



ROCKY MOUNTAIN BEST (BOOSTING ENGINEERING, SCIENCE, AND TECHNOLOGY)

CONSENT AND AUTHORIZATION TO PERFORM CRIMINAL HISTORY BACKGROUND CHECK

Date: _____ Driver's Lic #: _____ State Issued: _____

Last Name First Name (No Nicknames) Middle Name

Maiden and/or Other Last Names Used & Date Last Used

Date of Birth (MM/DD/YYYY) Social Security Number (NNN-NN-NNNN)

Current Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Assigned School Team: _____

I understand Rocky Mountain BEST (hereafter "RM BEST") is required to ensure the safety of the students who participate in RM BEST activities. I intend to be a mentor with the school team identified above, and, will, therefore, have direct frequent interaction with students under the age of 18.

By my signature below I authorize and consent to full release and retention of personal background information (either orally or in writing) to authorized representatives of RM BEST obtained by Reality Background Checks, LLC (541 B Main Street, Longmont, Colorado 80501, ph. 303-531-5550) resulting from a search of county criminal records, statewide criminal records, statewide sex offender records, criminal records of the Federal District of Colorado, and other criminal record databases as necessary. I understand that results of these reports will be used by RM BEST to determine my eligibility for my continuing volunteer participation in RM BEST activities. I release and discharge RM BEST, Reality Background Checks LLC, its directors, agents, and associates to the fullest extent permitted by law from any claims, damages, losses, liabilities, costs, expenses, or any other charge or complaint filed with any agency arising from retrieving, reporting, and retaining this information. I understand that I may have the right to obtain, review and seek correction of my criminal history record information under various federal, state, and local laws.

I HEREBY CERTIFY THAT ALL INFORMATION PROVIDED IN THIS CONSENT AND AUTHORIZATION IS TRUE, CORRECT AND COMPLETE. I UNDERSTAND THAT ANY OFFER OF ENGAGEMENT FOR A VOLUNTEER POSITION BY RM BEST MAY BE WITHDRAWN IF ANY INFORMATION PROVIDED HEREIN PROVES TO BE INCORRECT OR INCOMPLETE, OR IF I CHOOSE NOT TO PROVIDE CONSENT.

Signed this _____ day of _____, 20__

Print Name

Signature