PARKVIEW CHRISTIAN SCHOOL

Volunteer Application and Background Check Authorization

Personal Data

Legal Name:_____ _____ _____
First Middle Last

AKA/Maiden/Former Name: _____

Birthdate: _____ **Phone Number:** _____

Current Address: _____

_____

Previous Address: _____
(If at your current address seven years or less)

_____

Previous Address: _____
(If at your current address seven years or less)

_____

Social Security Number: _____

Driver's License Number: _____ **State:** _____

E-mail Address: _____
(may be used for official correspondence)

I certify that I have made true, correct, and complete answers and statements on this form. I hereby give Parkview Christian School permission to complete a background investigation with IntelliCorp Records, Inc. This investigation may include such information as criminal or civil convictions, personal references, and other appropriate sources. Furthermore, I agree to abide by all policies, procedures and rules as delineated in Parkview Christian School's Child Protection Policy. The Child Protection Policy is available on the school website. Please refer to http://www.ParkviewChristian.com

Printed Name: _____

Signature: _____ **Date:** _____