

CONVICTION DISCLOSURE FORM

Name			Date of Birth		(Please Print)	
Address_					(Please Print)	
School/District Name					(Please Print)	
Position					(Please Print)	
Pursu	ant to F	Public Act 138 of 2005	, I represent that (check all th	at apply):		
	1.	I have not been convicted of, or pled guilty or nolo contender (no contest) or is the subject of finding of guilt by a judge or jury of any crime.				
	2.	This is my initial disclosure , I have been convicted of, or pled guilty or nolo contender (no contest) or am the subject of a finding of guilt by a judge or jury for the following crimes (attach a separate sheet of paper to explain the criminal offense, date, court, city/state, and circumstances surrounding the conviction):				
		Felony	Misdemeanor	Conviction for		
		Felony	Misdemeanor			
		Felony	Misdemeanor	Conviction for		
		understand that failu Felony Felony	mre to disclose any subsequen Misdemeanor Misdemeanor			
		Felony	Misdemeanor	Conviction for		
In sig	ning thi	is form, I understand a	·	Conviction for		
4.	If I have been convicted of a "Listed Offense", my employment shall be terminated. I also understand that if I have been convicted of a felony, other than a "Listed Offense" the superintendent, or chief administrator and the board or governing body must each approve. In writing, my employment or work assignment.					
5.	regar	If the criminal history report is received and reviewed by the employing school/district, I am a rded as a conditional employee and if the criminal history report is not the same as my esentation(s) above, my employment contract is voidable at the option of the school.				
Signature			Da	nte		
Revise	d: 9/07					