



Carver Community Center Criminal History Background Check



Please print

Full legal name: _____

Previous names: _____

Date of birth: _____ Race: _____ Male Female

Address: _____ City: _____ Zip code: _____

Social security # _____ Phone number: _____

License or ID # _____ State _____

References (character, ability, skill):

Name: _____ Phone number: _____

Relationship: _____

Name: _____ Phone number: _____

Relationship: _____

Experience: _____

Criminal History Background

Carver Community Center is authorized to perform criminal history record checks on applicants for volunteers, coaches, workers/employees, and officials. Pursuant to this authority, we must obtain the following information to perform a criminal history record check. This information will be used only for the purposes of obtaining a criminal history record for Carver Community Center. We will consider your relevant criminal conviction record in determining your eligibility for a volunteer position with Carver Community Center.

By signing below, I understand the purpose for which the above information will be used, and I voluntarily provide such information to Carver Community



Carver Community Center Criminal History Background Check



Center to be used for all authorized purposes. I hereby request and authorize Carver Community Center, acting through any of its officers, employees, and agents, to use the information provided by me on this form for performing a criminal history record check on me. I understand and agree that the result of the criminal history record check will be used to assist Carver Community Center in determining my eligibility for volunteering, coaching, working/employment, and/or officiating. I hereby release Carver Community Center and its officers, employees, and agents from any and all liability, which may or could result from furnishing the information requested above or from any subsequent use of such information in determining my eligibility for volunteering, coaching, working/employment, or officiating.

Convicted of a felony? (circle one) Yes/No

Name of charge: _____

Date | County | State of conviction: _____

Convicted of a crime involving sex, drugs, alcohol, violent crimes, or improper conduct with or around minors? (circle one) Yes/No

Name of charge: _____

Date | County | State of conviction: _____

I understand and agree that I am responsible for the sportsmanship of everyone with my team or at an event and agree to abide by these requirements and any others that are enacted for Carver Community Center.

Signature: _____

Printed name: _____ Date: _____