

Archdiocese of
Atlanta

Volunteer Background Investigation Consent

The Roman Catholic Archdiocese of Atlanta certifies that all reports, whether oral or written, will be kept strictly confidential and, except as required by law, information will only be revealed to the applicant or a person whose duty requires him or her to participate in the decision for the transaction for which the report was ordered. The Archdiocese further certifies that the purpose of the investigation is very limited in scope and information received will be used for the sole purpose of making a determination regarding the qualifications of an individual to serve as a volunteer.

I, _____, hereby authorize the Roman Catholic Archdiocese of Atlanta and/or its agents to make an independent investigation of my background, references, character, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications as a volunteer.

I release the Roman Catholic Archdiocese of Atlanta and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regards to the information obtained from any and all of the above referenced sources used. The following is my true and complete legal name and all information is true and correct to the best of my knowledge:

Full Name Printed:

Maiden Name or Other Names Used:

Please list all residence addresses for the past seven years. (Use a separate sheet if needed.)

Present Address: _____ How Long? _____

City: _____ State: _____ Zip: _____

Former Address: _____ How Long? _____

City: _____ State: _____ Zip: _____

Former Address: _____ How Long? _____

City: _____ State: _____ Zip: _____

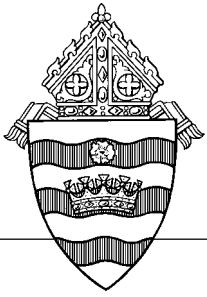
*Race: _____ *Sex: Male Female

*Date of Birth: _____ SS#: _____

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

Signature: _____ Date: _____

*NOTE: The above information is required for identification purposes only, and is in no manner used as qualifications for employment. The Roman Catholic Archdiocese of Atlanta is an Equal Opportunity Employer, and does not discriminate on the basis of Sex, Race, Religion, Age, Handicap or National Origin.



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Volunteer Notification & Authorization

This is used to inform you that a consumer report or an investigative consumer report is being obtained from a consumer reporting agency for the purpose of evaluating your qualifications to serve as a volunteer.

In addition to any criminal history this report may contain information relating to your character and general reputation through personal references. You may also have a right to request additional disclosures regarding the nature and scope of the investigation.

To whom it may concern:

I hereby authorize and request any school, police department, agency or other persons having personal knowledge about me, to furnish bearer with any and all information in their possession regarding me in connection with an application to serve as a volunteer including consumer report information that may include motor vehicle records. I am willing that a photocopy of this authorization be accepted with the same authority as the original, and I specifically waive any written notice from any present or former employer who may provide information based upon this authorized request. I understand this authorization is to be part of the written volunteer application, which I sign.

I have been given a copy of this form.

Date:

Print Name:

Signature:

Date of Birth *(for identification purposes only)*:

SS# *(for identification purposes only)*:

Name change/former name *(through marriage or otherwise)*:
