



ENTERPRISE STATE  
COMMUNITY COLLEGE

## REQUEST FOR CRIMINAL BACKGROUND CHECK

NAME: \_\_\_\_\_  
*Please print full name clearly*

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

TOTAL DUE: \$17.40\* (made payable to ESCC)

\*Should additional charges apply, applicant will be notified.

As required by State Board Policy 623.01, effective December 13, 2007, I hereby request that a Criminal Background Check be performed, utilizing the information submitted with my *Application for Employment, Employment Eligibility Verification, and Request, Authorization, Consent, and Release for Background Information*. I understand that the fee I submit for this purpose is non-refundable and that employment is contingent upon an acceptable result.

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

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

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*Official use only:*

Receipt#: \_\_\_\_\_