



TESTIMONIAL OF SUITABILITY
 FOR PROVIDING SERVICES IN A CATHOLIC SCHOOL

_____, an employee of _____
 NAME OF SERVICE PROVIDER SCHOOL CORP. OR DISTRICT/PUBLIC SERVICE AGENCY

will be providing educational services to children enrolled at _____
 NAME OF CATHOLIC SCHOOL

School in _____. This person has been employed with
 CITY, STATE

our organization since _____.
 DATE

The results of a criminal background check of the above-mentioned employee evidence no convictions related to IC 20-26-5-10 or IC 20-28-5-8 (see attached). Please indicate what criminal background check(s) you have on file.

- Expanded criminal history (Date: _____)
- Indiana Limited Criminal History (Date: _____)
- FBI fingerprint check (Date: _____)
- Dept. of Child Services/Child Protective Services searches
 (States: _____ Date: _____)
- Other(s): specify type and date _____

I have reviewed the personnel file for the above-mentioned employee and all other records which our agency maintains. Based on this review, and on my own personal knowledge, I can confidently recommend this employee for the service he/she will provide which involves direct, ongoing contact with children and young people.

 AUTHORIZED SIGNATURE

 DATE

 PRINTED NAME

 TITLE