

# CRIMINAL RECORD AUTHORIZATION FORM

Volunteer screening policies and procedures are very important to an organization's livelihood. Volunteer screening keeps unqualified applicants from becoming volunteers and it ensures organizations that they are using the best volunteers to accomplish their mission.

Please fill out the following form with **black ink**. Forms must be **legible** and must be **printed on white paper**. The document must be in its original form and in compliance with the above listed specifications in order to be processed. **No faxed copies will be accepted.**

I authorize James Island Charter High School and my sponsoring organization permission to do a criminal background check (SLED) on me in order to volunteer for the **2019-20** year.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature Date

**Volunteer Placement:** James Island Charter High School/Athletics/BAND/ROTC/Other  
**\*\* (Circle the Name of Your Program)\*\***

## PLEASE PRINT

Name: \_\_\_\_\_  
First Middle Last Maiden

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number: \_\_\_\_\_ Work Number: \_\_\_\_\_  
(Area Code)

Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_  
**(Please attach a copy of your Driver's License to this form.)**

Date of Birth:\* \_\_\_\_\_ Place of Birth \_\_\_\_\_

Gender:\* M F Race:\* \_\_\_\_\_

**Email Address:** \_\_\_\_\_

*\*This information will be used to properly identify you in the event we find adverse information during the course of the background search.*

**PLEASE RETURN THE COMPLETED FORM TO YOUR ORGANIZATION**

**Lynn Shaddrix/HR  
James Island Charter High School  
1000 Fort Johnson Road  
Charleston, SC 29412**

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OFFICE USE ONLY: \_\_\_\_\_Approved \_\_\_\_\_Denied