Print Form

PRE-EMPLOYMENT
CRIMINAL HISTORY BACKGROUND CHECK AUTHORIZATION FORM

Last Name _____ First Name _____ MI _____

Maiden Name _____ Phone Number _____ E-mail _____

Local Address _____ City _____ Zip _____

Date of Birth _____ Driver's License Number _____

Gender: ☐ Male ☐ Female

Race:
☐ American Indian or Alaska Native
☐ Asian
☐ Black or African American
☐ Hispanic or Latino
☐ Native Hawaiian or Other Pacific Islander
☐ White

Have you resided outside the state of Michigan in the last 7 years? ☐ Yes ☐ No

If yes, please provide your social security number: _____

If yes, please list all cities and states lived in for the last 7 years.

Dates	City	State

Have you ever pled guilty or no contest to felony charges? ☐ Yes ☐ No

Are you currently charged with a criminal offense and awaiting disposition? ☐ Yes ☐ No

I, _____, acknowledge The City of Mt. Pleasant will use my driver's license number and date of birth to run a criminal background and driving record status verification.

_____ _____
Signature Date