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OUR MISSION: TO PROVIDE AND PROMOTE QUALITY AFFORDABLE HOUSING & CARING SUPPORTIVE SERVICES

CRIMINAL RECORDS CHECK DISCLOSURE AND CONSENT FORM

A criminal records check through the Colorado Bureau of Investigation will be conducted on all applications for housing at any Senior Housing Options Inc. managed building. This includes applications who state on their application that they do not have a criminal record.

If a criminal records check reveals that an applicant has a criminal record and the applicant failed to indicate the presence of the criminal record on his or her application, then the application will be denied on the basis that the applicant failed to be truthful when filling out the applications.

If the criminal records check reveals that an applicant has a criminal record of any of the following, the application for housing will be denied:

- A. Conviction for any felonious crime within the last three years
- B. A pattern of convictions for felonious crimes during the last ten years
- C. Conviction at any time for a felony involving violent physical actions on the part of the applicant
- D. Three or more convictions on misdemeanor charges within the last two years

If the applicant has resided in Colorado for less than five years, out of state criminal background checks will be made.

By signing where indicated below, the applicant consents to the release, to Senior Housing Options Inc. or its representative, of all information pertaining to the applicant's criminal record. In addition to signature, the applicant must include a birth date and social security number on this form.

I hereby authorize, without reservation, any law enforcement agency, institution, or information service bureau contacted by Senior Housing Options Inc. or its representative, to furnish this information. I furthermore acknowledge that a telephonic facsimile (FAX) or photographic copy of this document shall be as valid as the original. This release enables most federal, state and county agencies to permit information about me to be released.

Signature of Applicant

Date

Print Name

Address

Birth Date

Social Security Number

Phone Number Where I Can Be Reached or Left a Message

