

SCHOOL TRANSPORTATION SOLUTIONS, INC.
1301 F. L. SHUTTLESWORTH DRIVE
BIRMINGHAM, ALABAMA 35234

CRIMINAL HISTORY RELEASE

To Whom It May Concern:

My name is: _____

Address: _____

City: _____ State: _____

Zip: _____

Date of Birth: _____ Social Security #: _____

Drivers License #: _____ State Issued: _____

I am requesting a criminal history of myself through your Department. This is a prerequisite to my being hired or maintained as a driver or attendant in the employ of School Transportation Solutions, Inc. I authorize the release of this information.

Signature: _____

Date: _____

BELOW FOR POLICE USE ONLY

I have completed a criminal history check on the above named person being:

_____ Date of Birth: _____

And found the following: _____

Signed: _____ Date: _____

Date: _____ Police Department: _____

Please return completed form to your instructor