

# Johnston County Youth Mentoring Program

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## Volunteer Criminal Background Check

First Name

Middle

Last Name

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Address:

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Date of Birth:

Last Four of SSN#

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As a prospective volunteer for Johnston County Youth Mentoring Program, Inc., I release the above information in order for my criminal background to be checked.

Signature

Date

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For Clerk Use Only: (please  $\checkmark$  one below)

- Volunteer does not have a criminal background.
- Volunteer does have a criminal background. Please see attached.

Clerk's Signature

Date

Seal

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