

KYSO PRELIMINARY BACKGROUND INVESTIGATION FOR VOLUNTEERS

1. Full Name:

a. Last_____First_____Middle_____.

b. Maiden name (if applicable)_____.

2. Birthday_____.

3. Current Address:

a. Street Address_____.

City_____State_____Zip_____How Long_____.

County of Residence_____.

4. Previous Addresses

a. Have you ever lived outside of the State of Wisconsin? YES NO

b. If yes, please list states you have lived in other than Wisconsin:

_____.

5. Have you ever been fined or convicted of a crime other than a minor traffic violation

YES NO If yes, please explain on the back of this form.

STATEMENT AND AUTHORITY TO RELEASE INFORMATION

PLEASE READ THIS STATEMENT CAREFULLY BEFORE YOU SIGN

The Kewaskum Youth Soccer Organization will conduct a criminal background check on all potential volunteers. I authorize all persons, and law enforcement agencies to supply any information concerning my background.

Signed_____Date_____.