

# VOLUNTEER FAMILY SERVICES DEPARTMENT

## Orange County Government Criminal History Check

Note: Please print all of the requested information **in black ink**.

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Please list all other names you have used (maiden, alias, nick-name):

1. \_\_\_\_\_ 3. \_\_\_\_\_

2. \_\_\_\_\_ 4. \_\_\_\_\_

Current Address: \_\_\_\_\_  
\_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver License Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Race: Gender: Height: Weight:  
 Asian or Pacific Islander  Male \_\_\_\_\_ ' \_\_\_\_\_" \_\_\_\_\_ lbs.  
 American Indian or Alaskan  
 Black  Female  
 White  
 Unknown

**(FDLE Standard** – Indicate Hispanic persons as white or black based on skin color)

Color of Hair: \_\_\_\_\_ Color of Eyes: \_\_\_\_\_

