



TSD Applicant or Volunteer,

Texas School for the Deaf obtains criminal history records of applicants for employment or volunteer services with the School.

The information you provide on the attached Criminal History Authorization about age, sex, and ethnicity will not be used to determine eligibility for employment or volunteer services, but will be used solely for the purpose of obtaining consumer information, including criminal history information. Furthermore, information from consumer reports will not be used in violation of any applicable Federal or State equal opportunity law.



Texas School for the Deaf CRIMINAL HISTORY AUTHORIZATION

Texas Government Code §411.113 authorizes the Texas School for the Deaf to obtain the criminal history record of every applicant for employment or volunteer services with the School. Therefore, as a part of your application process, you need to complete the following questions:

(Please Print)

Last Name	First Name	MI	Jr./Sr. etc...
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Social Security Number	Driver License Number	State
<input type="text"/>	<input type="text"/>	<input type="text"/>

Birth Date (mm/dd/yy)	Sex (check one)	Race (check one)
<input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Hispanic <input type="checkbox"/> Black <input type="checkbox"/> White/Other

Current Address

City	State	ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/>

Home Phone Number

For each residence in the last five years, list the city, state, applicable dates, and applicable last names.

City	State	From (mm/yy)	To (mm/yy)	Last Name(at time of date listed)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Volunteers Only - List programs of interest to you: _____

Have you ever been convicted of or received deferred adjudication for a criminal offense? **Yes** **No**
 If yes, please indicate the year, location, and type of each offense. More facts may need to be discussed later.

Location: (city, state)	Offense	Last Name	Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I hereby authorize Texas School for the Deaf (TSD) and agent(s) to obtain a consumer report on me. TSD is authorized to use any source including, but not limited to, consumer reporting agencies, private investigators, and law enforcement agencies. Furthermore, I authorize any of these agencies to release information on me to TSD or agent(s). I also hereby acknowledge that I have received a notice that a report may be obtained for employment purposes if applicable. I understand that the information I am providing about age, sex, and ethnicity will not be used to determine my eligibility for employment or volunteer services, but will be used solely for the purpose of obtaining consumer information, including criminal history information. I further understand that information from my consumer report will not be used in violation of any applicable Federal or State equal employment opportunity laws.

Signature of Applicant

Date

FOR OFFICE USE ONLY: (check only one)

<input type="checkbox"/> Employment, Applicant	<input type="checkbox"/> Substitute Teacher
<input type="checkbox"/> Student Teacher	<input type="checkbox"/> Teacher Assistant
<input type="checkbox"/> Volunteer	<input type="checkbox"/> Maintenance/Transportation/Food Service

FOR OFFICE USE ONLY:

<input type="checkbox"/> NATIONAL / NCTC EXPANDED
<input type="checkbox"/> STATE / NCTC IN FILE
TEXAS SCHOOL FOR THE DEAF