

Coastal Academy

Background Check

Coastal Academy strongly encourages our parents to be involved with our school classes, activities and special events. In order to protect our children we ask that you answer the following questions.

Mother/Guardian Name _____

Address _____

Phone _____ Date of Birth _____

Have you ever committed any immoral sexual acts with a minor? Y N

Have you been accused of or charged with lewd acts with a minor? Y N

May we have permission to check your police record? Y N

I declare under penalty of perjury under the laws of the State of California that the above is true and correct.

Mother's/Guardian's Signature _____ Date _____

Father/Guardian Name _____

Address _____

Phone _____ Date of Birth _____

Have you ever committed any immoral sexual acts with a minor? Y N

Have you been accused of or charged with lewd acts with a minor? Y N

May we have permission to check your police record? Y N

I declare under penalty of perjury under the laws of the State of California that the above is true and correct.

Father's/Guardian's Signature _____ Date _____

<p><i>Office Use Only:</i> <i>Date/Time Verification run</i></p>
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