

Criminal Background Check and Disclosure

Green River Preserve
301 Green River Road
Cedar Mountain, NC 28718



Full Name (First, Middle, Last): _____ Date of Birth _____

Social Security #: _____ Other names records may be filed under: _____

Driver's License Number: _____ State of Issue: _____

Name as it appears on License: _____

Please list location of residences for the past 5 years --- school and home counties (current & most recent first).

Address 1: _____ Address 3: _____

City/State/Zip: _____ City/State/Zip: _____

County: _____ Area Code: _____ County: _____ Area Code: _____

Dates (month/year) From: _____ To: _____ Dates (month/year) From: _____ To: _____

Address 2: _____ Address 4: _____

City/State/Zip: _____ City/State/Zip: _____

County: _____ Area Code: _____ County: _____ Area Code: _____

Dates (month/year) From: _____ To: _____ Dates (month/year) From: _____ To: _____

1) Have you ever been **convicted or charged** with a crime related to your attempted or actual misconduct with a child including but not limited to sexual abuse, child abuse, sexual exploitation, and child neglect? Yes No

If yes, please explain:

Use back if necessary

2) Have you ever been **convicted or charged** with a violent crime against children or adults including but not limited to rape, assault and battery, kidnapping, or intent to commit these crimes? Yes No

If yes, please explain:

Use back if necessary

3) Have you ever been held liable in a civil case regarding the above mentioned crimes? Yes No

If yes, please explain:

Use back if necessary

4) Have you ever been terminated from a job for, arrested for, or convicted of a crime related to illegal drug use or involvement in illegal drug related activities? Yes No

If yes, please explain:

Use back if necessary

I hereby authorize the agency chosen by Green River Preserve (GRP) to provide the requested information. I understand that GRP has a practice of requesting a background check which could include criminal and motor vehicle records on prospective staff members prior to contract confirmation. I hereby grant permission and authorize the above-mentioned checks and give permission to allow verification of any information given on my application. I understand that failure to provide accurate information may result in nullification of offer or termination. I also understand that GRP may deny/terminate employment if I answered "yes" to any of the four questions I was asked on this form or if GRP discovers any information that may imply a "yes" to any of the questions. I understand that the information obtained will become part of my employment application.

Staff Member/Applicant Signature: _____ Date: _____

Signature of Minor's Parent or Guardian (if applicable): _____ Date: _____