



136 West Seymour Street, Appleton, WI 54915
920-733-3728 www.riverviewlutheran.org

Member: Wisconsin Evangelical Lutheran Synod, FVL Schools

AUTHORIZATION AND REQUEST FOR CRIMINAL RECORDS CHECK

I Hereby authorize Riverview Evangelical Lutheran Church and School to request any entity chosen by Riverview Lutheran Church and School specifically for the purpose of conducting this search to release information regarding any record of charges or convictions contained in its files, or in any criminal file maintained on me, whether said file is a local, state or national file, and including, but not limited to accusations and convictions for crimes committed against minors, to the fullest extent permitted by state and federal law. I release these entities from all liability that may result from any such disclosure made in response to this request. I understand that information released by these entities will be kept confidential by church and school officials. Furthermore, I understand that before information released to Riverview Evangelical Lutheran Church and School may be used to determine employment or volunteer status, said information must first be released to me.

If convicted of a felony within the past 6 years, you will not be approved to chaperone RLS activities.

_____/_____/20____ Social Security # _____
Signature

Print Full Name: _____
LAST FIRST MIDDLE

Print all other names that have been used (if any):

LAST FIRST MIDDLE

LAST FIRST MIDDLE

Date of Birth ____/____/____ Address: _____

ETHNICITY: WHITE _____ BLACK _____ ASIAN OR PACIFIC ISLANDER _____ AMERICAN INDIAN OR ALASKAN NATIVE _____
UNKNOWN _____

Authorization in effect until rescinded _____

INITIALS _____

