



FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

## AUTHORIZATION FOR BACKGROUND CHECK

I \_\_\_\_\_, agree to allow the Michiana Family YMCA to run a criminal background check on myself for purposes of employment or volunteering with the Michiana Family YMCA.

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

### PRINT CLEARLY

Name \_\_\_\_\_ Sex \_\_\_\_ Male \_\_\_\_ Female  
(Last) (First) (M.I.)

Driver's License Number \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Maiden or any former names \_\_\_\_\_

Current Address \_\_\_\_\_  
(# & Street) (City) (St) (Zip)

Previous Address (last two years)

\_\_\_\_\_  
(# & Street) (City) (St) (Zip)

\_\_\_\_\_  
(# & Street) (City) (St) (Zip)

\_\_\_\_\_  
(# & Street) (City) (St) (Zip)

\_\_\_\_\_  
(# & Street) (City) (St) (Zip)

#### MICHIANA FAMILY YMCA

1201 Northside Blvd, South Bend IN 46615

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