

My Commission Expires:

JESSICA LUNSFORD AFFIDAVIT - COMMUNITY - BASED ORGANIZATIONS

ΒI	BEFORE ME, the undersigned authority, personally ap	ppeared(agency representative)
W	Who, being duly sworn, deposes and states as follows:	, , ,
1.	1. I am of the _	
	1. I am of the _	(agency)
2.	2. I am duly authorized to make this sworn statement	on behalf of the Agency.
3.	By law, due to the nature of the Agency's business, all of the Agency's employees who are permitted access to school grounds when students are present or who come into direct contact with students are required to submit to a state and national criminal history check for licensing or other purposes. Specifically, these Agency employees undergo a "Level 2 Background Screening," as defined by Sections 1012.32 and 435.04, Florida Statutes.	
4.	All Agency employees offering service to the students of Miami-Dade County School Board have undergone and passed the Level 2 Background Screening within the last five years.	
5.	All such licenses or other certificates are current and in good standing.	
6.	 If the Agency receives notification from any of its contract that he or she has been arrested, the Age School Board immediately. 	1 0
	FURTHER AFFIANT SAYETH NOT.	
	I do hereby swear that the facts stated in this Affida knowledge, information and belief.	avit are true and correct to the best of my
		(Agency Representative)
	SWORN TO and SUBSCRIBED before me this _	day of, 20
	by He/She is □ pers as identification.	
		Notary Public, State of Florida
		Print Notary Name

FM-6994 (06-06)