NARRAGANSETT SCHOOL SYSTEM ADMINISTRATIVE OFFICES 25 EFTH AVENUE NARRAGANSETT RHODE ISLAND 02882-3612

KATHERINE E. SIPALA SUPERINTENDENT OF SCHOOLS

Telaphone (401) 792 9450 EAX (401) 792-9439

LESLIE BROW DIRECTOR OF STUDENT SERVICES (401) 792-9426

KAREN M. HAGAN, CPA DIRECTOR OF FINANCE

Dear Volunteer.

Please bring this document along with the Narragansett Police Department's (NPD) Release form to the Police Department located at 40 Caswell Street, Narragansett, RI. Once processed, the NPD will email the BCI clearance letter to undersigned at the Narragansett School Department and you will be added to the volunteer list.

This service is provided free of charge and walk-ins are welcome.

NARRAGANSETT POLICE DEPARTMENT BACKGROUND CHECK REQUEST

ate:
o the Narragansett Police Department:
is a Narragansett resident and intends rint name)
volunteer within the Narragansett School System. Please process this BCI request and
nail a letter stating the result to me at <u>Smcknight@nsskl2.ri.us</u> .
nank you for your cooperation with regard to processing this request.

Susan Lynch McKnight

Administrative Assistant to the Superintendent



TOWN OF NARRAGANSETT

Fairt Department. 44 Cawell Street. National Rev. RI 9250 Tel. (491) 789-1691 • TDD (491) 782-9661 • Eax (491) 789-851

RELEASE OF INFORMATION AUTHORIZATION

(Rhode Island Background Check (BCI) for Volunteers, Interns, and Mentors only)

I hereby direct and authorize the Narragansett Police Department to review any Rhode Island criminal record that is on file in reference to me and in accordance with R.I. General Law 16-2-18.4.

I hereby waive and release any and all manner of actions, causes of action, and demands of every kind, nature and description, arising from any release of criminal records and requests there from, whatsoever against the Narragansett Police Department in both law and equity which I may now have or in the future may have.

	Signed this	day of	, 20
		1	
		FULL NAME	
,		-	
		SIGNATURE (notarized)	
STREE	T ADDRESS		CITY/TOWN
	_	Before me	
Date of Birth			
·		Term Expires on	
ocial Security Numbe	er		

Rev; 10/22/14

* * Include a Photo Copy of RI Driver's License