

NOTE: This is an **annual** form which needs to be completed by all parents/guardians who wish to attend/chaperone a field trip.

PERMISSION TO CONDUCT A BACKGROUND CHECK

I, _____ give my permission to the
Please Print

Director and/or Assistant Director of Crown Pointe Academy of Westminster to conduct a computerized criminal history (CCH) through the Colorado Bureau of Investigation, Department of Public Safety.

Signature _____ Date _____

Print Full Name _____
First Middle Last

Date of Birth _____
Month Day Year

Social Security Number _____