

# Waves & Ripples, LLC

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## REQUEST FOR CRIMINAL BACKGROUND CHECK

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Applicant Name (First, Middle, Last): \_\_\_\_\_

All other names currently or previously used (Maiden, Former Married, Alias, etc.): \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Place of Birth: (City + State or Country): \_\_\_\_\_

Gender: \_\_\_\_\_ Race: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

Employment Application Date: \_\_\_\_\_ Hire Date / Transfer Date: \_\_\_\_\_

New Hire / Transfer: \_\_\_\_\_ Applicant Hired for Employment at: Waves & Ripples, LLC

I \_\_\_\_\_ authorize **Waves & Ripples, LLC** to

**perform a criminal background check using the information provided above.**

**Signature:** \_\_\_\_\_

**Full Name:** \_\_\_\_\_

**Date signed:** \_\_\_\_\_

### Office Use Only:

#### Provider Information:

Name: \_\_\_\_\_

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

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

Phone Number: \_\_\_\_\_ Website: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Date & Time of Request: \_\_\_\_\_

Name of Staff Member that Processed Request: \_\_\_\_\_