:	Birth Date:		Race	G	ender		
Driver's License#:							
Volunteering in Buildir	ng (s): Please circle <b>ALL</b>	THAT	APPLY:				
High School East	High School West		East Middle School			West Middle School	
Anderson Elementary	Brendel Elementary		Cook Elemen	ntary	India	n Hill Elementary	
Mason Elementary	McGrath Elementary	Myers	Elementary	Perry C	Center	Reid Elementary	
Other:							
Volunteer Signature:_	Date:						
Supervisor Signature:			Date:	· · · · · · · · · · · · · · · · · · ·			
~FOR OFFICE USE ON	all Vo.						
	Results:	Che	cked hv				