



## Request for Criminal Records Check and Authorization

**\*\*\*Confidential\*\*\***

\_\_\_\_\_  
Last Name                                      First Name                                      Middle Name or Initial

\_\_\_\_\_  
Maiden name or other name(s) used in any and all other records of birth or records of residence

\_\_\_\_\_  
Street Address                                      City                                      County                                      State                                      Zip Code

\_\_\_\_\_  
Date of Birth (mm/dd/yyyy)\*\*                                      Gender\*\*

\_\_\_\_\_  
How long at present address?

Former address?:

\_\_\_\_\_  
Street Address                                      City                                      County                                      State                                      Zip Code

**\*\*Your date of birth and gender are requested to verify the information obtained is about you and not someone with the same or similar name.\*\***

Circle the states you have lived in:

|               |               |           |           |             |              |              |
|---------------|---------------|-----------|-----------|-------------|--------------|--------------|
| Alabama       | Alaska        | Arizona   | Arkansas  | California  | Colorado     | Connecticut  |
| Delaware      | Florida       | Georgia   | Hawaii    | Idaho       | Illinois     | Indiana      |
| Iowa          | Kansas        | Kentucky  | Louisiana | Maine       | Maryland     |              |
| Massachusetts |               | Michigan  | Minnesota | Mississippi | Missouri     | Montana      |
| Nebraska      | New Hampshire |           | Nevada    | New Jersey  | New Mexico   | New York     |
| N. Carolina   | N. Dakota     | Ohio      | Oklahoma  | Oregon      | Pennsylvania | Rhode Island |
| S. Carolina   | S. Dakota     | Tennessee | Texas     | Utah        | Vermont      | Virginia     |
| Washington    | W. Virginia   | Wisconsin | Wyoming   |             |              |              |

I, \_\_\_\_\_ am an applicant for volunteer service with Westside Faith Center and have been advised that, as part of the application process, Westside Faith Center conducts a criminal history background check. I do hereby consent to Westside Faith Center's use of any information provided during the application process in performing the criminal history check. I have been informed that I have the right to review and challenge any negative information that would adversely affect a decision to offer volunteer service opportunities. In addition, I have been informed that I will have a reasonable opportunity to clear up any mistaken information reported within a reasonable time frame at the discretion Westside Faith Center.

Signature \_\_\_\_\_ Date \_\_\_\_\_