



Volunteer Criminal Background Check Authorization Form

Deep Faith. Courageous Spirit. Action for Justice.

We value the safety of our residents, our employees, volunteers, guests and the people whom we serve. We want to take prudent measures to protect our human and material resources. Therefore, we mandate that criminal history background checks be conducted for all employees and volunteers who may have unsupervised contact with our residents. 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.

Name:		*Date of Birth:	
Address:	City:	State:	Zip:
Known by any other name(s):			

Place of Employment:	Work Phone:	Home Phone:
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Number of years in Michigan:	If less than 7 years, previous residence(s) outside of Michigan:				
	a.	_____	_____	_____	_____
	Street	City	State	Zip	County
b.	_____	_____	_____	_____	
Street	City	State	Zip	County	

Position you are seeking: Volunteer

Driver's license #:	State:	*Race:	*Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>
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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 the institution and will consist of a criminal history background check and/or driving record check using the services of Human Resources Department or a designated outside firm. The information received will be kept confidential and will be used only to determine my suitability to volunteer at the IHM Motherhouse.

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

Signature of parent/guardian if volunteer under age 18

Print name of volunteer

Print name of parent/guardian if volunteer under age 18

Date

Date

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

January 2015