



INDIANA UNIVERSITY

OFFICE OF STUDENT ORGANIZATION ACCOUNTS

Bloomington

BACKGROUND CHECK INFORMATION FORM

*First Name:

Middle Name:

*Last Name:

*Address:

*City:

*State:

*Zip Code:

*Contact Phone:

Alt Phone:

*IU E-Mail Address:

:

Enter Alt. e-mail if you do not have an IU e-mail address

*Driver License Number:

Country:

*State/Province/Region:

*Name on License:
(First, Middle, Last)

*Social Security Number:

*Date of Birth:

(MM/DD/YYYY)

*Required Information