



## BACKGROUND CHECK INQUIRY RELEASE

In connection with my application for employment or volunteer4ring, I understand that investigative background inquiries are to be made on myself including employment, education, and criminal verification.

I authorize without reservation any party or agency contacted by this organization to furnish the above information.

I have the right to make a written request within a reasonable period of time to receive additional information about the nature and scope of this investigation. I hereby consent to your obtaining the above information.

**Please print clearly!**

Social Security Number		Driver's License or state-issued identification number		State	ID Type (DL or ID card)
First Name		Middle Name		Last Name	
Street Address		City		State	Zip
County	Telephone No (incl. area code)		Date of Birth		Sex <input type="checkbox"/> M <input type="checkbox"/> F
Email Address					
List all other cities in Texas where there has been residency:			Relationship of person to requestor <input type="checkbox"/> Adoptive Parent <input type="checkbox"/> Caregiver <input type="checkbox"/> Director <input type="checkbox"/> Staff <input type="checkbox"/> Foster Parent <input type="checkbox"/> Volunteer <input type="checkbox"/> Other Staff <input type="checkbox"/> Household Member <input type="checkbox"/> Other <input type="checkbox"/> Licensed Administrator		
Date Hired / Used by the Operation/Agency	Ethnicity (must accompany race) <input type="checkbox"/> Hispanic <input type="checkbox"/> Other		Race <input type="checkbox"/> White <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> American Indian/Alaskan Native		
Other names used (married, maiden, etc): First Name		Middle Name		Last Name	

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

<b>Office Use Only</b>	Entered by	Department	Site
	Date Received	Date Criminal History Entered	Date Central Registry Checked