IL FOP CORRECTIONS LODGE 263

Associate Member Background Check

Required Information

The Illinois FOP Corrections Lodge 263 appreciates your interest in becoming an Associate member, and we understand that you have elected to undergo a background check in lieu of obtaining an eligible sponsor. The following information will allow the FOP to conduct a check of the Illinois criminal history record files, ensuring that we maintain the highest standards for membership. The cost for a background check is $16, payable by the applicant.

Please complete the following fields and return via postal mail with the payment. Your membership application will be held until this background is approved.

Supplemental Applicant Information

First Name: _____ Middle Name: _____ Last Name: _____

List Maiden Name and Any Other Previously Used Last Names (if applicable): _____ _____ _____

Gender (select one): ☐ Male ☐ Female

Race (select one):
- ☐ America Indian
- ☐ Asian/Pacific Islander
- ☐ Black
- ☐ Hispanic
- ☐ White
- ☐ Unknown

Driver's License Number: _____ State of Issue: _____

Date of Birth (example: 6/12/1953): _____

Additional Information or Comments?

Send completed form by mail with payment.

Submit by mail

IL FOP Corrections Lodge 263
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For more information or questions:

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