

Keene Independent School District

Notice Regarding Criminal Record Check

The Keene ISD is authorized by statute to check the background of each applicant for possible criminal records. I understand this check will be performed based on the information I have provided.

Please print legibly. If we can't read the information we can not process this form

LAST NAME	FIRST NAME	M.I.	JR.	SR.

ADDRESS	CITY	STATE	ZIP	AREA CODE

Birthdate:

____ / ____ / ____
 Month Day Year

 Social Security No.

 Driver's License No.

 State Issued

List other names used such as maiden, previous marriages or name changes:

- Male
 Female
 African American
 White
 Hispanic
 Asian
 Indian
 Other

Please list all the places of residence (city/state only) beginning with 2004

Dates	City	State

Signature: _____

Date: _____

FOR OFFICE USE ONLY

Anticipated Start Date:	
Substitute	
Volunteer	
Aide	
Teacher	
Food Service	
Custodian	
Other	

Date Check was performed:	
Conditional Clearance: Yes No	
Cleared to Work: Yes No	