

WEST SABINE ISD

CRIMINAL HISTORY RECORD INFORMATION REQUEST

Confidential

The Independent School District is required by state law to review the criminal history of applicants, employees, student teachers, and volunteers. The information requested below is necessary to obtain criminal history record information.

Please print.

Name _____

_____ Last First Middle Date of birth

_____ Sex: Male Female

Ethnicity: Black White/Other

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

Signature _____

Date _____

* This form will be removed from the application and filed separately in the HR office.

