



## Volunteer Background Check

I \_\_\_\_\_, hereby grant permission to Youth Go Inc.

Print Full Name:      First    Middle    Last

to obtain information from local and state law enforcement agencies to help determine my eligibility to serve as a Youth Go volunteer. I understand that if the records check shows any violations committed or other information about my background that would indicate unsuitability or a risk, I may not be accepted as a Youth Go volunteer.

Name: \_\_\_\_\_

Previous Name(s) \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security # \_\_\_\_\_

Current Address \_\_\_\_\_

\_\_\_\_\_

States lived in previously: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Witness: \_\_\_\_\_