

CRIMINAL HISTORY DISCLOSURE STATEMENT
AUTHORIZATION AND RELEASE

Name:

Date:

As a prerequisite to the participation of volunteers in field experiences with i'mME, i'mME requires participants to complete the following Criminal History Disclosure Statement. Participants are also required to update the information contained in this Disclosure Statement based on any changes in or additions to their criminal history.

Have you ever been convicted of, plead guilty or nolo contendere with respect to, or received probation before judgment with respect to a crime against children in Texas or any other jurisdiction? You need not provide any information concerning any conviction for which the record was expunged under federal, state or local law.

Yes

No

If your answer to the preceding questions is yes, please explain fully on a separate sheet of paper, specifying the nature and date of the offense(s), the name and location of the court(s) and the disposition(s) or outcome(s), including the sentence(s) imposed, if any, and attach.

I hereby declare and affirm under penalties of perjury that the contents of the foregoing Disclosure Statement are true and correct and complete to the best of my knowledge, information and belief. I understand that I am obligated, and I hereby agree, to update the information contained in the Disclosure Statement based on any changes in or additions to my criminal history until such time that I cease my participation in volunteer field experiences with i'mME. I also understand that the failure to fully and accurately complete and update the Disclosure Statement could result in action being taken against me, including removal from a volunteer field experience.

I hereby authorize i'mME and their agents, employees and representatives to investigate utilize and disseminate the Disclosure Statement, and any information contained therein or derived therefrom, for any and all purposes associated with my field placement with i'mME.

I hereby release, discharge and exonerate i'mME and their agents, employees, and representatives from any and all liability, loss, claims and/or damages of every nature and kind arising out of, or in any way related to, the Disclosure Statement, the information contained therein or derived therefrom and the investigation, dissemination or use thereof.

Signature of Volunteer: _____

Printed Name of Volunteer: _____

Local Address: _____
