

CRIMINAL HISTORY RECORD INFORMATION REQUEST

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 criminal history record information.

Name: _____
 Last First Middle Maiden

Other names that may appear on records: _____

Social Security Number: _____

(Social Security Number is used to check certification and to verify identity on criminal record checks. Disclosure is optional.)

Date of Birth: _____

Sex: ___ Male ___ Female Ethnicity: ___ Black ___ White/Other

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

List all cities, states and countries in which you have lived, starting with most recent (use back of page if necessary):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I understand that the information I am providing about age, sex, and ethnicity will not be used to determine eligibility for employment but will be used *solely* for the purpose of obtaining criminal history record information.

Signature

Date

**This form will be removed from the application and filed separately in the Human Resources office.*