

West Greenwich Police Department

Consent Form

In partnership with the Exeter-West Greenwich Regional School District, to make our schools as safe as possible, the West Greenwich Police Department supports the school's policy for all volunteers to have a criminal background. Please allow a minimum of two-weeks for processing.

The following information must be provided:

Full Name: _____ Maiden: _____

Address: _____

Date of Birth: _____ Sex: _____ Race: _____

Social Security Number: _____

I hereby authorize the West Greenwich Police Department to review any criminal record that is on file in reference to me. The results of this criminal record shall be directed to the Office of the Superintendent. I further waive and release any and all manner of actions, cause of actions and demand of every kind, nature and description whatsoever, arising from any release of criminal records and requests therefore against any federal, state, local or their agents and employees in both law and equity which I may now have or in the future may have.

Signature: _____ Date: _____

**A clear photocopy of applicant's driver license
or state photo identification must be submitted.**

Record check conducted by: _____ Date: _____

The results of the criminal records check are as follows:

No record: _____

Record prevents applicant from volunteering: _____

October 2013

For office use only:

PLEASE CONTACT
SCHOOL RESOURCE OFFICER
SGT. PIETRO PETRARCA
TO COLLECT FORM
(401) 397-6893 EXT. 248