

**CONFIDENTIAL**

**Background Check Authorization**

Print Name: \_\_\_\_\_  
(First) (Middle) (Last)

Street Address: \_\_\_\_\_

Apt# \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Driver's License Number/State: \_\_\_\_\_

The information contained in this application is correct to the best of my knowledge.

I authorize Swift Sportsdome and its designated agents and representatives to conduct a comprehensive review of my background to be generated for volunteer purposes.

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