



# Central Texas Christian School

Employment Application

## Criminal Background Investigation Authorization

As an employee, or prospective employee, of **Central Texas Christian School**, I agree to provide the following information and authorized signature to allow **Central Texas Christian School** to conduct a criminal background investigation.

**Brenda Russell, Head of School**

Requestor

**Central Texas Christian School**

School Name

**4141 West FM 93, Temple, Texas 76502**

Address

**254-939-5733**

Telephone

Please complete ALL fields below:

- Verify spelling
- Use only legal names
- Write legibly

Full Name (First, Middle, Last)

		-			-				
<small>M</small>	<small>M</small>		<small>D</small>	<small>D</small>		<small>Y</small>	<small>Y</small>	<small>Y</small>	<small>Y</small>

Date of Birth

			-			-			
--	--	--	---	--	--	---	--	--	--

Social Security Number

Driver License Number

State of Issuance (Please do not abbreviate)

I hereby acknowledge the information is true and correct, and authorize **Central Texas Christian School** to perform a criminal background investigation.

Signature of Applicant

Date

Educating students with the transforming truth of Christ, inspiring academic excellence, Godly character, and integrity in life pursuits.