



Empowering Youth.
Forging Community.

Forge Evolution

CRIMINAL RECORDS and BACKGROUND RELEASE AUTHORIZATION and DISCLOSURE

PLEASE TYPE OR PRINT CLEARLY

I, _____
FIRST NAME MIDDLE NAME LAST NAME (Please Include Jr., Sr., II, III, etc.)

understand that in conjunction with my application for volunteering with Forge Evolution, work to be performed under contract, promotion, volunteer position, reassignment; this company will use the services of an outside agency to research and verify the information I have provided on my application for volunteering including my personal background, character, professional standing, work history and qualifications. A written report of all findings will be provided to Forge Evolution. The administrators use Conspire! and VeriCorp, as an agent to perform its Employment/Volunteer-related background investigations.

Conspire! and VeriCorp will utilize various sources of information it deems appropriate including but not limited to: criminal records, current and former employers, department of motor vehicle records, military records, credit reporting agencies, education records, licensing authorities, state and federal sanctioning authorities, professional and personal references and workers' compensation records including any and all injuries in compliance with the Americans with Disabilities Act. I agree, authorize, and consent to the release and disclosure of any and all information including but not limited to the above to Forge Evolution.

Law enforcement agencies and other entities for positive identification purposes, require the following information when checking public records. It is confidential and will not be used for any other purposes. **PLEASE PRINT CLEARLY.**

COST OF APPLICATION FEE: \$25.00 (cash/check/credit/debit card)

FORGE EVOLUTION WILL PROCESS YOUR BACKGROUND CHECK THROUGH AN OUTSIDE AGENCY. THE \$25.00 FEE SHOULD BE GIVEN TO FORGE EVOLUTION STAFF ALONG WITH THE ADULT VOLUNTEER APPLICATION. THIS REPORT WILL REVIEW COLORADO CRIMINAL HISTORY AND THE FEDERAL SEX OFFENDER REGISTRY.

Please PRINT clearly:

FIRST NAME	MIDDLE NAME	LAST NAME	
EMAIL ADDRESS	DRIVER'S LICENSE NUMBER	STATE	
SOCIAL SECURITY NUMBER	DATE OF BIRTH (Month/Day/Year)	PLEASE CIRCLE ONE	RACE
		MALE OR FEMALE	

Alias/Maiden/Previous Name(s) Use the back of this form if more space is needed:

FIRST NAME	MIDDLE NAME	LAST NAME	YEARS USED

List all addresses, including current address, for the past 4 years. Use the back of this form if more space is needed:

ADDRESS, CITY and STATE	ZIP CODE	COUNTY	DATE FROM	DATE TO

APPLICANT SIGNATURE: _____ DATE: _____

