

Girls into Women - a program of the Rhonda Walker Foundation

**State of Michigan Background Check and Sex Offender Registry
Authorization Form**

It is the policy of our organization to secure criminal conviction history information as part of the volunteer screening process using the information provided below.

NAME _____
Last **First** **Middle**

Maiden Name/Names Previously used _____

Date of Birth _____

Gender _____ **Race** _____

Driver's License Number _____

I understand that the above information is required by the Central Records division of the Michigan State Police, Lansing, Michigan. I authorize the Rhonda Walker Foundation to utilize the above information for the sole purpose of obtaining a conviction only criminal history file search and sex offender registry listing.

SIGNATURE OF APPLICANT

DATE