

CRIMINAL HISTORY RECORD INFORMATION REQUEST

VOLUNTEERS

CAMPUS: _____

STUDENT'S NAME: _____

ORGANIZATION: _____
(Example: Band, Choir, etc. if applicable)

Confidential

The Jacksonville Independent School District is required by state law to review the criminal history of applicants, employees, student teachers, and volunteers. The information requested below is necessary to obtain and verify criminal history record information.

Please print:

Name: _____
Last First Middle Maiden

Other names that may appear on records: _____

Date of Birth: _____

Driver's License Number: _____ State of issue: _____

Signature

Date