

# **RGV Road to Recovery**

## **Release of Background Information**

In connection with my application for volunteer service with RGV Road to Recovery, I authorize RGV Road to Recovery and their agents to solicit background information relative to my criminal record history. I understand that RGV Road to Recovery may conduct inquiries into my background that may include criminal records, motor vehicle records, personal references, and other public record reports pertaining to me. When requested by an employer, motor vehicle records or a driving history may be obtained.

### **Authorization**

I authorize without any reservation, any person, agency, or other entity contacted by RGV Road to Recovery or their agents for purposes of obtaining background report information, to furnish the above-mentioned information.

I release RGV Road to Recovery and all persons, agencies and entities providing information or reports about me from any and all liability arising out of furnishing any such information or reports.

\_\_\_\_\_  
Print Full Legal Name

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

\_\_\_\_\_  
City, State, and Zip

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Driver's License Number and Issuing State

\_\_\_\_\_  
Other or Former Names (maiden, married, surnames, etc.)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date