MISSION MOUNTAIN ENTERPRISES, INC.

330 Main St SW • Ronan, MT 59864 • 406-676-2563

RELEASE OF INFORMATION

A background check is completed as a part of the assessment process in assuring that staff employed have not been named as the perpetrator in a substantial report of abuse or neglect; that they are of good moral character; and, that they do not pose any risk or threat to the safety or welfare of any persons served.

A motor vehicle record is completed on a yearly basis for the assessment process to ensure staff employed does not have any type A or three or more type B violations.

PLEASE PRINT LEGIBLY

Name: _____

(First) (Middle) (Maiden) (Last)

Aliases/Other names used: _____

Current Address: _____

_____

Date of Birth: _____ Social Security #: _____

Driver's License #: _____

Please list below where you have resided in the past 7 years.

CITY	COUNTY	STATE	DATES OF RESIDENCY (FROM-TO)

I hereby authorize any law enforcement protective services agency or the Montana Motor Vehicle Division to release any records they have regarding me to the State of Montana, Department of Public Health and Human Services and/or to my employer at

Mission Mountain Enterprises, Inc.
330 Main St SW, Ronan, MT 59864

I understand that any information obtained from these checks can be used by the Agency to evaluate my application and continued employment. I understand these checks can or may be done on an annual basis while employed. I hereby authorize release of such information to any licensed youth or adult care facility in the State of Montana employing me or considering my application for employment. A copy of this form is as valid as the original.

_____ _____

(Applicant signature) (Date)