

# Calvary Kids Development Center

## *Background Check Information Sheet*

Please Print Clearly

Date \_\_\_\_\_

**PERSONAL DATA**

Full Name: \_\_\_\_\_ Maiden or other names used: \_\_\_\_\_

Birthday: \_\_\_/\_\_\_/\_\_\_ Social Security # \_\_\_\_\_ Driver's License # \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

e-mail address: \_\_\_\_\_

Occupation: \_\_\_\_\_ Company Name: \_\_\_\_\_

Marital Status: *Single Engaged Married Divorced Separated Widowed* Spouse's Name: \_\_\_\_\_

Names and ages of children:  
\_\_\_\_\_

Have you ever been accused or charged with a crime or incident involving a minor? \_\_\_\_\_

If you answered yes to the question above, please provide a written explanation on a separate sheet of paper and attach it to this form.

The information contained on this sheet is correct to the best of my knowledge. I recognize that a background check will be made and a criminal history check may be conducted, and I willingly consent to all such checks. In consideration of the receipt and evaluation of this information sheet by Calvary Kids Development Center and Calvary South Austin, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature that may at any time result to me, my heirs, or family, because of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this information sheet.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date