



FRASER PUBLIC SCHOOLS CHAPERONE FORM

Routing: Chaperone to Teacher to Principal to Human Resources to Main Office

Name of Child _____ Teacher _____

As a prospective chaperone of Fraser Public Schools, I understand that it is the school district's policy to secure Conviction Criminal History information as part of their screening process using the information provided below.

PLEASE PRINT CLEARLY
(All requested information must be completed)

_____ Last Name First Name Middle Initial

Maiden Name/Names Previously Used: _____

Daytime Phone: (_____) _____ Birth date: ____/____/____

Race _____ Sex: ___Male ___Female

School Name: _____

Event Chaperoning _____ Date _____

Have you ever been convicted of a felony or misdemeanor involving drugs or sexual or physical abuse? ___Yes ___No

Have you been convicted of a misdemeanor charge (other than minor traffic violations) in the last 10 years? ___Yes ___No

Are there any felony or misdemeanor charges (other than minor traffic violations) currently pending against you? ___Yes ___No

If yes, please explain the nature of the conviction(s) and the date(s) of the conviction: _____

I understand that criminal record information is maintained by the Central Record Division of the Michigan State Police in Lansing, Michigan. I authorize Fraser Public Schools to obtain my criminal record information.

_____ Date: ____/____/____
Signature