

BARTHOLOMEW CONSOLIDATED SCHOOL CORPORATION
ADMINISTRATION BUILDING
1200 CENTRAL AVENUE
COLUMBUS, INDIANA 47201

VOLUNTEER CHECK ONLY
Indiana Background Check and Sex Offender Check*

Please provide your legal name.

Last Name

First Name

Middle Name

Sex

Race

Male _____
Female _____

W-White _____
B-Black _____
I-American Indian/Alaskan _____
A-Asian/Pacific Islander _____
H-Hispanic _____
U-Unknown _____

____/____/____
Date of Birth example: 8/15/1993

Address

City

State

Zip

County

____-____-____
Phone Number

Email Address

Location of Volunteer Services: _____ Choir

I authorize BCSC to complete a background check (limited criminal history and sex offender).

Signature

Date