PULASKI COUNTY GOVERNMENT APPLICANT BACKGROUND CHECK CONSENT

You have applied for the position of		in the	
Department of Pulaski County Government. Employment in this position requires a criminal background check. You have been offered this position contingent upon satisfactory results of an Arkansas State Police criminal background check. The results of this background check will be used to assist in determining your eligibility for employment in the above position. You have the right to refuse a background check. However, refusal will result in termination of your application. Conviction of a felony law offense will not necessarily disqualify an applicant from employment with Pulaski County Government.			
Have you ever been convicted of a felony law offense? Yes \(\Bar{\text{No}} \) No \(\text{If yes, please list the offense, conviction date, state (where convicted), and disposition of the case.			
Full Name Middle	Last / Maiden/O	ther	TATATAT AT
Date of Birth(Month/Day/Year)	State of Birth(Do not abbrev		Sex
Social Security #	Driver's License # _		(State)
Mailing AddressStreet	City	State	Zip Code
Telephone Number(s) Cell	Home/Other		
I give my consent for the Arkansas State Police to conduct a criminal background check on myself and release any results to Pulaski County Government.			
Signature:	Date		