Sample 123B.03 Informed Consent Rockford Area Schools – ISD 0883 6051 Ash Street Rockford, MN 55373 Human Resources Department 763-477-9165

(Contributor, please check this box if requesting a fede	Minnesota Statutes 299C.62 on this individual as well. ral check and attach fingerprint card, the Child Protection Please note that the federal check will take one to two weeks
The following named individual has made application w	ith this agency for employment:
Last Name of Applicant (please print):	
First Name (please print):	
Maiden, Alias or Former (please print):	
Date of Birth (Month/Day/Year):	Sex (M or F):
	sion to disclose criminal history record information to <u>(School</u> ubdivision 1 for the purpose of employment as a <u>(teacher,</u>
Signature of Applicant or Potential Service Provid	er: Date:
This release is valid for one year from the date of my s	gnature
Subscribed and sworn to before me this day of, 20	

- 1. Records obtained under the Minnesota State Statute 123B.03, subdivision 1, may be used solely for the purpose requested and cannot be disseminated outside the receiving departments, related agencies, or other authorized entities.
- 2. Your fingerprints may be used to check the criminal history records of the FBI.
- 3. You may challenge the accuracy and completeness of any information contained in the report provided (procedures are set forth in Minnesota Statutes §13.04 and Title 28 CFR Section 16.34).
- 4. You have the right to request and obtain from the school hiring authority a copy of the background check report. A school hiring authority may charge the individual for the actual cost of providing a copy of the report.

The School District should forward this executed form, along with a check or money order in the amount of \$15.00 payable to the "MN BCA" and a self-addressed, stamped envelope, to:

Minnesota Bureau of Criminal Apprehension CHA Unit 1430 Maryland Avenue E. St. Paul, MN 55106