

## VOLUNTEER BACKGROUND INVESTIGATION CONSENT FORM

**DISCLOSURE** In relation to your application for volunteer status, or your current volunteer status, your volunteer organization may obtain a consumer report or an investigative consumer report. Such reports may include information as to your character, general reputation, personal characteristics, and mode of living. Also, subsequent reports may be requested to update, renew, or extend your volunteer status. This disclosure is given to you in compliance with the Federal Fair Credit Reporting Act (FCRA) and applicable state law. You have the right to request additional disclosures as to the nature and scope of the investigation from your volunteer organization. Such request must be made in writing.

The following information is for the sole purpose of undertaking a volunteer background investigation.

| Current Name |  |  |  | Previous Name(s) – e.g. maiden name (use additional paper if needed) |  |  |  |
|--------------|--|--|--|--|--|--|--|
| First        |  |  |  | First  |  |  |  |
| Mid          |  |  |  | Mid  |  |  |  |
| Last         |  |  |  | Last   |  |  |  |
| Suffix       |  |  |  | Suffix   |  |  |  |

Address (No PO Boxes) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

County \_\_\_\_\_

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth\* Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Gender  Female  Male May we contact your current employer? Yes  No

Name as appears on Driver's License \_\_\_\_\_

Driver's License Number \_\_\_\_\_ Driver's License State of Issue \_\_\_\_\_

Professional License Type (If applicable.) \_\_\_\_\_ Professional License State \_\_\_\_\_

Professional License Number \_\_\_\_\_ Professional License Expiration Date \_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

For the past ten years, list the county and state of your previous places of residence (use additional paper if needed):

| County (Not Country) | State | From | Month | Year | to | Month | Year |
|----------------------|-------|------|-------|------|----|-------|------|
|                      |       |      |       |      |    |       |      |
|                      |       |      |       |      |    |       |      |
|                      |       |      |       |      |    |       |      |
|                      |       |      |       |      |    |       |      |

Have you ever been convicted of a misdemeanor or felony? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you have any pending criminal charges against you at this time? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes to either question, where: \_\_\_\_\_ Date of Offense: \_\_\_\_\_

Nature of Offense: \_\_\_\_\_

Court: \_\_\_\_\_ Case Number: \_\_\_\_\_

Please explain: \_\_\_\_\_

A conviction record will not necessarily be a bar to employment. Factors such as job relatedness, age at the time of the offense, type of offense, and rehabilitation will be taken into account.

**AUTHORIZATION RELEASE** I hereby give permission to my prospective volunteer organization/volunteer organization and its agents to verify the information submitted by me and to conduct a background investigation on me. I understand this may include social security number verification and address history, criminal history, driving history, a credit report, education history, license/certification verification, past employment information, reference checks, and/or any other public records. I authorize the complete release of these records.

**ACKNOWLEDGEMENT** I acknowledge receiving a summary of my rights under the FCRA.

Print Name of Applicant \_\_\_\_\_ Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

\* This information is for consumer report purposes only. The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age.