



Douglas County Civil Service Commission
Human Resources Department
BACKGROUND INVESTIGATION FORM

INSTRUCTIONS: As part of the application process for a position with Douglas County Department of Corrections, a criminal background check will be conducted. The information disclosed will be used solely for this purpose. Please complete the form and submit as soon as possible. You need to:

- 1) Complete the electronic form, print, sign, scan, and email to linda.wolfe@douglascounty-ne.gov, **or**
- 2) Print the form, complete, sign, and fax to **402-444-6678**.

Applicant Name (Last, First & MI): _____

Department/Position: _____

Aliases Used: _____

Maiden Name: _____ Gender: Male Female

Social Security Number: _____

Driver's License Number: _____ State: _____

Date of Birth (mm/dd/yyyy): _____

Race: Caucasian African-American Hispanic
 Asian/Pacific Islander Native American/Alaskan Native
 Other: _____

Address (street, city, state & zip): _____

I understand that the above information will only be used for a background investigation.

Applicant Signature

Date

Douglas County Department of Corrections - USE ONLY

Approved Denied

Signature

Date

Faxed by: _____