

**DIOCESE OF DALLAS
BACKGROUND CHECK REQUEST FORM**

Report for: _____ Location Code _____
(Name of School or Parish)

Address report to: _____
(Name of Person)

Address: _____ CSZ: _____

FAX No: _____ Email: _____

Phone No: _____

Completed Report to be sent via: Fax: _____ Email: _____ Mail: _____

Person to be checked:

Name: _____
Last First Middle

Other Names Used: _____

Social Security No: _____ Date of Birth: ____/____/____
(Required)

Driver's License Number and State: _____
(Only if requesting a Motor Vehicle Record)

Type of report requested:

Criminal Background: _____

Consumer Credit Check: _____
(Must have employment need for requesting)

Motor Vehicle Record: _____

Education/Certification Verification: _____

Request is for:

School Employee: _____

Parish Employee: _____

Volunteer: _____

I verify that a completed and signed Diocesan Safe Environment Screening Form is on file at our location. The form was signed on: _____
(Date)

(Authorized Signature)

FAX, or Mail Request to: Tom Nelson
Accutrak
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