Release for Background Check

I	understand tha	at a background	check is required in order to
become an employee/ volunteer/ ad	vocate for the	Family Crisis Ce	nter (Women's Shelter of East
Texas, Inc.) I realize that this ba	C		,
offender information. I agree to	*	•	<u>*</u>
background check. I further agree t	-	_	•
from being an employee/ voluntee			
understand that any information about			
official representative of The Wome	en's Shelter of	East Texas, Inc. 1	By signing below I certify that
I have not been convicted of any cr			_
will inhibit me from participating as	s a volunteer of	f the Women's Sl	nelter of East Texas, Inc.
Signature		Date	
Print Name (as shown on Driver's Licen	ise)		
Driver's License Number (list state as w	ell)		
OR			
	_		
Social Security Number			
Date of Birth			
CIL (CL.)			
City/State Born			
Ethnicity			
Background Check Completed By:		Date	
Background Check Status:	Clear		Record
			(See attached information)
I understand that the Family Crisis	Center of Eas	st Texas (Women	's Shelter of East Texas Inc.)
will refer to the agency's Internal			,
member consideration, volunteer w			
policies and procedures, former cli		-	
after one year following terminati	•		<u>-</u>
Executive Director. Signing below			* *
East Texas (Women's Shelter of Ea		•	•
part of the background application p			.
	•		
Signatura		Data	
Signature		Date	