



**Town of Wells Volunteer Force  
Background Check  
(Please Print)**

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Middle Initial** \_\_\_\_\_

**Address:** \_\_\_\_\_

How many years have you lived at this address? \_\_\_\_\_

If less than 3 years, please provide previous address: \_\_\_\_\_

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**Phone #** \_\_\_\_\_ **(home)** \_\_\_\_\_ **(cell)** \_\_\_\_\_

**Driver's License #** \_\_\_\_\_ **State issued:** \_\_\_\_\_

**Social Security #** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Volunteer Program:** \_\_\_\_\_

**Position:** \_\_\_\_\_

I, the undersigned applicant hereby expressly authorize the Town of Wells, its agents and employees to make any investigation of my personal or employment history, expressly including, but not limited to federal and/or state criminal, law enforcement, or traffic records. I further authorize any former employer, person, firm, corporation agency, administrative body or governmental agency to give the Town of Wells, its agents or employees any information they may have regarding me. In consideration of the review of my employment application by the Town of Wells, its agents or employees, I hereby release the Town of Wells and any and all providers of information to whom this release is sent, from any liability as a result of furnishing or receiving this information. I hereby state that all the information and materials I have provided to the Town of Wells as a part of the employment process are accurate and truthful.

I authorize all my present and previous employers, or references, to furnish information regarding my personal character, habits, or employment performance. I also authorize schools which I have attended to provide verification of educational attainment and other relevant information.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_