



**CONSENT TO PERFORM
CRIMINAL HISTORY BACKGROUND CHECK**

Legal Name <i>(last, first, middle):</i>	Date of birth:	Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Social Security or INS number <i>(voluntary):</i>	
Maiden name, other names used:		Driver's license or ID card: Number: _____ State: _____		
Mailing address: Street: _____ Apt: _____ City: _____ State: _____ ZIP: _____	Home or message phone: _____			
During the past 5 years, have you been outside Oregon 60 days or more in a row? <input type="checkbox"/> No <input type="checkbox"/> Yes				
If yes, list where and when in the space below:				
		City/state/country:	From (month/yr):	
			Until (month/yr):	
Street address <i>(if different than mailing address):</i> Street: _____ Apt: _____				
City: _____				
State: _____ ZIP: _____				
Have you ever been charged, arrested, adjudicated and/or convicted of a crime? <input type="checkbox"/> No <input type="checkbox"/> Yes				
If you answered yes, list all charges, arrests and/or convictions (adult and juvenile) and the outcome regardless of how long ago. Attach additional pages if needed.				
Date (or estimate):	Charge, arrest or conviction:	County:	State:	Outcome:
1.				
2.				
3.				
4.				
5.				
Provide information regarding all arrests charges, and convictions.				



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I have read and understand the instructions for completing this form. I understand that a criminal records check will be completed on me. My signature authorizes the Salem Rainbow Youth, Inc. to request and receive any police or investigation reports needed to complete this background check. The information may be shared with the Board of Directors of Salem Rainbow Youth, Inc. I certify the information I have provided is correct and complete. I understand that if I provide false or incomplete information, my application may be closed or I may be denied the position. I understand the check may be repeated during the time I hold this position.

Signature: _____

Date: _____