



**PLEASE RETURN COMPLETED FORM TO YOUR CHILD'S SCHOOL**

As a prospective volunteer of the Utica Community Schools, I understand that it is the school district's policy to secure Conviction Criminal History information as part of their screening process using the information provided below:

**PLEASE PRINT CLEARLY**  
**(All requested information must be completed)**

**School Year**  
**2018/2019**

NAME: \_\_\_\_\_  
 LAST (*as shown on your license*)                      FIRST (*as shown on your license*)                      Middle Initial

Maiden Name/Names Previously Used: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Race: \_\_\_\_\_ Gender: \_\_\_\_\_

MICHIGAN Driver's License No: \_\_\_\_\_ (State ID not accepted)

School Name \_\_\_\_\_

Student(s) Name: \_\_\_\_\_ Student(s) Grade: \_\_\_\_\_

Volunteer For: \_\_\_\_\_

(List teacher, activity, specific fieldtrip and **date attending**)

**Please submit 2 weeks prior to activity**

**Please be advised that if you have been convicted of a FELONY, volunteer activity will be restricted.**

Have you ever been convicted of a felony?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No

Are there any felony charges currently pending against you?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No

If yes, please explain the nature of conviction and date of conviction:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I understand that the above information is required by the Central Record Division of the Michigan State Police in Lansing, Michigan. I authorize Utica Community Schools to utilize the above information for the sole purpose of obtaining a conviction only criminal history file search.

Signature \_\_\_\_\_ Date \_\_\_\_\_