

Informed Consent Form

Rothsay Public School #850
123 Second St. NW
Rothsay, MN 56579
218-867-2117

Date: _____

The following named individual has made application with this School District for employment or provision of athletic coaching services or other extra-curricular 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 criminal history record information to _____ 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 extra-curricular 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

Subscribed and sworn to before me
This _____ day of _____, 20____.

Notary Public

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 Systems - CHA

1430 Maryland Ave. E.

St. Paul, MN 55106