CRIMINAL HISTORY RECORD INFORMATION
CONSENT FORM

USE <u>ONLY</u> PURPOSE CODE <u>E</u>

I hereby authorize St. John Towers to receive any criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency*

_____
Full name printed

_____
Address City St. County

_____ _____ _____ _____
Sex Race Date of Birth Social Security Number

_____
Signature

_____
Date

<u>*H & H SERVICES</u> is providing history screening for Wesley Homes, Inc.