



**Agreement, Authorization and Consent for
Release of Criminal Background Information**

I, _____ understand that in conjunction with my application for residency, Libby Bortz Assisted Living Center will use the services of an outside agency, RentGrow, to perform a criminal background check. This is required as part of the Resident’s pre-admission assessment pursuant to federal regulations. Results of the criminal background check will be used as a tool, along with the physician and a facilities pre-admission assessment, as to whether a Resident will be approved for admission into Libby Bortz Assisted Living Center.

I agree, authorize and consent to the procurement of a criminal background check.

Signature

Today’s Date

Print Full Name

Social Security Number

Applicant’s Current Address

Applicant’s Date of Birth

