

Part 1 Applicant Information

First Name _____

Middle Name _____

Last Name _____

Social Security Number _____

Date of Birth _____

Phone Number _____

Home Address _____

City _____ County _____

State ____ Zip Code _____

During the last five (5) years, have you lived, worked, or attended school outside of Tennessee?

Yes No

If yes, complete the following for each residence, employment location and/or school location for the **past 5 years**:

Date (mm/dd/yy) Start End		Street Address	City	Zip	State	Country	Name(s) used at location	Residence, Employment, or School?

Part 2 Criminal History

You must answer the following questions even if your records were sealed or otherwise cleared or if anyone, including a judge, law enforcement officer, or lawyer, told you that you no longer have a record.

In the past ten (10) years, have you had any **felony** violations related to the crimes listed below?

- | | | |
|-------------------------------|-----|----|
| 1. Theft; | Yes | No |
| 2. Money laundering; | Yes | No |
| 3. Tax evasion; | Yes | No |
| 4. Identity theft; | Yes | No |
| 5. Counterfeiting; | Yes | No |
| 6. Bribery; | Yes | No |
| 7. Embezzlement; | Yes | No |
| 8. Forgery; | Yes | No |
| 9. Receiving stolen property; | Yes | No |
| 10. Robberies. | Yes | No |

You must complete the following table if you answered "YES" to any of the items in 1 through 10 of Part 3 above: (if you need more space, please use a separate sheet)

What was the criminal charge or offense?	Date	Location	Outcome or Disposition

Please explain any circumstances that should be considered in determining whether to allow you access to Federal Tax Information (FTI).

The penalty for falsification of the information required on this form is criminal prosecution and can result in a jail sentence of up to eleven (11) months and twenty-nine (29) days or a fine of up to twenty-five hundred dollars (\$2500), or both.

I certify, under penalty of law, that the information I have provided is complete and accurate. I authorize the release of any criminal offenses or records, or any information in the records, and any disclosures made in this form, to the Department of Revenue and any person or entity it may designate to assist in the review of my criminal history.

Applicant Signature

Date