



## West Central CUSD #235

(BBS Fingerprint – School)

\*Information is used for background screening purposes only.

PLEASE PRINT LEGIBLY					
<b>Applicant's Legal Name</b> (full name)	<b>First:</b>	<b>Middle:</b>	<b>Last:</b>		
<b>Alias or Maiden Name</b>	<b>First:</b>	<b>Middle:</b>	<b>Last:</b>		
<b>Home Address:</b>	<b>Street Address:</b>		<b>City:</b>	<b>State:</b>	<b>Zip:</b>
APPLICANT INFORMATION					
<b>Date of Birth (MM/DD/YYYY):</b> ____ / ____ / _____		<b>Social Security Number:</b> ____ - ____ - _____		<b>Place of Birth (state):</b>	
<b>Phone Number:</b>			<b>Email Address:</b>		
<b>Driver's License Number:</b>			<b>State of Issuance:</b>		<b>Gender:</b> Male      Female
<b>Race (Circle):</b> Indian/Alaskan Asian Black Pacific Islander White/Caucasian Hispanic/Latino Unknown/Other	<b>Skin Tone (Circle):</b> Black Dark Brown Light Brown Fair Light Medium Olive	<b>Eye Color (Circle):</b> Black Blue Brown Green Gray Hazel Other	<b>Hair Color (Circle):</b> Bald Black Blonde Brown Gray Sandy Red	<b>Height:</b> ____ ft.    ____ in.	
<b>Weight</b>					
<b>Circle if applicable:</b> Student Teacher    Bus Driver    Contractor					
<b>Position Applying For (if contractor, list the name of your employer):</b> _____					
APPLICANT SIGNATURE AND DATE					
<b>Signature (parent/guardian signature required if under the age of 18):</b>				<b>Date:</b>	

Office Use Only: Bushue Background Screening					
<b>Proof of Identity:</b> DL    State ID    Passport    Birth Certificate    SSC			<b>ORI Number:</b> Regular: IL048210S      Bus Driver: SB0360235		
<b>Technician:</b>	<b>Technician License Number:</b> 249.000 _____		<b>TCN:</b> LS11798L8694 _____		<b>Purpose Code:</b>
<b>Date of Fingerprint:</b>	<b>Time:</b>	<b>Location:</b> ROE #33		<b>Payment Amount</b> _____ <b>Payment Type:</b> Cash    M.O    CC _____	