

VOLUNTEERS RELEASE FORM

I, the undersigned, hereby acknowledge that I was fingerprinted on _____, 20___. I acknowledge that since being fingerprinted, I have not committed and/or been convicted of any criminal conduct. I further acknowledge that since being fingerprinted, I have not had any indicated findings by the Department of Children and Family Services filed against me.

DATE: _____

Signature of Employee/Volunteer

Printed Name of Employee/Volunteer