

**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.

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 drivers' license  
or state identification must be submitted.**

**FAX INFORMATION TO WEST GREENWICH POLICE  
ATTENTION: RECORDS DEPARTMENT  
397-6890**

**Please limit submission until the end of the school day.**

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**Record check conducted by: \_\_\_\_\_ Date: \_\_\_\_\_**  
\_\_\_\_\_

**The results of the criminal records check are as follows:**

**No record: \_\_\_\_\_**

**Record prevents applicant from volunteering: \_\_\_\_\_**