

Phoenix Central School District
District Office
400 Volney Street
Phoenix, New York 13135

Personnel Office

(315) 695-1573

I, _____, hereby
authorize the Phoenix Central School to contact the appropriate law enforcement agencies (i.e.,
State Police, Sheriff's Department, Phoenix Police) to ascertain any criminal conviction I might
have.

Signature

Date

PLEASE PRINT THE FOLLOWING

NAME _____

ADDRESS _____

SOCIAL SECURITY NUMBER _____