



North Olmsted H of Stove Baseball League
P.O. BOX 156
NORTH OLMSTED, OHIO 44070

AUTHORIZATION TO RELEASE INFORMATION FORM

Note: Submitting an incomplete or illegible form may delay the background check results.

I hereby AUTHORIZE and request any law enforcement agency to furnish bearer with criminal history and identity check information in their possession regarding me in connection with my volunteering with the North Olmsted Hot Stove Baseball Organization in a critical position. I am willing that a photocopy of this authorization be accepted with the same authority as the original. I understand this AUTHORIZATION is to be part of the written Volunteer application, which I sign. I understand that Volunteer positions that are designated critical require background checks for the purpose of evaluating me for acceptance, promotion, reassignment, reclassification, or retention as a Volunteer. I also understand that any misrepresentation, falsification or omission of facts herein may be grounds for disqualification, release or dismissal.

PRINT NAME: _____
Last First Middle

DATE OF BIRTH: _____ **SOCIAL SECURITY #:** _____

HOME PHONE #: _____ **BUSINESS PHONE #:** _____

OTHER NAMES YOU HAVE USED: _____

Current Address:

Street Number & Name City State Zip How Long?

Have you been background checked previously? YES NO

If yes, please note date (approximate): _____

SINCE YOUR 18TH BIRTHDAY, HAVE YOU BEEN CONVICTED OF A FELONY OR FELONY-REDUCED-TO MISDEMEANOR CONVICTION BY ANY COURT? YOU MAY OMIT CONVICTION OF A MISDEMEANOR WHILE UNDER AGE 18 IF THE RECORD WAS SEALED UNDER PENAL CODE 1203.45, MINOR TRAFFIC VIOLATIONS FOR WHICH THE FINE IMPOSED WAS \$400.00 OR LESS, ANY OFFENSE THAT WAS FINALLY SETTLED IN JUVENILE COURT OR REFERRED TO THE YOUTH AUTHORITY, OR ANY CONVICTION SPECIFIED IN HEALTH AND SAFETY CODE WHICH PERTAINS TO CERTAIN MARIJUANA OFFENSES. YES NO

HAVE YOU EVER BEEN CONVICTED OF A CRIME UNDER ANOTHER NAME? YES NO

IF YES, STATE NAME: _____

If yes, please indicate date, location and explanation:

Complete driver's license information only if this position requires that you drive a motor vehicle.

DRIVER'S LICENSE INFORMATION: _____
License number Expiration Date State of Issue

I hereby certify that all statements on this application are true and correct to the best of my knowledge and belief. I understand that the North Olmsted Hot Stove Baseball Organization solicits this information so as to be informed of my previous record and character. I understand that my volunteer status with the North Olmsted Hot Stove Baseball Organization depends upon successful completion of a criminal background investigation. If accepted, I understand that any falsification, misrepresentation or omission of facts of this record may be considered cause for release or dismissal.

APPLICANT SIGNATURE: _____ **DATE:** _____