

**CHILD PROTECTION BACKGROUND CHECK ACT/CONSENT FORM**

**Champlin-Dayton Athletic Association (CDAA)**

Non-Profit Organization, Account #T528085000  
P.O. Box 112, Champlin, MN 55316 952-808-5000

**Mail completed and signed ORIGINAL form to: CDAA, P.O. Box 112, Champlin, MN 55316**

Because the position for which you are applying will require you to provide care, treatment, education, training, instruction, or recreation to children, CDAA will request the Bureau of Criminal Apprehension (BCA) to perform a criminal background check on you under Minnesota Statutes Chapter 299C.62.

**Have you ever been convicted of any of the following crimes? (Check one) \_\_\_ YES \_\_\_ NO**  
**(If yes, please attach a description of the crime and the particulars of the conviction.)**

**BACKGROUND CHECK CRIMES, Under Minnesota Statutes Chapter 299C**

- |   |   |               |
|---|---|---------------|
| --Murder  | -- Felony Level Assault   | -- Kidnapping |
| --Criminal Sexual Conduct   | -- Manslaughter   | -- Arson      |
| -- Any Assault Crime Against a Minor  | -- Prostitution-Related Crime   |               |
| -- Any of the following Child Abuse Crimes committed against Minor victim, constituting a violation of Minnesota Statutes Sections: |   |               |
| 609.185,(5) Murder in the 1 <sup>st</sup> Degree  | 609.352 Solicitation of Children to Engage in Sexual Conduct                          |               |
| 609.221 Assault in the 1 <sup>st</sup> Degree   | 609.377 Malicious Punishment of a Child   |               |
| 609.222 Assault in the 2 <sup>nd</sup> Degree   | 609.378 Neglect or Endangerment of a Child  |               |
| 609.223 Assault in the 3 <sup>rd</sup> Degree   | 152.021, subd. 1,(4) Controlled Substance Crime in the 1 <sup>st</sup> Degree         |               |
| 609.224 Assault in the 5 <sup>th</sup> Degree   | 152.022, subd. 1,(5) or (6) Controlled Substance Crime in 2 <sup>nd</sup> Degree      |               |
| 609.2242 Domestic Assault   | 152.023, subd. 1,(3) or (4) Controlled Substance Crime in 3 <sup>rd</sup> Degree      |               |
| 609.322 Solicitation, Inducement and Promotion of Prostitution  | 152.023, subd.2, (4) or (6) Controlled Substance Crime in 3 <sup>rd</sup> Degree      |               |
| 609.324 Other prohibited acts of Prostitution   | 152.024, subd. 1,(2), (3) or (4) Controlled Substance Crime in 4 <sup>th</sup> Degree |               |
| 609.342 Criminal Sexual Conduct in the 1 <sup>st</sup> Degree   |   |               |
| 609.343 Criminal Sexual Conduct in the 2 <sup>nd</sup> Degree   |   |               |
| 609.344 Criminal Sexual Conduct in the 3 <sup>rd</sup> Degree   |   |               |
| 609.345 Criminal Sexual Conduct in the 4 <sup>th</sup> Degree   |   |               |

As the subject of a Child Protection background check, your rights include:

- to be informed that CDAA will request this check for becoming or continuing as an employee or volunteer, and to determine whether you have been convicted of any of the above specified crimes, and
- to be informed of the BCA's response and obtain a copy of the report form from CDAA
- to obtain from the BCA any record that forms the basis for the report, and
- to challenge the accuracy and completeness of any information contained in the report, and
- to be informed whether CDAA has denied your application because of the BCA's response and not to be required directly or indirectly to pay the cost of the background check.

Minnesota statutes and the BCA require you to complete the following information in order to complete the background check: **(Please Print Legibly)**

**Last name of Applicant:** (please print) \_\_\_\_\_

**First name of Applicant:** (please print) \_\_\_\_\_

**Middle name of Applicant:** (full)(please print) \_\_\_\_\_

**Maiden, Alias or Former Name of Applicant:** (please print) \_\_\_\_\_

**Date of Birth:** (month/date/year) \_\_\_\_/\_\_\_\_/\_\_\_\_

**Sex:** (circle one) M or F

**Social Security Number:**(optional) \_\_\_\_ - \_\_\_\_ - \_\_\_\_

**Position Applied for:** \_\_\_\_\_

**Sport:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

This release is valid for one year from the date of my signature.