LOS ANGELES UNIFIED SCHOOL DISTRICT
HUMAN RESOURCES DIVISION - EMPLOYEE RELATIONS SECTION
Report of Convictions/Pending Court Cases

Name _____
(Print) Last First Middle

_____
(provide name under which convicted, if different from above)

_____
Street address (Home)

_____
City State Zip code

Telephone # _____

Email _____

_____
Position for which applicant is applying

_____
Personnel office

Female _____ Male _____ Height _____

Hair _____ Eyes _____ Weight _____

_____ _____
Date of birth City and state of birth

Driver license #
or identification # _____

Social Security # _____

Have you ever worked or volunteered for LAUSD? _____

Are you currently working or volunteering for LAUSD? _____

What is/was your employee number? _____

INFORMATION:

The District has a responsibility to ensure the safety of our students and staff. In furtherance of this objective, all applicants are fingerprinted and undergo a background investigation.

An applicant who either falsifies or neglects to accurately complete this form will be removed or excluded from an eligible list, or separated from District service.

INSTRUCTIONS:

A. **Convictions** – In the spaces below, give complete and accurate details for each time you have been convicted, **INCLUDE CONVICTIONS THAT WERE DISMISSED OR EXPUNGED**. Although you may have been informed that your record was cleared **YOU MUST LIST ALL CONVICTIONS.** This includes convictions where you were fined, placed on probation, or received a suspended sentence.

B. **Pending Court Cases** – In addition to any convictions, **YOU MUST LIST ALL PENDING CRIMINAL COURT CASES**. Use the back side of this form if additional space is needed.

Provide the following for each conviction and/or pending court case:. Date	City	State	Identify conviction and/or pending court case (e.g., Theft)	Provide details of the conviction

OFFICE USE ONLY		
Action	Date	Authorized
ATBE _____ Withhold _____		

I have listed all my convictions and/or court cases and certify that the above is true and correct. My signature below authorizes a District representative to obtain information/documentation concerning my criminal history.

_____
SIGNATURE DATE