FARMINGTON PUBLIC SCHOOL DISTRICT

VOLUNTEER APPLICATION FORM

I authorize the Farmington Public School District to conduct an investigation pursuant to The School Code to determine whether there has been any conviction of a criminal or drug offense as set forth in such statute.

I understand that the information below is required by the Michigan State Police for the sole purpose of obtaining a conviction-only history file search. **You must include a copy of your driver's license with this application.**

I certify that the information given by me in this application is true in all respects, and I agree that if the information given is found to be false in any way it shall be considered sufficient cause for denial of volunteering for the Farmington Public School District.

PLEASE PRINT CLEARLY

Name:			
Last	First		Middle
Maiden Name and/or additional last	t names used		
Address:	City, State, Zip:		
Telephone:	Email:		
Date of Birth://	Sex: M / F (circle one)	Race:	Am. Indian/Alaskan Native Asian or Pacific Islander Black/African American White
Student(s) name:			
Relationship to Student:			
Building(s) where volunteering	J:		
Reason(s) for volunteering (i.e	., Classroom, Athletic/Sp	ort, Coaching)	:
Pursuant to 1993 Public Act 68, I re	epresent that (you must ch	eck one):	
I have not been convicted felonies, misdemeanors		tenderes (no co	ntest) to ANY crimes including
	,	•	t) to the following crimes, including to explain the nature of conviction,
		Date	