



Authorization for Criminal Background Check

By filling out the following information, I am authorizing **Ballet Spartanburg, Inc.** to process my criminal background check through the SC Law Enforcement Division (SLED).

Name: Last _____ First _____ MI _____

Maiden or other names I have used: _____

Social Security Number: _____

Gender (Male/Female): _____

Date of Birth: _____

Signature: _____

Date: _____