



Swift Vetting & Verification Network Inc

Conviction History Disclosure Form

KINDLY FILL THE FORM

Last Name	First Name	Middle Name
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Street Address	Home Telephone Number
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City	Zip Code	Country	Mobile Telephone Number
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Email Address	ID Type & No
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IMPORTANT: Failure to disclose an accurate conviction history may result in disqualification. A conviction or adjudication is NOT an automatic disqualification, every such case will be dealt with on a case-to-case merited basis.

CONVICTION HISTORY

Please read and complete the following sections carefully:

1. Have you ever been convicted of any offense against the law, or pleaded nolo contendre (no contest), or had adjudication withheld, or entered a court sponsored program, or forfeited collateral, or are you now under charges for any offense against the law, including DUI or DWI? YES NO
2. Have you been arrested and are currently out on bail or out on your own recognizance pending trial? YES NO

If you answered NO, please sign and date the CERTIFICATION OF APPLICANT below.

If you answered YES, please complete page 2; then sign and date the CERTIFICATION OF APPLICANT below.

CERTIFICATION OF APPLICANT (please read carefully): I hereby certify that all statements made in this Conviction History Disclosure Form are true and complete to the best of my knowledge. I understand that any false, incomplete or incorrect statement, regardless of when discovered, may result in my disqualification

Date: _____

Signature of Applicant: _____

APPOINTING AUTHORITY/DESIGNEE ONLY

____ I, the Appointing Authority/Designee, certify that I have reviewed this Conviction History Disclosure Form and accompanying criminal history report and determined that the particular convictions and/or circumstances thereof disclosed by the applicant or reported in the criminal history will or will not (circle) disqualify the applicant

____ The statements made in this Conviction History Disclosure Form are false, inaccurate, or incomplete and will result in disqualification or dismissal from employment.

Date: _____

Appointing Authority/Designee: _____

Please attach additional pages if necessary:

OPTIONAL: Please provide any additional explanation you would like us to consider.
