2569 US-23 South
Alpena, MI 49707

Please check appropriate box and complete location information for response to be returned

☐ **Employee** ☐ **Volunteer** **Manager/Work Site:** _____

Disclosure: Northeast Michigan Community Service Agency, Inc. (NEMCSA) hereby discloses that it may obtain a criminal history report(s) for the purpose of considering my application for employment, other employment purposes or to volunteer for any NEMCSA program(s). Reports may also be obtained during my employment or volunteer service with NEMCSA, if required by a program, contract, or a need is identified.

If a record is found, you will receive written notification and have the right to dispute the record by: Obtaining finger prints on a state applicant fingerprint card. The finger print card should be mailed to the Criminal Justice Information Center with a copy of the criminal record response and a letter requesting the Criminal Justice Information Center verify the criminal record does not belong to you.

Authorization: *(Please Print Full Name)* I _____, hereby authorize Northeast Michigan Community Service Agency, Inc. (NEMCSA) to conduct criminal history report(s). I have read the above Disclosure and am providing accurate, true and correct information on a voluntary basis. I acknowledge that I am signing this form as a normal part of the NEMCSA employment/volunteer process.

_____ _____

Signature Date

The following information is required to obtain the criminal history report(s), and will only be used to identify any criminal history. It will be kept confidential and maintained in a separate file from the application, if applicable.

Name _____
(Last) (First) (Middle Name)

Address _____
(Street) (City)

_____ Phone (____)_____
(County) (State) (Zip)

Please List all Prior Addresses (*within the last 10 years*):

_____
(Street) (City) (State) (Zip)

_____
(Street) (City) (State) (Zip)

Race: ☐ White ☐ Black ☐ Asian/Pacific Islander ☐ American Indian/Alaskan Native ☐ Unkown/Other

Sex: ☐ Male ☐ Female ☐ Unknown/Prefer not to answer

_____/_____/_____ _____

Date of Birth Social Security Number

Provide any other name(s) previously used including aliases, maiden or married, etc.

_____