

I AUTHORIZE THE OSHKOSH COMMUNITY YMCA TO CONDUCT A COMPLETE CRIMINAL BACKGROUND CHECK. I UNDERSTAND MY EMPLOYMENT AT THE YMCA IS CONTINGENT UPON THE RESULTS OF THIS BACKGROUND CHECK.

SIGNATURE
DATE
PLEASE COMPLETE THE FOLLOWING INFORMATION FOR COMPLETION OF BACKGROUND CHECK. PLEASE PRINT.
FULL NAME (FIRST, MIDDLE, LAST)
MAIDEN NAME
DATE OF BIRTH
SEX
RACE
SOCIAL SECURITY NUMBER