



AYCC Criminal History Background Check

Date _____

Purpose of Request: Volunteer _____ or Employment _____

LAST Name _____ Middle Initial _____ First Name _____

Previous Name (Married/Maiden/Other) _____

Physical Address _____

Prior Physical Address _____

Home Telephone _____ Cell Phone _____

Email Address _____

Date of Birth _____

Driver's License Number _____ State _____ Date of Issue _____

Social Security Number _____

I authorize the Alford Youth & Community Center to perform a criminal history background check upon a being offered a position with the AYCC and each year thereafter while I am employed with the AYCC.

Signature _____ Date _____

Person Inquiring: Mary Burris, Human Resources
Organization: Alford Youth & Community Center
Address: 126 North Street, Waterville, Maine 04901

Our Mission: To inspire and enable all young people and their families to realize their full potential as productive, responsible, and caring citizens.

Belong Believe Achieve

We are an equal opportunity employer, committed to diversity in the workplace.