

PERMISSION FOR BACKGROUND CHECK

DATE _____

I give my permission for the City of Wylie to conduct a background screening check to determine my suitability in working with the public. I understand that this permission is a part of my application for a volunteer position with the Rita and Truett Smith Public Library.

Name _____
Last First Middle

Address _____

Drivers License/ID # _____

Date of Birth _____

Signature _____