

James City County Parks and Recreation 3154
National Background Screening Consent Form



Organization _____

Applicant's **Legal** Name (printed)

Social Security Number _____ Date of Birth _____

Applicant's Address

City _____ State _____ Zip _____

I, _____, authorize and give consent for the above named organization to obtain information regarding myself. This includes the following:

- Local & National Criminal background records/information
- All 50 State Sex Offender Registries
- Full Address Trace
- Social Security Verification

I the undersigned, authorize this information to be obtained either in writing or via telephone in connection with my application. Any person, firm or organization providing information or records in accordance with this authorization is released from any and all claims of liability for compliance. Such information will be held in confidence in accordance with the organization's guidelines.

By signing this document, I am providing my consent for an initial background check as well as any subsequent background checks deemed necessary.

Signature: _____

Date: _____

Mail in or to pay in person: CHECK or MONEY ORDER ONLY. NO CASH**

Make checks and money orders **payable to SSCI (\$15.00)**
and return to Stephanie DeBord, 5340 Palmer Ln. Suite 1A, Williamsburg, VA 23188.

****To pay with a Credit Card, please use this link to the website:**

https://ssci2000.secure-screening.net/escreening/OApp_LoginEntrance.asp?mode=direct&code=31540N

and fill out the background check information online.