



OFFICE OF THE DISTRICT ATTORNEY

JOHN KELLNER, DISTRICT ATTORNEY

18TH JUDICIAL DISTRICT

SERVING ARAPAHOE, DOUGLAS, ELBERT AND LINCOLN COUNTIES

6450 S. REVERE PARKWAY

CENTENNIAL, CO 80111

(720) 874-8500

(720) 874-8690 FAX

BACKGROUND CHECK AUTHORIZATION (page 1 of 3)

Applicant's Full Name: _____
Last First Middle

Other Names Used:

Date of Birth _____ Race _____ Sex _____

Social Security # _____ Driver License # _____ State _____

Note: Due to the nature of work performed by the Office, we have an obligation to ascertain possible conflicts of interest that may be created by your employment with us. Please answer the following questions completely. Answering 'yes' to the following questions does not constitute an automatic bar to employment. Factors such as your age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. Do not include minor traffic citations, convictions for which the record has been sealed or expunged, any conviction for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed, referrals to and participation in pre-trial or post-trial diversion programs in answering these questions. Do include Driving under the Influence (DUI) or similar alcohol-related offenses.

Family members include spouse, children, brothers, sisters, parents, in-laws, and/or other relatives or "significant other" with whom you reside or have a close relationship.

Have you or any member of your immediate family ever been charged with or convicted of a felony, misdemeanor or traffic offense?

YES NO

If yes, please provide the date(s) and details:

Are you currently on bail, personal recognizance bond, or summons pending disposition of any criminal or traffic related matter?

YES NO

If yes, please provide the date(s) and details:

BACKGROUND CHECK AUTHORIZATION (page 2 of 3)

Please provide your past ten years of residences (attach additional paper if necessary):

Address: _____

Dates of residency (month / year): Start: _____ End: _____

Address: _____

Dates of residency (month / year): Start: _____ End: _____

Address: _____

Dates of residency (month / year): Start: _____ End: _____

Address: _____

Dates of residency (month / year): Start: _____ End: _____

Address: _____

Dates of residency (month / year): Start: _____ End: _____

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BACKGROUND CHECK AUTHORIZATION (page 3 of 3)

I understand that a search of the the national and local sex offender registries may be conducted based on the position I have applied for associated with federal grant funds received by the Office of the District Attorney 18th Judicial District.

I have applied to provide services with the Office of the District Attorney for the 18th Judicial District (“Office”). All of the information that I provided during the course of the process is complete and accurate to the best of my knowledge. I understand that omissions or misrepresentations are grounds for rejection of my application or dismissal from employment if discovered after my service with the Office begins.

I understand that a reference check is part of the process. I request and authorize the Office of the District Attorney for the 18th Judicial District, for purposes of a reference check, to contact the school officials, former employers and personal references I have named during the course of my application for service, as well as anyone else, whether listed or not, who can provide relevant information that may be useful in making a decision. I agree that the reference check may cover any job-related information, including, but not limited to, the items listed as follows: dates of employment or school attendance; skills, training and education; possession of required licenses and certificates, including any suspensions or revocations (past or current); work history; job duties, quality and quantity of work performance; reasons for leaving past employers; whether my conduct was generally satisfactory; character, civil records and criminal history.

I also consent to the Office of the District Attorney for the 18th Judicial District obtaining, causing to be obtained, Public Records, including court records, Department of Motor Vehicles, credit reports and educational records about me as part of a background investigation and that in certain circumstances I waive my right to receive a copy of such public records. To the extent that a background investigation is to be conducted by the Office of the District Attorney or by a third party, I agree to hold harmless and to waive any and all claims I may have against the Office of the District Attorney for the 18th Judicial District, its agents and employees for any and all loss or injury I may sustain as a result of investigating my background in accordance with this release. I also agree to hold harmless and to waive any and all claims I may have against the entities, individuals, agents and employees who provide information to the Office of the District Attorney for the 18th Judicial District in connection with investigation of my background, for any and all loss or injury I may sustain as a result of any disclosure made in accordance with this release. I understand that this includes the possible rejection of my application for service.

I have received a copy of this Authorization and Release, understand it and have had an opportunity to ask questions and obtain answers to my questions.

Applicant’s Signature _____
Date

Indicate the checks made		For Internal Use Only	
Criminal History	APPLICANT _____	ACTION: Victim/Witness	_____
Warrant Check	_____	Defendant	_____
Criminal History	_____		
Warrant Check	_____		
Checked by _____		Date _____	