



Applicant’s Relationship to Noble Staff or Student: _____

Name of Staff or Student: _____ Grade Level: _____

Student’s Homeroom Teacher Name: _____

Thank you for your interest in volunteering for Noble Academy. To ensure the safety of our students, we require criminal background checks for all our volunteers. Noble Academy is requesting the Bureau of Criminal Apprehension (BCA) to perform a criminal background check on you.

Have you ever been convicted or any of the following crimes? (If yes, please attach a description of the crime and the particulars of the conviction) _____ Yes _____ No

Background check crimes

- Murder
- Criminal Sexual Conduct
- Any assault crime against a minor
- Felony Level Assault
- Manslaughter
- Prostitution – related crime
- Kidnapping
- Arson
- Other acts of crime

Minnesota statute I23B.03 and the BCA require you to complete the following information in order to complete the background check:

I authorize the MN BCA to disclose all criminal history records to Noble Academy for the purpose of volunteering with this agency. The expiration of this authorization shall be a period of no longer than one year from the date of my signature.

Last Name of Applicant (please print) _____

First Name of Applicant (please print) _____

Full Middle Name _____

Maiden, Alias or Former Name _____

Date of Birth (month, day, year) _____

Social Security Number (optional) _____

Signature of Applicant _____ Date _____