



2903 1st Avenue
Lake Charles, LA 70601
337-478-6480
www.ccsvla.com

Background Check Application

Name _____
 First Middle Last

AKA _____
 Maiden name or any other name ever used

Address _____
 Street Apt# City State Zip

List all states you have lived _____

Social Security # _____ - _____ - _____ Date of Birth _____

Sex: ___ Female ___ Male Race _____

Driver's License / ID # _____ Issuing State _____

By my signature below, I authorize the Calcasieu Parish Sheriff's Office to release my complete arrest record and waive such legal rights that may arise and do release all persons from liability in connection with furnishing such information.

Signature of Prospective Employee Date

Information Requested By _____ Date _____

Attach copy of Driver's License or ID Card