

# CRIMINAL BACKGROUND CONSENT FORM

## \*\*\*EMPLOYEE\*\*\*

A records check of the Waite Park Police Department records, the Minnesota Public Criminal History website, BCA Portals program, the Minnesota Court Information System, Minnesota Trial Court Public Access website, and the Federal Bureau of Investigations criminal justice information files may be performed on you pursuant with the lease agreement of the apartment complex to which you are applying. **By signing this form you are allowing the Waite Park Police Department to release the criminal data maintained in those files which applies under Statutes and Ordinance.**

1. You have the right to be informed that \_\_\_\_\_ is requesting a Criminal Background Check to determine if you have been convicted of a crime.
2. You have the right to be informed by \_\_\_\_\_ of the results of the Criminal Background Check to obtain a copy of the results.
3. You have the right to obtain from the Waite Park Police Department and/or the Bureau of Criminal Apprehension any records that form the basis for the report obtained.
4. You have the right to challenge the accuracy and completeness of information contained in the report or record under Section 13.04, Subd. 4.
5. You have the right to be informed by \_\_\_\_\_ if your application for acceptance has been denied because of the results of this Criminal Background Check.

Requester: \_\_\_\_\_ Position Applied for: \_\_\_\_\_

### APPLICANT INFORMATION – PLEASE PRINT CLEARLY

\_\_\_\_\_  
Last Name First Name Middle Name

\_\_\_\_\_  
Maiden Name/Aliases

Date of Birth: \_\_\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Driver's Lic. #: \_\_\_\_\_ State: \_\_\_\_\_ Social Security #: \_\_\_\_\_

\_\_\_\_\_  
Current Address Apt # City State/Zip County

\_\_\_\_\_  
Previous Address Apt # City State/Zip County

Have you lived in Minnesota for the past 10 years? Yes \_\_\_\_\_ No \_\_\_\_\_

Please list any other states (including the county) you have lived in:  
\_\_\_\_\_  
\_\_\_\_\_

**This release shall be effective for ONE (1) year from the date signed.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date