Dietrich School District No. 314

5730 PERSONNEL

VOLUNTEER -- AUTHORIZATION TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:	
I,, am seeking a volunteer assignment with theSchool District. I acknowledge that a complete investigation into my background is necessary to protect the safety and welfare of the children in the School District. I hereby expressly and voluntarily give the School District the right to make a thorough investigation of my past employment, education, and activities. I understand that the School District reserves the right to use any lawful method of investigation that, in its sole discretion, it deems reasonable and necessary. This document is effective until revoked in writing by me.	
SIGNATURE	DATE
Print Full Name:	
Print Full Address:	
Birth Date: S	Social Security Number:
STATE OF IDAHO) : ss.	
: ss. County of)	
of Idaho, personally appearednamed in the foregoing Release, and acknowledge	, 20, before me, a notary public of the State, known to me to be the person ged to me that executed the same as e uses and purposes therein mentioned.
IN WITNESS WHEREOF, I have hereu year in this certificate first above written.	nto set my hand and affixed my notarial seal the day and
	Notary Public, State of Idaho County of My commission expires