**Background Screening**

(Every guest over the age of 18 must sign)

First Name:                                           Middle Name:                                         Last Name:

Former names (include maiden name):

Date of Birth:                                        Social Security Number:

Gender:                                                        Email Address:

Do you wish to receive a copy of report? YES/NO

Address:

City:                                                                         State:                                                                 Zip:

I,                                                           understand that Family Promise of San Gabriel Valley (FPSGV) completes a criminal background check on all persons over the age of 18 prior to entering into FPSGV. FPSGV does not accept persons with violent felony convictions, but may accept persons with criminal MISDEMEANOR convictions on a case-by-cases basis. Therefore, prior to entering FPSGV, I must undergo a criminal background check and be notified that I have passed to FPSGVs satisfaction. Failure to pass the criminal background check to FPSGV satisfaction will disallow my admittance in the program.

I confirm that all the information on this form is true and correct. I understand that all information will be held in confidence and I release and hold harmless FPSGV from all liability associated with obtaining this information. I give my permission to FPSGV to research and confirm all information provided and to request a criminal report.

Guest Signature:  Date:

Staff Signature: Date: