3226 Arthur Road Remus, Michigan 49340-9542 www.chsd.us



## School District

Superintendent Office: 989-967-2000 Business Office: 989-967-2010

Fax: 989-967-2009

## REQUEST FOR FINGERPRINT RESULTS TO BE RELEASED TO CHIPPEWA HILLS

## Complete this form if you have:

- Been fingerprinted since January 1, 2006 for a MICHIGAN school district, and
- There has been NO BREAK in your employment since you were fingerprinted.

Name of Applicant (please print):	
Date of Birth:	
Name and Address of School District That Ha	s Fingerprint Results on File:
Laivo	narminaian ta ralagga nay fingarawint requite to
I giveName of School District	permission to release my fingerprint results to
the Chippewa Hills School District.	
Applicant's Signature	 Date

## PLEASE SEND/FAX/EMAIL FINGERPRINT RESULTS TO:

Linda May Chippewa Hills School District 3226 Arthur Rd. Remus, MI 49340

Phone: (989) 967-2000 Fax: (989) 967-2009 Email: lmay@chsd.us