



CANBY COMMUNITY PRESCHOOL

2018-2019

PARENT HELPER BACKGROUND CHECK

Office Use Only

Number: _____/out of 2

Invoice #: _____

Check/Cash Paid \$ _____

In order to best serve and protect our students, a criminal background check will be conducted on all volunteers. Please provide the following information to assist us in our efforts. Your information will be secure and held private. CCP pays for 2 background checks per student. If additional volunteers wish to help at the school it will cost \$5 per background check.

This is an additional Background Check:

☐ Send me an invoice

☐ Payment enclosed

Full Legal Name _____

Other/Maiden Name _____

SSN _____ Driver License # _____ Date of Birth _____

Address _____ Phone _____

Other states you have lived in within the past 10 years _____

Have you ever been convicted of a felony? _____ If yes, please explain: _____



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