



Camp Wakeshma
5149 Camp Wakeshma Rd.
Three Rivers, MI 49093
Phone 269-244-5891
www.campwakeshma.com

CRIMINAL AND MOTOR VEHICLE
BACKGROUND CHECK AUTHORIZATION
FOR VOLUNTEER AND PAID STAFF

I, _____, authorize Camp Wakeshma to conduct a background check with the State Police, Sex Offender Registry, OTIS and/or appropriate authorities for the purpose of determining my suitability for volunteer or paid employment and for operation of any camp related vehicles on behalf of Camp Wakeshma, Three Rivers, Michigan.

Signature

_____/_____/_____
Date

The following information is requested by the Michigan State Police Criminal Justice Investigation Center:

Last Name

First Name

Middle Name

Street Address

City, State

Zip

Date of Birth

Social Security Number

Race

Gender

Previous Last Name

Previous State of
Residence