

## Background Record Check Permission Form

I hereby authorize Lakehill Preparatory School to perform a check of my background, including:

- Criminal Record Charge or Conviction
- Driving Record
- Personal References
- Past Employment/Volunteer Status
- Educational/Professional Status
- Any other persons or sources deemed appropriate for the position for which I have expressed an interest

I understand that I do not have to agree to this background check, but that refusal to do so may exclude me from consideration.

I understand that information collected during this background check will be limited to that appropriate to determining my suitability for certain positions and that all such information collected during the check will be kept confidential.

I hereby extend my permission to those individuals or organizations contacted, for the purpose of this background check, to give their full and honest evaluation of my suitability of the described position and such other information as they deem appropriate.

Name(s) of Student(s) Attending Lakehill	Grade
_____	_____
_____	_____
_____	_____
_____	_____

Parent's Name: \_\_\_\_\_  
(Last) (First) (Initial)

Gender: Male/Female Race: \_\_\_\_\_

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security #: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State Issued: \_\_\_\_\_

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

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

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*For Office Use Only*

Investigator Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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