



“Safe Homes” Application

Please note: All information that is given on this application form is completely confidential. The information will be used for the sole purpose of completing an assessment (back ground check) of any adults living at this address. Assessment will be done by the local Police and Sheriff’s Department. Please list any adult names (18 or older) and date of birth. Under name, please sign and date, giving permission to complete an assessment.

Name: _____ **Date of Birth** _____

I _____ **give my permission to allow local Police enforcement to conduct a personal background check. Date** _____

Name: _____ **Date of Birth** _____

I _____ **give my permission to allow local Police enforcement to conduct a personal background check. Date** _____

Name: _____ **Date of Birth** _____

I _____ **give my permission to allow local Police enforcement to conduct a personal background check. Date** _____

Name: _____ **Date of Birth** _____

I _____ **give my permission to allow local Police enforcement to conduct a personal background check. Date** _____

Address of home that will be displaying the “Safe Homes” symbol:

Street Address City State Zip Code

Number of people living at this address _____ **Phone Number** _____

Number of people that are of school age (Under 18) _____

Will the “Safe Homes” symbol be displayed in a window or mailbox. _____

Please return applications to: Becky Taylor, Elementary School Secretary, Mary Beth Gildenzoph, Middle School Secretary or Kim Holcomb, Village Cashier/Secretary. Approved applicants will be given the “Safe Homes” decal. ***You may also return application with your child in their school folder.***