

Consent for Law Enforcement Background Check

(Please Print)

I, \_\_\_\_\_ authorize \_\_\_\_\_ to conduct a Law Enforcement check on myself. I release the following information to assist the investigation:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Driver's License Number: \_\_\_\_\_

Other States Lived in prior to SD: \_\_\_\_\_

Previous Last Names Used: \_\_\_\_\_

Have you ever been convicted of a Felony or Misdemeanor? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain:

Offense: \_\_\_\_\_ Date: \_\_\_\_\_ Place \_\_\_\_\_

Offense: \_\_\_\_\_ Date: \_\_\_\_\_ Place \_\_\_\_\_

Offense: \_\_\_\_\_ Date: \_\_\_\_\_ Place \_\_\_\_\_

(If additional space is needed, please use the back of this form)

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date