



**702 Belton Highway  
Williamston, SC 29697**

**SLED Background Check Authorization**

**Please complete the following information and return this form with your application. The Human Resources Office will conduct the criminal record history check.**

**(Please Print Clearly)**

**Full Name:** \_\_\_\_\_  
                                    **Last**                    **First**                    **Middle**                    **Maiden**

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

**SSN:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**E-mail address :** \_\_\_\_\_

**Position (s) applied for:** \_\_\_\_\_

**I understand that my employment is conditional upon the Career & Technology Center's receipt of a satisfactory criminal history record. I authorize the Center to obtain my criminal history record.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_