AUTHORIZATION FOR CRIMINAL RECORDS CHECK

Linn County Juvenile Department

Please complete this information sheet and submit it with your application for employment with the Linn County Juvenile Department. The existence of a criminal record/protective service history will not necessarily disqualify you for work. Any criminal record/protective service history will be individually considered on the basis of how it relates to the work which you would perform as an employee.

NAME:		
(Last)	(First)	(Middle)
Social Security Number:		Birthdate:
Driver's License Num	iber:	State:
Female:	Male:	
Ethnicity: Asian Black	Native A Caucasia	American(includes Hispanic)
SECTION 1:		
Have you ever been convicted of a crime? No Yes Are you currently charged with a crime? No Yes		
•	•	by DHS Child Welfare/Protective Services ren? No Yes
* If the answer to any form.	of the above ques	tions is "Yes", please complete the remainder of this
* If the answer to all of SECTION 3 of this for		ions is "No", please skip SECTION 2 and complete
SECTION 2: (A) Ca	riminal Section	
Crime convicted of or	charged with:	
Location in which you	ı were convicted o	or are now charged:
Date of conviction or	charge made:	
Court in which convide Rehabilitative program		or case is now pending:

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(B) Child Welfare/Protective Service

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Allegation of abuse investigated: County in which it occurred: Date of occurrence:
Result of the investigation: Founded Unfounded (circle one)
SECTION 3: <u>APPLICANT'S CERTIFICATION</u>
I hereby certify that all statements made in this application or appended to it are true and correct to the best of my knowledge. I am aware that withholding pertinent information or including information found to be grossly inaccurate will be cause for further consideration of my application. I understand this is not to be considered as an indication of probable appointment nor an obligation upon the department to make an appointment, but a part of the selection process only.
AUTHORIZATION TO RELEASE CREDIT AND CHARACTER INFORMATION
Having made application with the Linn County Juvenile Department, I hereby authorize a complete investigation of my record by the Linn County Sheriff, or another police agency authorized to conduct their applicant investigation, to ascertain any and all information which may concern my credit and character, whether same is of record or not and release your organization and all persons whomsoever from any charge because of furnishing said information. I hereby acknowledge that I am aware the results of this investigation are confidential for Linn County Juvenile Department use only and will not be disclosed to myself or any other person. This document should be sealed by DHS and should remain sealed upon delivery to the Linn County Juvenile Department.
I also understand that I will be required to provide the Linn County Juvenile Department with a Child Welfare/Protective Services report or letter from the Department of Human Services/Child Welfare located at 118 2 nd Avenue SE, Albany, OR. 97321, (541) 967-2060 Attn: Bobye Schneider, Linn County Child Welfare at (541) 791-5786.
Signed:
Date

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