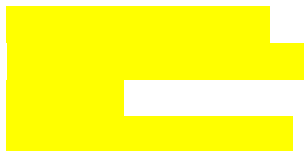




BUREAU OF INDIAN EDUCATION

Doing What's Best for Students!



NAME:

OTHER NAME(S) USED:

DOB:

SOCIAL SECURITY NO:

If there is NO criminal record for the individual identified in this request, please check → ☐ **NO RECORD.**

If there IS a criminal record for the individual identified in this request, please provide details of the record below, including the date of occurrence, specific offense(s), whether the offense is a misdemeanor or felony, disposition, and the court that could provide more information. If there are any outstanding warrants, please list the nature of the offense(s) involved. (Please exclude traffic violations for which a fine of \$150 or less is imposed or any offense committed as a juvenile.)

DATE	OFFENSE	Check One	DISPOSITION & DATE	COURT
		Misd. / Felony		
		Misd. / Felony		
		Misd. / Felony		

Please have the person from your organization who conducted the records check sign below.

DATE:	NAME & SIGNATURE	TITLE/Telephone Number

This request is consistent with the requirements derived from one or more of the following regulations: 42 United States Code (U.S.C.) 13041; 25 U.S.C. 3207, as amended; 25 Code of Federal Regulations § 63.19, as amended; and the Privacy Act of 1974.