



REQUEST FOR FINGERPRINTING AND/OR SHIELD THE VULNERABLE RECORDS

Please use this form if you have been fingerprinted at your daughter's Diocesan elementary school after April 25, 2000 or if you have submitted your certificate of completion of the Shield the Vulnerable course within the last four years.

Records requested: Fingerprinting Shield the Vulnerable

Student's Name: _____
(please print) Last First SFHS Class of

Mother's Name: _____
(please print) Last First MI

Father's Name: _____
(please print) Last First MI

Diocesan elementary school where applicant was fingerprinted and/or completed the Shield the Vulnerable course:

Name of School

Mother's signature

Father's signature

Please return this form to the Office of the St. Francis High School Dean of Students