

CRIMINAL HISTORY VERIFICATION OF APPLICANTS

NAME: _____
(LAST) (FIRST) (MIDDLE)

OTHER NAMES USED: _____
(NICKNAMES/MAIDEN)

RACE: _____ SEX: _____ HEIGHT: _____ WEIGHT: _____ HAIR: _____ EYES: _____

ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____

BIRTHDATE: _____ BIRTH STATE: _____

DRIVER'S LICENSE #: _____ DRIVER'S LICENSE STATE: _____

ADDRESS ON DRIVER'S LICENSE: _____
(IF DIFFERENT THAN ABOVE)

OCCUPATION: _____ EMPLOYER: _____

EMPLOYER PHONE #: _____

Do you have any concerns about your current employer being contacted during the course of the background investigation?
Yes _____ No _____

1. Have you EVER been arrested, cited, or convicted of any crime? (Include any felonies, misdemeanors, or criminal traffic offenses such as: Driving While Intoxicated, non-valid operator's license, driving while license suspended, reckless driving, negligent driving, and hit and run).
Yes _____ No _____ (if yes, please give details, include when, where, and why)

2. Have you ever been required to appear before a juvenile court for any reason?
Yes _____ No _____ (if yes, please give details, include when, where, and why)

3. Have you ever used, possessed, or experienced with any illicit drug, not prescribed by a licensed physician?
Yes _____ No _____ (if yes, please give details, include when, where, and why)

"I certify under penalty of perjury, that the foregoing facts and information contained herein are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation, or omission, as well as any misleading statements or omissions, will be cause for denial of employment or immediate termination, regardless of when or how discovered".

I hereby grant the Washington Army National Guard to check civil and criminal records to verify any statement made on this form.

Signature: _____ Date: _____

Background Completed on: _____ By: _____

Approved by: _____