



LEE COUNTY SCHOOL SYSTEM

BOARD OF EDUCATION

Claire Lang, Chair
Donna Ford, Vice-Chair
Trey Newell
Jamie McDowell
Fran Walls
Dr. Kathleen Truitt, Superintendent

FINGERPRINT AND CRIMINAL HISTORY REQUEST FORM

Date: _____

To the Lee County Sheriff's Office:

The person listed below is being considered for a job with the Lee County Board of Education. Please complete a Fingerprint and Criminal History, stamp with the Lee County Sheriff's stamp, and date this paper. *An employee of the Lee County Board of Education will pick up forms once per week.*

Respectfully,

Dr. David M. Sims
Senior Director
Human Resources, Student Services

Please Print

NAME: (As it appears on your social security card) _____
Last First Middle

List all other names you have used or use now:

Date of Birth: ____/____/____

Department: _____

Social Security #: _____

Job Title: _____

Race: _____

Male _____

Female _____

Based on Georgia Code 16-10-20 (false statements and writings), I attest that I am being considered for a position in the Lee County School System through ESS.

Applicant's or Employee's Signature: _____