BOYS & GIRLS CLUBS
OF BELLEVUE

National Background Check

Request For Criminal History Information

REQUESTING AGENCY/ADDRESS

Agency: Bellevue Boys and Girls Club

Address: 209 100th Avenue NE

City/State/Zip: Bellevue, WA 98004

APPLICANT OF INQUIRY (All information in this box MUST be completely filled out)

Applicant's Name: _____
First Middle Last

Date of Birth: _____ **Sex:** _____ **Race:** _____
Month/Day/Year

Social Security Number: _____ **Volunteer/Employee Title:** _____

Street Address: _____ **City/State/Zip:** _____

I certify this request is made pursuant to and for the purpose indicated.

Authorized Signature: _____ **Date:** _____

Title: _____ **Area Code/Phone:** (___)_____

FOR OFFICIAL USE ONLY:

As of this date, the applicant listed above shows no evidence contrary to National BGCA standards for Employees/Volunteers.

Requesting Agency Signature: _____ **Date:** _____