For Criminal History Background Check
NRHEG Public Schools ISD #2168
306 Ash Avenue S
New Richland, MN 56072
(507)465-3205

Date:_____

The following named individual has made application with this School District for employment or provision of athletic coaching services or other extracurricular academic coaching services.

Full Name of Individual:_____
(please print) Last First Middle

Maiden, Previous, Alias:_____

Date of Birth:_____ Sex (M or F): _____
Month/Day/Year

I authorize the Minnesota Bureau of Criminal Apprehension to disclose all criminal history record information to NRHEG Public Schools ISD #2168 pursuant to Minn. Stat. § 123B.03 for the purpose of _____ with this School District.

CONDITIONAL HIRING: I understand that the School District may permit me to commence my employment duties or provide athletic coaching services or other extracurricular academic coaching services pending completion of the criminal history background check and acknowledge and agree that my employment or services may be terminated based on the result of the background check.

The expiration of this authorization shall be for a period no longer than one year from the date of my signature.

_____ _____
Signature of Applicant or Potential Service Provider Date

The School District should forward this executed form, along with a check or money order in the amount of $15.00 payable to the "MN BCA" and a self-addressed, stamped envelope, to:

Minnesota Bureau of Criminal Apprehension
Criminal Justice Information Section
Attn: Record Checks
1430 Maryland Avenue E.
St. Paul, MN 55106