

CRIMINAL HISTORY CHECK

ADDENDUM TO APPLICATION

**CONFIDENTIAL**

**All TDMHMR Center's/Units are required by state law to obtain criminal history record information on all applicants for employment. The information requested below is necessary to obtain criminal history information.**

**Name:** \_\_\_\_\_ **Social Security #:** \_\_\_\_\_  
Last First MI

**Driver's License Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**State:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_  
Month Day Year

**Gender:**  Male  Female

**Ethnicity:**

- American Indian or Alaska Native**  
(Not Hispanic or Latino)
- Black or African American**  
(Not Hispanic or Latino)
- Native Hawaiian or Other Pacific Islander**  
(Not Hispanic or Latino)
- Two or More Races**  
(Not Hispanic or Latino)
- Asian**  
(Not Hispanic or Latino)
- Hispanic or Latino**
- White**  
(Not Hispanic or Latino)

I understand the information I am providing about age, sex, and ethnicity will not be used to determine eligibility for employment, **but will be used solely for the purpose of obtaining criminal history record information.**

\_\_\_\_\_  
**Please Print Name**

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

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