



UNITED TRIBES
TECHNICAL COLLEGE

CRIMINAL HISTORY CONSENT

United Tribes Technical College
Teacher Education Department

I authorize United Tribes Technical College to receive any criminal and/or driver's history record information pertaining to me which may be in the files of any state, federal or local criminal justice agency.

Further, I give consent to the College to perform periodic criminal history background checks for the duration of my pre-service teacher candidacy, which includes field experiences, and student teaching.

I understand that no agencies, or employees of those agencies, shall be responsible for the accuracy of information nor assume any liability for defamation, invasion of privacy, negligence or any other claim in connection with any dissemination of information pursuant to this record check, and shall be immune from suit based upon such claims.

LAST NAME		FIRST NAME		MIDDLE	OTHER NAMES USED		
STREET ADDRESS			CITY		STATE	ZIP	
GENDER	ETHNICITY			BIRTHDATE	SSN	xxx-xx-xxxx	
HOME PHONE	(xxx) xxx-xxxx	CELL PHONE	(xxx) xxx-xxxx	DRIVER LICENSE#/ or STATE ID#		STATE ISSUED	
<p>Teacher Education students must complete the criminal history consent form, have it notarized, and submit it with application. This is a requirement for students in the Elementary Education AS program and Elementary Education bachelor degree program.</p>							
Student/Applicant Signature				ATTENTION! MUST BE SIGNED IN THE PRESENCE OF A NOTARY			Date

Notary Stamp		
	STATE	COUNTY
	Signed and sworn to (or affirmed) before me on	
		Date
	Signature of notary public	
	Commission expiration date (only if not listed on stamp)	