



Volunteer and Church Personnel  
Criminal Background Check Authorization Form  
Archdiocese of Detroit  
St. Thomas a'Becket Parish  
555 S. Lilley Road  
Canton, MI 48188



As a church we value the safety of children in our care, our employees and volunteers and the people whom we serve. We want to take prudent measures to protect our human and material resources. Therefore, the Archdiocese mandates that criminal history background checks be conducted for all employees, volunteers who may have unsupervised contact with a child, the elderly or persons with disabilities, or other volunteers at the discretion of the Parish.

**Please complete your responses to the following questions and return to the St. Thomas a'Becket Parish Compliance Coordinator before you begin work as an employee / volunteer at the Parish. YOU MUST PRINT CLEARLY OR YOUR FORM CANNOT BE ACCEPTED AND PROCESSED.**

First Name (LEGAL)	M.I.	Last Name	Date of Birth*	
Address		City	State	ZIP
Drivers License Number		State		

Place of Employment		Work/Cell Phone		Home Phone		
Number of years residing in Michigan	If less than 7 years, previous residence(s) outside of Michigan					
	a.	Street	City	State	ZIP	Country
	b.	Street	City	State	ZIP	Country
Known by any other name(s)						
Volunteer position you are seeking		Race*		Sex * <input type="checkbox"/> Male <input type="checkbox"/> Female		

**Authorization:**

I understand that investigative inquiries on my background are to be made on me, to assess whether any reason exists that would suggest that I not be accepted for the position. These inquiries will be made according to policies of St. Thomas a'Becket and the Archdiocese of Detroit, and will consist of a criminal history background check and/or driving record check using the services of the Archdiocese of Detroit / Department of Human Resources or a designated outside firm. The information received will be kept confidential and will be used only to determine my suitability to volunteer for the above noted position.

I authorize without reservation, any party contacted to furnish any or all of the above-mentioned information. Further, I will allow a photocopy of this authorization to be as valid as the original for purposes conducting the necessary investigation.

In addition, I agree to abide by the policies, procedures and code of conduct that currently exist or may be amended in the future.

\_\_\_\_\_  
(Signature of Volunteer /Church Personnel) (Date)

**\*NOTE:** Date of birth, sex, and race are being requested only for purposes of identification in obtaining accurate retrieval of records.