## RECORD CHECK FORM

## **KALAMAZOO PUBLIC SCHOOLS**

Department Of Human Resources

I understand that I have been conditionally offered a position as an employee or volunteer by the Kalamazoo Public Schools subject to a criminal conviction history check and/or finger printing and a pre-employment physical, if requested.

## Kalamazoo Public Schools may temporarily hire employees pending the outcome of the record check.

I understand that the information below is required by the Michigan State Police and FBI for the *criminal conviction history check*. I authorize the Kalamazoo Public Schools to utilize this information for the sole purpose of obtaining a conviction-only history file search.

Please	<u>Print</u>			
NameLast		First	Middle	
Maidan				
waiden	Name/Additional Names Used			
Address		City	State	Zip
Date of Birth		Race	Sex	
Telepho	one No			
Positio	n Applied For			
KPS Sc	hool/Dept. name			
Pursua	nt to 1993 Public Act 68, I represo	ent that: (YOU MUST CHECK ONE)		
	Have you ever been convicted of	of a crime?	YesNo	
	If yes, please check the appropr	riate box. Misdemeanor 🗆 🛛 Fe	elony 🗆 Year S	tate
	I have not been convicted of, or pled guilty or nolo contendere (no contest) to any crime/s.			
I have been convicted of or pled guilty or nolo contendere (no contest) to the following crime.  (Please use a separate sheet to explain nature of conviction, date, and court)				
	•		•	
<u>l unde</u>	rstand and agree that pursuar	<u>it to 1993 Public Act 68</u> :		
(1)	the Board of Education of the school district or governing body of the non-public school (the "School") must request a criminal history check on me from the Central Records Division of the Michigan Department of State Police and/or FBI;			
(2)	until that report is received and reviewed by the School District, I am regarded as a conditional employee; and			
(3)	representation/s above respect	e Department of State Police and/o ing either the absence of any conv tract is voidable at the option of th	iction/s or any crimes of whic	
made tr	ruthfully and without falsification	r electronically, I certify that all sta , deliberate omission, or represent e, will be sufficient reason for not l olunteer.	ation and further understand	and agree
	Signature		Date	