

# CRIMINAL RECORD CHECK NOTIFICATION and AUTHORIZATION for VOLUNTEERS

## PREFACE

In response to the issue of sexual abuse of children by those in the employ of the Church, the United States Bishops in 2002 adopted the *Charter for the Protection of Children and Young People*. One of the provisions of the *Charter* calls for each diocese in the country to implement checks to determine if a current or prospective volunteer who works with minor children and youth has a criminal record or is listed on any sex offender registry. The Diocese extends that protection to vulnerable adults too. Because these checks are conducted on behalf of the Parish/Diocese by a third party they are subject to the Fair Credit Reporting Act; however, these checks **do not** seek information related to an individual's credit history or credit worthiness. The purpose of the check will be to verify the individual's identity and to ascertain if there is any previous criminal record. **A report on your credit history will not be requested or obtained.**

It is important to note that the purpose of this authorization form is to obtain background checks to help maintain a safe environment for children, young people and vulnerable adults. In order for these record checks to occur, the authorization must be signed. The Fair Credit Reporting Act provides the opportunity to address any negative information gained as a result of the criminal record check. In addition, by signing this authorization the individual does not waive any rights under the Fair Credit Reporting Act.

### A. NOTIFICATION THAT A CONSUMER REPORT MAY BE OBTAINED

In compliance with the Fair Credit Reporting Act, 15, U.S.C. §1681 et seq., as amended, and applicable state law, this notice is to inform you that a consumer report may be obtained in connection with your volunteer service at St. Rita Parish, Webster, NY

*Name and location of parish/institution*

*The Fair Credit Reporting Act includes within the definition of consumer reports such documents as credit bureau reports, motor vehicle records, sex offender records, and criminal records.*

### B. AUTHORIZATION TO OBTAIN CONSUMER REPORT

By signing below, I certify that I have received written notification that St. Rita Parish, Webster, NY  
*Name and location of parish/institution*

or its agent, RBA Staffing Solutions, may obtain information for a consumer report including checks of public records relating to criminal convictions, sex offender records and data associated with my Social Security Number available through credit bureaus in order to verify my Social Security Number and motor vehicle records.

I authorize St. Rita Parish, Webster, NY or its agent, RBA Solutions, to obtain  
*Name and location of parish/institution*  
such a report for use in connection with my volunteer service.

**This authorization does not include authorization to obtain a report on my credit history or credit worthiness.**

Ministry Area: \_\_\_\_\_

I hereby authorize St. Rita Parish, Webster, NY or its agent,  
*Name and location of parish/institution*  
RBA Staffing Solutions, to contact the individuals, employers, and organizations referenced in my application and I also authorize those individuals, employers, or organizations to provide the  
St. Rita Parish, Webster, NY or its agent, RBA Staffing Solutions,  
*Name and location of parish/institution*  
with any and all information regarding general character and fitness for volunteer service.

I hereby release all parties, including RBA Staffing Solutions, from liability for any damage that may result from furnishing such information to St. Rita Parish, Webster, NY.  
*Name and location of parish/institution*

By this release I do not relinquish my rights under the Fair Credit Reporting Act.

**Volunteer Information**

\_\_\_\_\_  
**Applicant's Name PRINTED** **Social Security Number**

\_\_\_\_\_  
**Other last names/alias/AKA's used in last 7 years** **Applicant's Date of Birth**

\_\_\_\_\_  
**Applicant's Mailing Address**

\_\_\_\_\_  
**Applicant's Email Address**

Please list all **States** that you have lived in within the last **seven (7)** years including the current one.

City	State	Years of Residency	
		From:	To:
		From:	To:
		From:	To:
		From:	To:
		From:	To:

NYS Department of Motor Vehicles (DMV) check required: Yes  No   
Driver's License # \_\_\_\_\_ State \_\_\_\_\_

\_\_\_\_\_  
*Signature of Volunteer* *Date*

Verification of birth date (Parish / Institution representative must verify birth date by checking one of the following forms of identification and signing below).  **Driver's license**  **Birth Certificate**  **Passport**

\_\_\_\_\_  
*Signature of Parish/Institution Representative* *Date*