

FORM

CERTIFICATION OF NO CONVICTIONS OF PROHIBITED CRIMES

I, _____(person's full name), am a staff member, employee, volunteer, visitor, independent contractor or prospective staff member, employee, volunteer, visitor or independent contractor of _____(Early Learning Center's Name), and I certify that I have not been convicted of or pled nolo contendere to any of the crimes listed in R.S. 15:587.1(C).

Person's Full Name (Printed)

Person's Signature

Date

Name of Early Learning Center

Director's Name (Printed)

Director's Signature

Date