



Schoolcraft Learning Community

Criminal Background Investigation Consent Form

Schoolcraft Learning Community Policy

Prior to any final affirmation of employment offer to any employee by the Schoolcraft School Board of Directors under any conditions, a background check conducted by the Bureau of Criminal Apprehension of the State of Minnesota for all people who are residents of the state for at least one year must be received by the Schoolcraft’s Director and that background check must show no criminal misconduct of a misdemeanor or felony type. Any resident of the state of Minnesota for less than one year must have the background check conducted by the Federal Bureau of Investigation.

The Schoolcraft Board of Directors respectfully requires that all potential hires fulfill this obligation, irrespective of the date of any last background check.

Finally, the Schoolcraft Board of Directors extend this background requirement to all other personnel connected to the charter school including, but not limited to, board members, casual employees, contractors, student teachers and practicum students, regular volunteers who have contact with or are in proximity of the children and any other individuals deemed necessary.

Non-state persons are held to the same standard of background investigation, except that signing the Criminal Background Consent Form will imply agreement to have the investigation performed by the Federal Bureau of Investigation.

Affirmation of Consent

The Schoolcraft Learning Community School Board of Directors is considering the individual listed below for employment, board membership or other special relationship with the school. This individual is granting permission to the Minnesota Bureau of Criminal Apprehension and/or the Federal Bureau of Investigation to conduct the background check as required by Minnesota Statutes, Section 123B.03, Background Checks. Finally, this person has given consent to have the background investigation results sent directly to:

Schoolcraft Learning Community Director
Attn: Background Check
PO Box 1685
Bemidji, MN 56619

I, _____ (print name – first name, middle, last name),
_____ (Maiden/Previous Name), born on _____ (Date of Birth) give consent to and agree to all of the provisions stated above and all those conditions that are not directly addressed in Minnesota Statutes 123B.03. This consent is valid for one year.

Authorized Signature _____
Date

I have lived in the State of Minnesota since _____
Current address of person of investigation _____
Previous address _____