

LOUDONVILLE-PERRYSVILLE EXEMPTED VILLAGE SCHOOLS

CRIMINAL BACKGROUND CHECK
PRE-APPROVAL AND REQUEST FOR REIMBURSEMENT

PRE-APPROVAL

Name: _____ School: _____

Check one or both of the following:

BCI _____ FBI _____

Signature of Employee _____ date _____

Signature of Principal _____ date _____

Signature of Superintendent _____ date _____

REIMBURSEMENT

BCI: \$ _____ (attach receipt)

FBI: \$ _____ (attach receipt)

Total Reimbursement requested: _____

NOTE: Total Reimbursement shall not exceed \$57.00
