Al Wooten Jr. Heritage Center

AUTHORIZATION FOR BACKGROUND CHECK

I authorize Al Wooten Jr. Heritage Center (the "Company") to obtain criminal background and child abuse checks on me. I also agree that a copy of this form is valid like the signed original.

ADP Screening and Selection Services, Inc. (ADP SASS) will prepare the background report for the Company. ADP SASS is located at 301 Remington Street, Fort Collins, CO, 80524, and can be reached by phone at 800-367-5933 or at www.adpselect.com.

I understand that, as allowed by applicable law, the Company may rely on this authorization to make determinations on my employment or time as a volunteer, intern or independent contractor. I understand the Company may order background report(s) under my legal name and any other names I may have used.

I also authorize the following persons, agencies, and entities to disclose to ADP SASS and its agents all information about or concerning me, as allowed by law, including but not limited to: law enforcement and all other federal, state and local agencies; federal, state and local courts; all other private and public sector repositories of information on adult criminal or child abuse history.

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<u>Please print your legal na</u>	ime:		
Last Name	First	Middle	
Signature			// Date Signed (Month/Day/Year)
Email Address:			
Social Security Number		Date of Birth	
Driver's License Number		State Issuing License	
Enter Any Other Names Us	ed (including maiden names):		
First Name	Middle Name	Last Name_	
First Name	Middle Name	Last Name_	
First Name	Middle Name	Last Name_	
	Addresses Within the Past Sev	ven Years (use a separate shee	<u>t as needed)</u>
Present Street Address			
City/State/ZIP			
From///	(Month/Day/Year) To	_// (Month/Day	/Year)
Prior Street Address			
Prior City/State/ZIP			
From///	(Month/Day/Year) To	_//(Month/Day	/Year)