

# BACKGROUND CHECK RELEASE OF INFORMATION

I, \_\_\_\_\_  
LEGAL LAST NAME                      LEGAL FIRST NAME                      LEGAL MIDDLE NAME

\_\_\_\_\_  
Current Physical Address (MUST INCLUDE STREET, CITY, STATE, AND ZIP CODE)

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Gender

\_\_\_\_\_  
Race

\_\_\_\_\_  
Driver's License or State ID

\_\_\_\_\_  
State of Issue

Have you ever been arrested or convicted of a felony:                      YES \_\_\_\_\_                      NO \_\_\_\_\_  
Have you ever been arrested or convicted of a misdemeanor: YES \_\_\_\_\_                      NO \_\_\_\_\_

If you answered yes to either question above please provide a brief explanation of offense and date below:

My signature below evidences my understanding that I am being considered for a position of employment or volunteer at the BGCSI and I hereby authorize BGCSI to receive any criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency in Illinois or National Registries. I understand that I may at any time request in writing a copy of all findings. **I further understand that information obtained during the investigation(s) may be used as a basis for the acceptance or denial of appointment or reappointment, as well as termination when appointed to the above position pending completion of my records check investigation.**

**I understand that refusal to supply accurate information and sign this release will result in termination of the appointment process. All information I hereby authorize to be obtained will be confidential.**

Applicant Signature:

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## OFFICE USE ONLY

Cost: \$13    Check \_\_\_\_\_    Cash \_\_\_\_\_    Debit \_\_\_\_\_    Received: Date \_\_\_\_\_    By: \_\_\_\_\_  
Identification Verified (picture ID): DL: \_\_\_\_\_    State ID: \_\_\_\_\_    Other: \_\_\_\_\_  
Employment: \_\_\_\_\_    Program Volunteer: \_\_\_\_\_    Board Volunteer: \_\_\_\_\_    Intern: \_\_\_\_\_    Other: \_\_\_\_\_  
Date Background processed: \_\_\_\_\_    Background Results received: \_\_\_\_\_  
Approved: \_\_\_\_\_    Denied: \_\_\_\_\_    Result Concerns: \_\_\_\_\_