



**BOYS & GIRLS CLUB Background Check Permission Form**  
OF BENTON COUNTY

**All Information is Required**

Please **PRINT** clearly or **TYPE** and completely fill out the application. All Items are required for your application to be considered. To provide for our children's safety, a background check will be performed prior to any volunteer experience involving individual contact with children. Return the signed forms to Boys and Girls Club of Benton County, PO Box 448, Bentonville, AR 72712.

Complete Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age \_\_\_\_\_ Maiden Name \_\_\_\_\_  
FIRST MIDDLE LAST

List any aliases or other names you are known by: \_\_\_\_\_ Social Security # \_\_\_\_\_ Driver's License # \_\_\_\_\_

Current Address: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
STREET/PO BOX # CITY ZIP

Previous Address: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
STREET/PO BOX # CITY ZIP

Previous Address: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
STREET/PO BOX # CITY ZIP

Primary Telephone #: \_\_\_\_\_ Alternate Telephone \_\_\_\_\_ Email \_\_\_\_\_  
(PUT NONE, IF YOU HAVE NO EMAIL ADDRESS)

Employer \_\_\_\_\_  
NAME STREET ADDRESS CITY/STATE/ZIP TELEPHONE.

Within the past 10 years, have you been convicted of any felony or misdemeanor classified as an offense against a person or family, or an offense of public indecency or a violation involving a state/federally controlled substance? YES  NO  If your answer is YES, please explain on the reverse side:

I certify to the best of my ability that the information provided on this application is true and accurate. I also understand that misinformation knowingly provided here, and on subsequent mentor application forms, is grounds for dismissal.

I, the undersigned, hereby give my consent for any police agency, driving record agency, Arkansas Child Abuse and Neglect Central Registry, or background screening organization to release any information that their files may contain indicating the undersigned applicant volunteer as an alleged perpetrator of suspected child abuse/neglect and to conduct a criminal record check on myself and release any results to the following business:

**Boys and Girls Club of Benton County, P.O Box 448, 2801 Walker Street, Bentonville, AR 72712, (479) 273-7187.**

I understand that the name of any confidential informants or other information which does not pertain to the applicant as alleged perpetrator will not be released. The results from any background check or screening will be utilized for the sole purpose of my volunteer experience.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_ **(MUST be Notarized)**

Acknowledged before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ County of \_\_\_\_\_, State of Arkansas

My Commission Expires: \_\_\_\_\_  
Notary Public