



**BOYS & GIRLS CLUBS  
OF BELLEVUE**

**National Background Check  
Request For Criminal History Information**

**REQUESTING AGENCY/ADDRESS:**

**Agency:** Boys and Girls Club of Bellevue

**Address:** 209 100<sup>th</sup> Avenue NE

**City/State/Zip:** Bellevue, WA 98004

**APPLICANT OF INQUIRY:** (All information in this box MUST be completely filled out)

Applicant's Name: \_\_\_\_\_  
First Middle Last

Social Security #: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_  
Month/Day/Year

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Division/Team Name: \_\_\_\_\_

**I certify this request is made pursuant to and for the purpose indicated. Please sign below.**

Authorized Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

**FOR OFFICIAL USE ONLY:**

As of this date, the applicant listed above shows no evidence  
 contrary to National BGCA standards for Employees/Volunteers.

Requesting Agency Signature: \_\_\_\_\_ Date: \_\_\_\_\_

TW: \_\_\_\_\_

WATCH: \_\_\_\_\_