

Criminal Background Check Consent Form

Please read and complete this form carefully. This form authorizes the organization to conduct a criminal background check as a condition of employment, volunteering, or contracted services.

Disclosure Regarding Background Investigation

The organization to which you are applying may obtain a consumer report or an investigative consumer report about you for employment or service purposes. These reports may include information regarding your criminal history, motor vehicle records, education, and prior employment history.

Applicant Consent and Authorization

By signing below, I hereby authorize the organization to obtain criminal background reports and any other necessary records as described above. I understand that this information will be used solely for evaluating my eligibility for the position I have applied for, and will be kept confidential.

Applicant Information

First Name:	<input type="text"/>
Middle Name:	<input type="text"/>
Last Name:	<input type="text"/>
Other Names Used (Maiden, Alias):	<input type="text"/>
Date of Birth (MM/DD/YYYY):	<input type="text"/>
Social Security Number:	<input type="text"/>
Driver's License Number:	<input type="text"/>
Driver's License Issuing State:	<input type="text"/>
Street Address:	<input type="text"/>
City:	<input type="text"/>
State:	<input type="text"/>
Zip Code:	<input type="text"/>

Acknowledgment and Signature

I certify that the information provided on this form is true, complete, and accurate to the best of my knowledge.

Applicant Written Signature:	<input type="text"/>
Date (MM/DD/YYYY):	<input type="text"/>