BRAZOSPORT INDEPENDENT SCHOOL DISTRICT
P.O. Drawer Z
Freeport, TX 77542

SCHOOL VOLUNTEER AUTHORIZATION FORM

CRIMINAL HISTORY RECORD INFORMATION

Confidential

The Brazosport Independent School District is authorized by state law to obtain criminal history record information on volunteers being considered with the district (Texas Education Code §22.083). The information requested below is necessary to obtain criminal history record information.

***In accordance with Brazosport Independence School District Policy* GKG (Local), *please read the following statement and complete the requested information*.**

Please Print or Type (Volunteer Information):

NAME: _____
LAST **FIRST** **MIDDLE**

ADDRESS: _____
STREET **CITY** **ZIP**

RACE: _____

SEX: **MALE**_____ **FEMALE**_____

DATE OF BIRTH: _____ - _____ - _____

SOCIAL SECURITY # _____ - _____ - _____

TO TEXAS DEPARTMENT OF PUBLIC SAFETY AND/OR OTHER APPLICABLE AGENCY:

I do hereby authorize the Brazosport Independent School District to review any and all record of criminal history pertaining to me on file with your agency, and I hereby grant permission to your agency to release such information to the Brazosport Independent School District upon request.

_____ _____
Signature of School Volunteer **Date** **Student's Name (If Applicable)**

_____ **- Please Print**
Campus/Department

I understand the information I am providing about age, sex, and race will not be used to determine eligibility for employment, but will be used solely for the purpose of obtaining criminal history record information.

This form will be filed in the Human Resources Office

Revised 8/11