

**Ellis County Christian Homeschool Organization -**  
**Authorization for Release of Background Information**

In connection with my application for involvement in Ellis County Christian Homeschool Organization (ECCHO), I authorize ECCHO and their agents to solicit background information relative to my criminal record history through the volunteer screening service of ECCHO's choice. I understand that ECCHO may conduct inquiries into my background that may include criminal records, personal references, and other public records reports pertaining to me. The criminal history record, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications. I understand that this information will be used, in part, to determine my eligibility for involvement with ECCHO. I also understand as long as I remain involved, the criminal history records check may be repeated at any time.

I authorize without any reservation, any person, agency, or other entity contracted by ECCHO to furnish the above mentioned information.

I release ECCHO, or their designated volunteer screening service, and all persons, agencies, and entities providing information or reports about me, from any and all liability arising out of furnishing such information or reports.

Full Legal Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Other Names Used: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State Issued: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ How long at this address: \_\_\_\_\_

Previous address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ How long at this address: \_\_\_\_\_

Previous address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ How long at this address: \_\_\_\_\_

List all cities/states resided at since age 18: \_\_\_\_\_

\_\_\_\_\_

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