

CONFIDENTIAL

Background & Warrant Check Authorization

Print Name: _____
(First) (Middle) (Last)

Former Name(s) and Dates Used: _____

Current Address Since: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Social Security Number: _____ DOB: _____

Telephone Number: _____ Race / Sex _____

Drivers License Number/State: _____

The information contained in this application is correct to the best of my knowledge.

I hereby authorize the **Anderson County Sheriff's Office (Anderson, South Carolina)** and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; credit reports, current and previous residences; employment history, education background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency to divulge any and all information, verbal or written, pertaining to me, to the **Anderson County Sheriff's Office (Anderson, South Carolina)** or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources. The **Anderson County Sheriff's Office (Anderson, South Carolina)** and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants personal information, including, but not limited to, addresses, social security numbers, and dates of birth.

A background and warrant check will be conducted annually on all volunteers of the Anderson County Sheriff's Office Community Emergency Response Team and Volunteer Mounted Search and Rescue.

Signature: _____ Date: _____
Authorization to conduct background check

Signature: _____ Date: _____
Authorization to conduct warrants check