

WAHPETON PUBLIC SCHOOL DISTRICT Background Check Profile Form

Please complete the following form with your information. Required fields are denoted with an asterisk (*). Enter all phone numbers exactly as follows: XXX-XXX-XXXX

SUBJECT INFO

*First Name:	Middle Name:	*Last Name:	Sex*:	* DOB (mm/dd/yyyy):
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
*Current Address:		*City:	*State:	*Zip:
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone: (xxx-xxx-xxxx)	*Email:			
<input type="text"/>	<input type="text"/>			

Maiden/Alias Names (additional charges apply for each name searched)

First:	<input type="text"/>	Middle:	<input type="text"/>	Last:	<input type="text"/>	(Minimum First & Last Name Required)
First:	<input type="text"/>	Middle:	<input type="text"/>	Last:	<input type="text"/>	(Minimum First & Last Name Required)

Special Instructions/Comments:

HAVE YOU EVER BEEN ARRESTED FOR, OR CONVICTED OF A CRIME?
YES NO

IF YES, WHAT OFFENSE(S) AND WHAT WAS THE OUTCOME OF THE CASE(S): (dismissed, deferred sentence, acquittal, conviction, etc)

I AUTHORIZE THE WAHPETON PUBLIC SCHOOL DISTRICT TO CONDUCT A CRIMINAL BACKGROUND CHECK ON MYSELF.

Signature _____ Dated _____