



CRIMINAL HISTORY CONSENT FORM

As a prospective employee/volunteer of Team Georgia Baseball Academy (TGBA), I understand that it is this organization's policy to secure criminal history information as part of their pre-employment screening process, using the information provided below.

Name: _____
LAST, FIRST MIDDLE

Maiden Name/Names Previously Used:

Driver's License Number: _____

State Licensed Issued: _____

Birth Date: _____ Race: _____ Sex: _____

Social Security Number: _____

I understand that the above information is required to perform a thorough background check. I authorize TGBA to utilize the above information for the sole purpose of performing a criminal history file search.

Printed Name

Signature of Prospective Employee/Volunteer

Date