



## EVANGELICAL CHRISTIAN ACADEMY

*Elementary Campus ... Pre-kindergarten through Sixth Grade*  
2511 N. Logan Avenue/ Colorado Springs, CO 80907/ (719) 634-7024

*Secondary Campus ... Seventh through Twelfth Grade*  
4052 S. Nonchalant Circle/ Colorado Springs, CO 80917/ (719) 597-3675

### AUTHORIZATION FOR BACKGROUND AND DMV CHECK

Please read, fill in and sign this form in the space provided below. Your written authorization is necessary for completion of the coaching/volunteering process.

I, \_\_\_\_\_, hereby authorize Evangelical Christian Academy to investigate my background, driving record and qualifications for purposes of evaluating whether I am qualified for the position for which I am pursuing. I understand that Evangelical Christian Academy will utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of Evangelical Christian Academy's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for coaching/volunteering will not be processed further.

\_\_\_\_\_  
**Printed Full Name (First, Middle, Last)**

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
**Date of Birth**

\_\_\_\_\_  
**Current Street Address**

\_\_\_\_\_  
**City, State, Zip Code**

**In what states have you lived in the past 5 years:**

\_\_\_\_\_

**Have you ever been charged, or even suspected, of a criminal offense?**

Yes  No (If yes, please explain on a separate piece of paper).

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
**Social Security Number**

**Turn page over and complete back side also.**

#### Office Use Only

- Criminal  
 MVR  Driver's License Copy  
 Education Verification