**BACKGROUND CHECK RELEASE**

I hereby certify that I have carefully answered and filled in all information requested in the volunteer application and further state that I fully understand that each of the statements are fully and completely given, with nothing withheld about me or my background which could concern you in giving me placement as a volunteer with the Texarkana Children’s Advocacy Center.

I further state that there is no falsification of any fact or figure contained in the volunteer application and it is my understanding that should any statement be made by me be investigated that should be found false, I could be subject to immediate dismissal from the volunteer program. By signing my name, I hereby consent to the investigation of all facts and circumstances given in the volunteer application and consent to the interviewing of any references given by me in such application and any background investigation by any police organization.

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Signature of Volunteer Applicant Date

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Printed Full Name of Applicant (First, Middle and Last)

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Maiden Name/Other Aliases/Suffix

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Driver’s License Number DL State

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Street Address City State Zip

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Previous Address City State Zip

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Previous Address City State Zip

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Date of Birth Place of Birth (City and State)

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Social Security Number