



REQUEST FOR CRIMINAL BACKGROUND CHECK

NAME: _____
Please print full name clearly

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____

JOB TITLE: _____

TOTAL DUE: \$17.40* (made payable to ESCC)

**Should additional charges apply, applicant will be notified.*

As required by State Board Policy 623.01, effective December 13, 2007, I hereby request that a Criminal Background Check be performed, utilizing the information submitted with my *Application for Employment, Employment Eligibility Verification, and Request, Authorization, Consent, and Release for Background Information*. I understand that the fee I submit for this purpose is non-refundable and that employment is contingent upon an acceptable result.

Signature: _____

Date: _____

Official use only:

Receipt#: _____