

# City of Dillon Parks & Recreation



PO Drawer 431, Dillon, SC 29536

843 774-5115, Ext. 3 [www.cityofdillon.sc.gov](http://www.cityofdillon.sc.gov)

## PERMISSION FOR CRIMINAL HISTORY RECORDS CHECK

I, the undersigned, hereby authorize and give consent for the City of Dillon Park and Recreation to obtain information regarding myself for employment or volunteer purposes. This information may be obtained either in writing or by way of telephone in connection with my application. Any person, firm or organization providing information in accordance with this authorization is released from any and all claims of liability for compliance. This information may include all or some of the following:

- Employment records/Employers references
- Criminal background check information
- Sex offender registry check
- Driver's license check
- Training/experience! educational background
- Personal references
- Addresses

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Please Print:

Applicants Full Name \_\_\_\_\_

Maiden Name \_\_\_\_\_ SS NUMBER \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex:    male        female

Address \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

How long at current address? \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State \_\_\_\_\_