## Consent For Criminal Background History Check Authorization/Waiver/Indemnity

Name:		Social Security #:		
Street Address:		City:	State:	Zip:
Driver's License #:	Issuing State:	Phone:		Birthday:
Other names by which you Note: Include maiden name I hereby give my permissio to my criminal history recommendation of the reporting agencies bargains and deferred adjuding eligibility for an employee or any time. I understand that criminal history. Smith Osb I, the undersigned, do, for forever discharge and agreeach of their officers, direct all causes of action, suits, I (including claims for the restance of the each connection with my application.)	e or names that were charen for	rn Cross. The offenses, arrest this information with this organ criminal hister of the criminal hister of the criminal standard admits and hold the criminal hold the criminal hister of the criminal hister of the criminal hold sums of meaning from	to obtain the criminal history at and conviction ation will be used inization. I also unterpreted to the conviction of t	data as well as plead, in part, to determine anderstand that as long k may be repeated at the presence of any obtained.  The remiss, release, and h Osburn Cross, and against any and demands whatsoever d any and all related.
		Applicant	's Signature	Date
		Please Pri	nt Name	
			uardian's Signature	