



# YALE PUBLIC SCHOOLS – CRIMINAL CONVICTION HISTORY

198 School Drive, Yale Michigan 48097

Phone: 810-387-3231 Fax: 810-387-4418

I understand that I may potentially be offered a position as an employee, a third party contracted employee, or a volunteer by Yale Public Schools, subject to a criminal record check and criminal conviction. I understand that the information provided below shall be used to secure criminal conviction history information to fulfill the pre-employment screening process required by Section 1230 and/or 1230a of the Michigan Revised School Code, as well as School District policy. I authorize Yale Public Schools to utilize this information for the sole purpose of obtaining a conviction-only history file search.

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

Maiden name/names previously used: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_

Driver's License No.: \_\_\_\_\_

Pursuant to Public Act 68 of 1993 and Public Act 83 of 1995, I \_\_\_\_\_ represent that (check one):

\_\_\_\_ I have not been convicted of, or pled guilty or nolo contendere (no contest) to any crimes.

\_\_\_\_ I have been convicted of or pled guilty or nolo contendere (no contest) to the following crimes  
(Use separate sheet to explain nature of conviction, date and court).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand and agree that pursuant to Public Act 68 of 1993 and Public Act 83 of 1995:

- (1) The Board of Education must request a criminal history check on me from the Central Records Division of the Michigan Department of State Police and the Federal Bureau of Investigation (F.B.I.);
- (2) Until that report is received and reviewed by the school district, I am regarded as a conditional employee; and
- (3) If the report received from the Michigan Department of State Police or the F.B.I. is not the same as my representation(s) above respecting either the absence of any conviction(s) or any crimes of which I have been convicted, my employment contract is voidable at the option of the school district.

\_\_\_\_ I was previously fingerprinted on \_\_\_\_\_ (date) and authorize release of my prints and/or criminal history report from \_\_\_\_\_.

And

\_\_\_\_ I authorize release of my prints and/or criminal history report received from these prints to any Michigan public school district personnel department.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Contact: Personnel Department of Yale Public Schools 810-387-3231 Extension 7264, Fax 810-387-4418