

YOUTH LEADER

PURSUANT TO KRS 17.160

Beechwood Board of Education
50 Beechwood Rd., Ft. Mitchell, KY 41017 (859) 331-3250 FAX (859) 331-7528
ATTN: Board Office Secretary

Thank you for your interest in being a volunteer for the Beechwood Independent Schools. Your application will be processed by the Pretrial Services, Administrative Offices of the Courts. **Please note the following disqualifiers:** Sex-related offense convictions; convictions against minors; Felony offense convictions against persons or property, including felony drug convictions; alcohol violation convictions within two years from date of check and no more than two such offense convictions in total within seven years from date of check; misdemeanor drug-related offense convictions within seven years from date of check; deadly weapon-related offense convictions; a pattern of irresponsible behavior based upon the background check.

This form must be completed if you wish to be a volunteer, or be employed, in ANY capacity: classroom, chaperone, coaching, etc.

Cost: \$10.00 – checks payable to Beechwood

Please indicate reason for background check. Check all that apply.

___ Classroom Volunteer ___ Field Trips ___ Other _____
___ Substitute ___ Employee ___ Coach ___ Student Teacher

Please return completed form to the school office. Providing an email address will expedite this process.
PLEASE PRINT OR TYPE INFORMATION CLEARLY. INCOMPLETE INFORMATION WILL DELAY THE APPROVAL PROCESS.

PLEASE CHECK THE PERMISSION BOX BELOW. A SIGNATURE IS REQUIRED BY THE PERSON FOR WHOM THE BACKGROUND CHECK IS BEING MADE.

Name (First, MI, Last) _____ DOB _____ SSN _____

Address (complete including City, State, Zip) _____

Maiden Name/Alias _____ Email Address _____

Child(ren's) Name(s) attending Beechwood (if applicable) _____ Relationship _____

I give permission to the Beechwood Independent School District to run a background check on me.

Signature _____

Date _____