

## **Background Check Authorization Form**

\_ Employee \_\_\_\_ Volunteer

Club _		_
Candidate Information		
First Name	Last Name	
Middle Name	Name Suffix (Sr., Jr., etc.)	
Maiden Name		·
Date of Birth	SSN	
Phone #	Sex	
Street Address		
City	State	
Zip	County	
DL State		
DL#		
Additional Address	You may add u	ip to 3 Addresses
Street Address		
City	State	
Zip	County	
Street Address		
City	State	
Zip	County	
Street Address		
City	State	
Zip	County	
*	give my permission for the Boy & Girls of ackground check. The results of this background the eligibility of my employment at the Boys	d check will be
Signature	Date	