



*Free and Accepted Masons*  
*The Grand Lodge of Free and Accepted Masons of Arkansas*  
**Background Check Consent Form.**

*[Please Print Information]*

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

\_\_\_\_\_  
[LAST NAME / First Name / Middle Name(s)]

\_\_\_\_\_  
[DATE-OF-BIRTH: Month / Day / Year]

\_\_\_\_\_  
[CURRENT ADDRESS: Number / Street / Apt. # / City / State / ZIP Code]

\_\_\_\_\_  
[HOME TELEPHONE: Area Code/Number]

\_\_\_\_\_  
[WORK TELEPHONE]

\_\_\_\_\_  
[CELLULAR TELEPHONE]

\_\_\_\_\_  
[SOCIAL SECURITY NUMBER]

***I understand and agree that any omission, false statement, misleading statement or answer made by me on my application for membership, and in any interviews, will be sufficient grounds for rejection of my application or for expulsion from membership after initiation. I agree to pay the Background fees. This is my consent to a Criminal Background check only.***

\_\_\_\_\_  
[Signature of Applicant]

\_\_\_\_\_  
[Date]

\_\_\_\_\_  
[Signature of Witness]

\_\_\_\_\_  
[Date]

Lodge No. \_\_\_\_\_

CHAIRMAN OF INVESTIGATING COMMITTEE

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Telephone Number)