

Referring Organization

Date / Time:

Agency Name: _____

Agency Address:

Referred By (Name <u>and</u> Contact Number): ______

______, hereby certify that I have screened the below applicant as thoroughly as possible and confirm that, to the best of my knowledge, he/she meets the eligibility criteria.

(Required Signature)

Applicant Information
Name:
Date of Birth://
Social Security Number:
Photo ID State / ID #:

, hereby consent to a law enforcement background check for positive ١, identification purposes and also to confirm that I do not have any open warrants and am not registered as a Sexual Offender / Sexual Predator. I release the City of Daytona Beach and the Daytona Beach Police Department from all liabilities associated with accessing law enforcement databases for the purpose of this background screening.

(Required Signature)

Referral Instructions

- 1. Verify the applicant meets the eligibility criteria
- 2. Complete the Social Service Referral Form
- 3. Email the following to: cdelancy@firststepshelter.org
 - a. Completed Social Service Referral Form
 - b. Copy of a photograph ID card (if the applicant does not have a photographic ID, email a current photograph of the applicant)

NOTE: Applications will not be processed without a copy of a photo ID or a current photograph of the applicant