



SC Public Charter School District

Permission for SLED Background Check and Child Abuse Prevention Assurance Form

****you may not volunteer until your background check has been approved****

Full Name (Print): _____

SSN: _____ DOB: _____ Gender: _____

year/month/date

Phone Number _____ Email: _____

Position (Teacher, volunteer, etc.): _____

I give my permission for High Point Academy and the SC Public Charter School District to conduct criminal background checks of local, state, and national law enforcement databases as a condition of my employment or volunteer position with High Point Academy and The SCPCSD.

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: High Point Academy 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, my application for employment, and references are true and accurate with full disclosure by me of all information pertinent to my employment or volunteer position in a K-12 educational setting.

Signature: _____ Date: _____

Paid: Cash _____ Check _____ Credit Card _____