

Section 5: Completed by Subject Individual

15. Name of Subject Individual (Last, First, Middle)	16. Date of Birth	17. Sex <input type="checkbox"/> M <input type="checkbox"/> F	18. Social Security or INS Number (Voluntary):
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19. Maiden Name, Other Names Used	20 Driver's License or ID Card Number: _____ State: _____
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21. Mailing Address Street: _____ Apt: _____ City: _____ State: _____ Zip: _____	22. Home or Message Phone: _____		
	23. During the past 5 years, have you been outside Oregon 60 days or more in a row? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, list where and when in the space below.		
	City / State / Country	From (Month/Yr)	Until (Month/Yr)

24. Street Address (If different than mailing address)			
Street: _____ Apt: _____			
City: _____			
State: _____ Zip: _____			

25. Have you ever been charged, arrested and/or convicted of a crime? No Yes
If you answered yes, list **all charges, arrests and convictions** and the outcome regardless of how long ago. Please attach additional pages if needed.

Date (Or Estimate)	Charge, arrest, or conviction	County	State	Outcome
1				
2				
3				
4				
5				

26. Provide additional information surrounding the arrests charges, and/or convictions. (See instructions)

I have read and understand the instructions for completing this form. I understand that a criminal history and background check will be completed on me and the information may be shared with the person listed in Box 1. I certify the information I have provided is correct and complete. I understand that if I provide false or incomplete information, I may be denied the position. I understand the check may be repeated during the time I hold this position.

27. Signature: _____ 28. Date: _____