

## Youth Leader Request

2013/2014
BACKGROUND CHECK

AOC-PT-55, Rev. 11-03

Student's Name:	
The process to obtain the information contained	d in the CourtNet Disposition System is as follows:
	rn the form to school at anytime either by mail or in ork at least two weeks prior to an event you wish to
Failure to comply with these procedures will re-	sult in the request being returned unprocessed. If you dis incorrect, contact Pretrial Services at 502-573-1682 or
Information on Individual Whose Record is Be	ing Checked (please type or print clearly):
Social Security #	
Name	
Date of Birth	
Maiden or Alias Name	
Street Address/P.O. Box	
City, State, Zip	
E-mail Address	•
I understand that failure to accurately provide prosecution under KRS 523.100. I have provid processing.	the information requested may result in my ed the basic information necessary to qualify for record
GOODRIDGE ELEMENTARY	3330 COUGAR PATH
Name of Agency	Address of Agency
KIM WALLS	HEBRON, KY 41048
Contact Person	City, State & Zip
	kim.walls@boone.kyschools.us
Date	Contact E-Mail

The state now requires a \$10 processing fee for this form.

Checks should be made payable to Goodridge Elementary School.