## Anthony Independent School District Consent to Perform Investigative/Background Check in Compliance with Senate Bill 9

Pursuant to Texas Senate House Bill 9<sup>1</sup>, an entity providing contract services to a district, charter school, or shared services arrangement must obtain criminal history record information maintained by DPS regarding all employees or prospective employees of a contractor who will be on district property during any phase of the contract execution. The Contractor is responsible for all costs associated to comply with Senate Bill 9. The Contractor's and subcontractor's employees will not be allowed access onto District property unless proof of compliance is provided to the District. Also, volunteers and individuals who participate in PTA and/or booster activities [where there is the possibility of contact with students] will also be required to meet Senate Bill 9 requirements. The District's Director of Finance and Administration and other personnel will assist you in complying with Senate Bill 9 requirements. The Anthony Independent School District [AISD] does not pay for or reimburse for fingerprinting costs. AISD does handle the cost of a name/SSN Background check. Any fees incurred by AISD above and beyond these categories must be paid for by the applicant. AISD cannot make copies of any original documents before or after they are submitted to the district. Applications will be kept on file for 12 months for paraprofessionals and auxiliary positions.

In connection with my application for employment, my continued employment, or in connection with my desire to engage in volunteer activities, I have been advised and I hereby consent and authorize the Anthony Independent School District [AISD] and its agent, at any time during or subsequent to my application process, to conduct an investigative/background check report that may include, but are not limited to, a criminal record check, employment and education verifications, personal references; personal interviews; my personal credit history; and driving record. I do hereby consent to AISD's use of any information provided on this form or during the application process in performing the investigative/background report. AISD has informed me that I have the right to review and challenge any negative information that would adversely impact a decision to offer employment. I agree to release, indemnify and hold harmless AISD with regard to any information reported by the reporting agency. I have been informed that I will have a reasonable opportunity to clear up any mistaken information reported within a reasonable time frame established within the sole discretion of Employer. I have been advised that upon request I will be provided the name, address and telephone number of the reporting agency as well as the nature, substance and source of all information. I acknowledge that facsimile, copy or email shall be as valid as the original. Please Note: You will NOT be hired until your background check satisfies Senate Bill 9 requirements.

Last Name	First Name		Middle Name or Initial
<b>M</b> :1 () 1:			
Maiden or other name(s) used i	in any and all other records of birth	h or records of residence	e.
* Address		Apartment or #	
		-	
City	County	State	Zip
** Date of Birth	Social Security Number	**Gender	**Race
*AS SHOWN ON THE ORIG **TO BE USED FOR CRIM		LY AND NOT A PAR	RT OF THE PERSONNEL FILE.
The following are my response	s to questions about my criminal h	nistory (if any).	
1YESNO Have offense? (exclude minor traffic If yes, please provide details be	misdemeanors).	ad guilty before a cour	rt for any federal, state or municipal criminal
State:	County:	Date	of Offense: / /
Details of conviction:			
2YESNO Havoffense? If yes, please provide State:			isposition for any federal, state or municipal of Offense:
Details of offense:	•		

<sup>1</sup> http://www.sbec.state.tx.us/SBECOnline/fp/SB-9\_Status-Report\_ver-4.pdf

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State:	County:	Date of Offense:
Details of supervision:	County.	Date of Offense.
•		
4YESNO F States? If yes, please prov		riminal offense in a country outside the jurisdiction of the United
Country:	City:	Date of Offense:
Details of conviction:		
5YESNO As If yes, please provide detail	s of the date of this consent form, do you ils below.	have any pending charges against you?
State:	County:	Date of Arrest
Details of pending charges	::	
THIS SECTION IS TO BE GRADUATION OR AGE		D STATES OF RESIDENCE SINCE HIGH SCHOOL
CITY/TOWN	COUNTY	STATE
C11 1/10 WIN		
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I HEREBY CERTIF CORRECT AND CINCOMPLETE, I UN	COMPLETE. IF ANY INFO IDERSTAND THAT GROUNDS	PROVIDED IN THIS CONSENT FORM IS TRUE DRMATION PROVES TO BE INCORRECT OR FOR CANCELING OF ANY AND ALL OFFERS OF AT THE DISCRETION OF THE EMPLOYER.
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