

The Following is for State and Federal Background Check

Full Name (First, Middle, Last)	
Nickname	
Maiden Name	
Birthdate (MM-DD-YYYY)	
Social Security Number	
State of Active Driver's License	
Driver's License Number	
Driver's License Expiration Date	
Years living at Current (If current residence is less than two years duration, list previous address)	

Please answer the following questions with full transparency. If you have questions, please contact Key To Success, tratbrown@yahoo.com.

Have you been accused, charged with or convicted of any offense involving:

• inappropriate consumption of intoxicant	Yes		No
• underage drinking	Yes		No
• DUI	Yes		No
• public intoxication	Yes		No
• providing alcohol or an intoxicant to a minor consumption	Yes		No
• manufacture, transportation, sale, possession, distribution or habitual use of drug(s)	Yes		No
• use of force or the threat of force to or upon a person or property • violence such as robbery, aggravated assault, stalking, kidnapping, arson, manslaughter, murder	Yes		No
• inappropriate sexual behavior, sexual assault, child pornography or child molestation	Yes		No

<ul style="list-style-type: none"> recklessly endangering or harming another person, terroristic threats, criminal restraint 	Yes		No
<ul style="list-style-type: none"> luring or enticing a minor into a motor vehicle or isolated structure Any conspiracy to commit or attempt to commit any of the offenses described above 	Yes		No
<ul style="list-style-type: none"> Have you ever been accused of or charged with a felony not listed above? 	If yes please explain.		
<ul style="list-style-type: none"> Have you ever been accused of or charged with a misdemeanor not listed above? 	If yes please explain.		