

WEST LINN - WILSONVILLE SCHOOL DISTRICT

Department of Human Resources

ENRICHMENT CLASS INSTRUCTOR INFORMATION

PLEASE COMPLETE AND PRINT CLEARLY Date: _____ Name: Address: _____ Phone Number:_____ Email Address: Activity: Location/School:_____ Start Date: _____ Please attach a completed <u>Authorization to Complete Background Check Form.</u> Recommending Administrator Date Administrative Assistant Date

Rev. 11/17