NOMINEE INFORMATION AND CONSENT TO BACKGROUND CHECK

The undersigned Rotarian is a member in good standing and does hereby consent to a background check to be performed prior to his/her interview with the District Nominating Committee. It is understood that the District will make arrangements for the background check using a company normally used by the District for this purpose. The District agrees to be responsible for any charges involved with regard to obtaining the nominee’s background check.

The District agrees to keep the nominee’s personal information confidential.

Nominee must provide the following information and date/sign the form where indicated.

Full Legal Name

Last Name:

First Name:

Middle Name (in full):

Maiden Name (if applicable):

Address:

Phone Number:

Social Security Number (US Citizens):

Date of Birth:

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Signature

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Return on or before October 8, 2021 to:

Gloria Mink, District Administrator

Rotary District 5580

620 Wild Trail NE

Pine River, MN 56474