

Prairie Creek Community School
27695 Denmark Avenue
Northfield, MN 55057
507-645-9640
Fax: 507-645-8234

Account #T076459640 "Non-profit Organization"

Date: _____

The following named individual will be working with children.

Last Name of Applicant (please print): _____

First Name (please print): _____

Middle (full)(please print): _____

Maiden, Alias or Former (please print): _____

Date of Birth: _____ **Sex (M or F):** _____
Month/Day/Year

I authorize the Minnesota Bureau of Criminal Apprehension to disclose criminal history record information to Prairie Creek Community School pursuant to Minnesota State Statute 123B.03, subdivision 1.

The expiration of this authorization shall be for a period no longer than one year from the date of my signature.

Signature of Applicant _____ **Date** _____