

Email to: northmarionyouthe@gmail.com

North Marion School District 15
20256 Grim Rd NE
Aurora, OR 97002

CRIMINAL HISTORY BACKGROUND VERIFICATION OF APPLICANTS


Ph: 503-678-7100 Fax:
503-678-1473
www.nmarion.k12.or.us

THIS FORM MUST BE COMPLETED WITH ACCURATE AND HONEST RESPONSES. FAILURE TO DISCLOSE INFORMATION WILL BE CONSIDERED KNOWINGLY MAKING A FALSE STATEMENT AND WILL RESULT IN DENIAL. APPROVED BACKGROUND CHECKS ARE GOOD FOR 3 YEARS. IF YOU ANSWER YES, YOU MAY USE THE COMMENTS SECTION BELOW TO EXPLAIN.

Type or Print Clearly.
As Appears on License

Name: _____ Date of Birth: _____ Sex: _____
(Last Name) (First Name) (Middle Name) MM/DD/YY

List Other Names Previously Used: _____
(includes Maiden Name)

Social Security No.: _____ Driver License/Identification Card No.: _____ Issue State: 

Providing your social security number on this form is voluntary. If you choose not to disclose the social security number, this will not be a basis for denial of employment or any rights, services or benefits to which you are otherwise entitled. If you do provide the number the Oregon State Police will use it as an additional identifier to search for any criminal record you may have. Your social security number will be used as stated above. State and federal laws protect the privacy of your records.

Mailing Address: _____
Full Street Address/Post Office Box

City: _____ State: _____ Zip + 4: _____

1. Have you EVER been convicted of a sex-related crime? Yes No

If yes, was the conviction in Oregon or another state? Specify State and Year: _____

If yes, did the crime involve force or minors? Yes No

2. Have you EVER been arrested or convicted of a crime involving violence or threat of violence? Yes No

If yes, was the conviction in Oregon or another state? Specify State and Year: _____

3. Have you EVER been arrested or convicted of a crime involving criminal activity in drugs or alcoholic beverages that resulted in your driving privileges revoked or suspended? Yes No

If yes, was the conviction in Oregon or another State? Specify State and Year: _____

4. Have you EVER been arrested or convicted of any other crime except a minor traffic violation?(Includes Traffic Crimes) Yes No

5. Have you been arrested within the last three years for a crime for which there has not yet been an acquittal or dismissal? Yes No

COMMENTS: (Is there any information that you wish the District or representative to consider regarding any of your responses or about any information that will be discovered during the investigation).

Notice: I hereby authorize the North Marion School District, Willamette Education Service District and their representatives to check civil or criminal records to verify any statement made on this form. Regardless of whether the applicant grants consent, the district will conduct a criminal offender record check of applicants for the position of school bus driver, volunteer, or other prospective school employees working with or around children. The applicant is entitled to review his/her criminal history for inaccurate or incomplete information. Discrimination by an employer on the basis of arrest records alone may violate federal civil rights law. The applicant may obtain further information concerning the applicant's rights by contacting the Bureau of Labor and Industries, Civil Rights Division, State Office Building, Suite 1070, Portland, Oregon 97232, telephone (503) 731-4075.

I acknowledge and understand this notice and here by state that all the information on this form is true, correct and complete to the best of my knowledge and belief.

Applicant's Signature: _____ **Date:** _____

RETURN THIS FORM TO YOUR CHILD'S SCHOOL OR DIRECTLY TO: North Marion School District Office; Attn: Security Director.