

## REQUEST FOR CRIMINAL HISTORY AND CENTRAL REGISTRY CHECK

Complete the following for each person requiring a Criminal History/Central registry Check.

**You will also need to attach a copy of your actual driver's license.**

First Name	Middle Name	Last Name		
First Name (Other Names used)	Middle Name	Last Name		
Street Address	City	County	State	Zip code
Telephone Number	Date of Birth	Age	SSN	Male / Female __ Age 14-17 years __ Age 18 older
List all cities in Texas where there has been residency:				
List all states/countries where there has been residency:				
Race __ White      __ Asian/Pacific Islander __ Black      __ American Indiana/Alaskan Native			Ethnicity (must accompany race) __ Hispanic      __ Other	
Drivers' License Number			State in which driver's license is issued	

Please attach a clear scan of your driver's license/state issued ID in this box: