

Background Authorization & Release Personal & Confidential Information

I hereby authorize Davidson County Schools (DCS) to obtain any and all information that pertains to my eligibility for: Employment (including contracted services) or volunteering in DCS. This information will include, but is not limited to, arrest, and/or criminal records, driver/motor vehicle abstract, and employment verification. I also understand that the information below regarding sex, race, and date of birth is requested for the sole purpose of gathering the above information correctly and will not be used to discriminate against me in violation of any law.

I hereby authorize without reservation, any party or agency to furnish the above-mentioned information. I further authorize the procurement of the above-mentioned reports at *any time* during my employment/volunteerism or contract.

I realize that information appearing on my background check may make me ineligible to serve as a volunteer or as an employee. The cost of this background check is incurred by Davidson County Schools. All background checks will be stored in a secured file in Human Resources.

****PLEASE USE INK, PRINT CLEARLY, AND COMPLETE ALL REQUESTED AREAS****

Please check one: Employee Volunteer

School: _____ Name of Student: _____

Last Name: _____ First Name: _____

Middle Name: _____ Other Names, Maiden, Aliases, etc.: _____

Date of Birth: Month _____ Day _____ Year _____ Race: _____ Gender: _____

Driver's License #: _____ State: _____ SS# _____ Telephone #: _____
(In-state optional) (Required)

Please list ALL ADDRESSES FOR THE PAST SEVEN (7) YEARS, STARTING WITH THE MOST CURRENT:

Street	City	State	Zip	Dates: (MM/YEAR)
1. _____				From _____ To: _____
2. _____				From _____ To: _____
3. _____				From _____ To: _____
4. _____				From _____ To: _____
5. _____				From _____ To: _____
6. _____				From _____ To: _____
7. _____				From _____ To: _____

Signature _____ **Date:** _____