CONVICTION INFORMATION NAME CHECK REQUEST FOR VOLUNTEERS

Please list your legal name as it appears on your driver’s license.

Last Name: ____________________________________________
First Name: ____________________________________________
Middle Initial: ____________________________

Date of Birth: ____________________
Month   Day   Year

Sex:   [ ] “M” for Male
       [ ] “F” for Female
       [ ] “U” for Unknown

Race:  [ ] “W” for White (includes Mexicans and Latinos)
        [ ] “B” for Black
        [ ] “A” for Asian/Pacific Islander
        [ ] “I” for Indian/Alaskan Native
        [ ] “U” for Unknown

I authorize University of Illinois Extension to provide the above information to Illinois State Police for a Conviction Information Check. I verify that the information provided is accurate. I understand any false information may be sufficient grounds for rejection or dismissal.

Signed ____________________________    Date ____________________________

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