



**Criminal History Check/Reference Check &
Information Release**

I, _____, understand it will be necessary for Brazos Bend Guardianship Services (BBGS) to conduct a background check regarding my criminal history, personal references, and employment.

I authorize BBGS to obtain any needed information regarding my legal/criminal history, character references, and employment from any state or federal agency, my employer, and personal references for the purposes of participating in a volunteering program. Further, I provide permission for BBGS to conduct the same investigation of my background in previous states in which I have resided.

Signature Date

Print Name _____

Please list any other cities, states, and dates of residency during the past 10 years.

_____ City	_____ State	_____ From (m/year)	_____ To (m/year)
_____ City	_____ State	_____ From (m/year)	_____ To (m/year)
_____ City	_____ State	_____ From (m/year)	_____ To (m/year)
_____ City	_____ State	_____ From (m/year)	_____ To (m/year)