



Permission for SLED Background Check

Full Name (Print): _____

SSN: _____ DOB: _____ Gender: _____

Position (Teacher, volunteer, etc.): _____

I give permission for The Charter Institute at Erskine to conduct criminal background checks of local, state, and national law enforcement databases as a condition of my employment with the Institute.

In addition, I certify that I am not now nor have I been in the past the subject of an investigation pertaining to accusations or allegations or charges against me of child abuse, child neglect, or sexual abuse, harassment or exploitation of a child.

Check one:

I have not been found guilty or convicted of any violation of law other than a traffic ticket.

I have been found guilty or convicted of a violation of law other than a traffic ticket. (Provide explanation below)

NOTICE: The Charter Institute at Erskine does not discriminate on the basis of race, gender, disability, age, religion, immigrant status, or national origin in its educational programs and employment practices.

All statements provided on this form are true and accurate with full disclosure by me of all information pertinent to my employment.

Signature: _____

Date: _____