

The following information is required to complete the background investigation (please print):

FIRST NAME	MIDDLE NAME	LAST NAME	
OTHER NAMES USED (INCLUDING MAIDEN NAME)			
SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM/DD/YYYY)	GENDER	RACE
_____ - _____ - _____	___ / ___ / _____		
INFORMATION FOR MOTOR VEHICLE RECORD CHECK (IF REQUIRED) – ATTACH COPY OF DRIVER’S LICENSE:	DRIVER’S LICENSE NUMBER	STATE LICENSED IN	EXPIRATION DATE (MM/DD/YYYY)
			___ / ___ / _____

CURRENT AND PREVIOUS ADDRESSES (WHERE YOU HAVE RESIDED FOR TWO CONSECUTIVE YEARS)

CURRENT STREET ADDRESS (NO P.O. BOXES)	CITY	STATE	ZIP CODE

PREVIOUS STREET ADDRESS (NO P.O. BOXES)	CITY	STATE	ZIP CODE

PREVIOUS STREET ADDRESS (NO P.O. BOXES)	CITY	STATE	ZIP CODE

Have you ever been convicted of a misdemeanor or felony crime?

Please check one: No Yes

(A criminal conviction does not necessarily disqualify an applicant for employment consideration. Making untrue statements or otherwise failing to report criminal conviction(s) will disqualify an applicant for consideration of this position for falsification of an application.)

If **Yes**, list the date, location (county and state), and offense for **all** misdemeanor and felony **convictions** regardless of how minor or how long ago they occurred. Attach additional pages if needed.

DATE OF CONVICTION	LOCATION (COUNTY/STATE)	OFFENSE
___ / ___ / _____		
DATE OF CONVICTION	LOCATION (COUNTY/STATE)	OFFENSE
___ / ___ / _____		
DATE OF CONVICTION	LOCATION (COUNTY/STATE)	OFFENSE
___ / ___ / _____		

SIGNATURE:

DATE: ___ / ___ / _____

If under the age of 18, parent/guardian signature required:

SIGNATURE – PARENT/GUARDIAN	PRINT NAME – PARENT/GUARDIAN	DATE OF BIRTH (MM/DD/YYYY)
		___ / ___ / _____

TO BE COMPLETED BY DEPARTMENT CONTACT – THIS PERSON WILL BE NOTIFIED OF RESULTS

NAME	DEPARTMENT NAME	EMAIL ADDRESS		
ACCOUNT NUMBER	DEPARTMENT #	POSITION #	JOB OPENING #	
EMPLOYEE STATUS:	ADDITIONAL OPTIONS			
<input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Student <input type="checkbox"/> Volunteer <input type="checkbox"/> Intermittent	<input type="checkbox"/> Motor Vehicle Record Check			