



LSL BACKGROUND CHECK



FIRST NAME: _____

MIDDLE NAME: _____

LAST NAME: _____

MAIDEN/ALIAS: _____

GENDER: (CIRCLE ONE) MALE FEMALE

DATE OF BIRTH (MM/DD/YYYY): _____

SOCIAL SECURITY NUMBER: _____

EMAIL ADDRESS: _____

ADDRESS (STREET, CITY, STATE, ZIP): _____

I (print full name) _____ hereby authorize the City of Lake Saint Louis Parks and Recreation Department to run a criminal background check on me for volunteer purposes. The position for which I am volunteering requires me to consent to a criminal background check. This check includes the following: Criminal history reference searches for felony and misdemeanor convictions at the county and federal levels and sex offender registry searches at the county and federal levels.

Signature

Date