POLICY TITLE:	Volunteers Minidoka County Joint School District # 331			POLICY NO: 1008.00F PAGE 1 of 1	
	Volunteer Application / Cri	ninal Backgroun	d Check		
Name (Print): Last	First		Middle		
Other Last Names Used_					
Date of Birth:	Driver's License Number:		State:		
Mailing Address:	City:		State:		
Day Phone:	Evening Pho	าย:			
Email Address:					
Please indicate which bu	ilding would like to volunteer in.				
Acequia 🗌 Heyburn] Paul 🗌 Rupert 🗌 E	ast Minico 🗌	West Minico 🗌		
	Mt. Harrison TLC Vo				
NOTE: False or erroneous re Minidoka County School Dis	esponses to any questions below mo strict.	ay result in your no	t being allowed to v	volunteer wit	
Please respond to the follo	wing questions:				
Have you ever been convic Have you ever been convic Have you ever been convic	ted of any crimes which are drug re ted of any crimes related to violenc ted of a major traffic violation, inclu ted of ANY misdemeanor or felony ed for a crime for which there has n THE FOLLOWING;	e, including abuse Iding DUI? crimes?	prevention?	Yes N Yes N Yes N Yes N Yes N	
Date of Offense:	County:		State:		
Type of Offense:					
on this form shall be consic	orm are true and complete to the b lered sufficient cause for non-consider strict to check criminal and/or civil	deration as a volur	-		
5	ignature		Da	te	
Initial Background Check Formal Background Chec	For Office U Completed By: App k – Superintendent Approval (if ye	roved Disa	pproved Dat	e:	