

MICHIGAN Community Foundations



## Youth Advisory Committee Criminal History Check Form

To protect your privacy, this form will be seen only by [community foundation name] staff.  
Please return the completed form in the attached, confidential envelope.

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

Previous, married and/or maiden names: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Sex:  Male  Female

Social security number: \_\_\_\_\_

State issuing driver's license: \_\_\_\_\_ Driver's license number: \_\_\_\_\_

Have you ever been convicted of a felony or a misdemeanor?  Yes  No

If yes, please explain.

I give [community foundation name] permission to check my criminal history with the [regional police authority] and/or local police department.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*Note: A criminal record will not necessarily disqualify an applicant. A criminal record is one piece of information that will be considered in determining the appropriateness of an individual to be a [community foundation name] adult volunteer.*