LAMPETER-STRASBURG SCHOOL DISTRICT

VOLUNTEER CLEARANCE FEE REIMBURSEMENT REQUEST FORM

Individuals serving as volunteers for the school district that are not eligible to complete the FBI Waiver and need to complete the FBI Clearance with Fingerprinting, may request reimbursement for this clearance.

Please complete this form, attach your paid clearance receipt, and forward the documents to your child's building secretary. You may also forward to:

tammy graybill@L-SPioneers.org

Lampeter-Strasburg School District P.O. Box 428 Lampeter, PA 17537-0428

Volunteer's Name (Please Pri	nt):		
Street Address:			
City:	State:	Zip Code:	
Dollar amount of the fee paid t	or the FBI Clearance	with Fingerprinting:	
Attach copy of printed pa	yment receipt from o	nline payment	
Volunteer's Signature:			
		FOR OFFICE USE ONLY	
Business Office Signature:		Date:	
Business Manager's Signature:		Date:	