

Volunteer Criminal Background Check Authorization Form

As a school, we value the safety of children in our care, our employees and volunteers and people whom we serve. We want to take prudent measures to protect our human and material resources. Therefore, the Diocese mandates that criminal history background checks be conducted for all employees and volunteers who have unsupervised contact with a child, the elderly or persons with disabilities. Please complete this form of basic information about you, which assures the best possible program and safety for all.

Please complete your responses to the following questions and return this form to the designated Administrator for Criminal Background Checks at your Parish or School. Please print clearly.

Name		Date of Birth		*Sex	*Race
Address		City		State	Zip
Known by any other name(s) (i.e.) maiden					
Home Phone			Work Phone		
Number of Years in Michigan	If less than 7, previous residence(s) outside of Michigan				
	Street	City	State	Zip	County Dates
___ Additional addresses listed on back of form.					
If you have been employed outside the State of MI in the past 7 years, please provide Name, City, ST. of employer. They will not be contacted; however a background check will be done in that state (s).		Name of Employer _____			
		City _____ State _____			
		___ Additional addresses listed on back of form.			
Driver's License #			State	Social Security No.	
Position for which you are applying or volunteering					

Authorization

I understand that investigative inquiries on my criminal and driving 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 practices of the hiring entity and will consist of a criminal background check and/or driving record check using the resources of the Diocese of Kalamazoo or a designated outside firm. The information received will be used only to determine my suitability for the above position.

I authorize this criminal background check and/or driving record check to be undertaken and also any party contacted to furnish any and all information requested. A photocopy of this authorization may be considered as valid as the original for purposes of conducting the necessary investigation.

Signature of Applicant/Volunteer/Employee

Date

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