

CATHOLIC ARCHDIOCESE OF SEATTLE
BACKGROUND CHECK REQUEST - VOLUNTEER

Please conduct a background check on the individual listed below who is being considered for volunteer work

Requested by: _____
(Print name) (Signature) Date

Parish: _____ Phone: _____

City: _____ FAX: _____

This section to be completed by the volunteer. (Print legibly and in black ink.)

The Archdiocese of Seattle may require volunteers in any Archdiocesan parish, school, or other activity to undergo a background check. Each volunteer is responsible for notifying the archdiocese of any change in background information that might render him/her ineligible for service. The parish reserves the right to decline to accept the services of a volunteer or to request an individual to withdraw from volunteer service whenever, in the judgment of the Archdiocese, it is in the best interest of the Archdiocese to do so.

Volunteer Name: _____
First Middle Last

Volunteer Address: _____

City: _____ State: _____ Zip: _____

Other names used and dates of name changes (include maiden name):

Name	Date	Name	Date
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Birthdate: _____ / _____ / _____ Social Security #: _____ / _____ / _____

Driver's License #: _____ State Issued _____

If you have lived in a state other than Washington in the past 10 years, please list the following information including the years in which you lived there. Please continue on the reverse side of this form if more room is needed.

State _____ City _____ County _____ Years: _____ to _____

State _____ City _____ County _____ Years: _____ to _____

State _____ City _____ County _____ Years: _____ to _____

Have you been convicted of a criminal offense or incarcerated in the last 10 years? Yes ___ No ___ If yes, state offense, place and date of conviction: _____

Have you ever been charged with a criminal offense involving children: Yes ___ No ___ If yes, please give details. _____

If you answered yes to either of the above questions, you may not begin volunteer service until background information has been received and evaluated, and you have been authorized to serve as a volunteer.

CATHOLIC ARCHDIOCESE OF SEATTLE

BACKGROUND CHECK – VOLUNTEER AUTHORIZATION

I understand that, in connection with my volunteer application, a background investigation may be done that may include information regarding my driving records and court records (both civil and criminal.) This is consistent with Church teaching which promotes the dignity and sanctity of human life and asks that we all protect the vulnerable among us from harm and injury. This information may come from either public or private sources and may contain information regarding my character, experience, work habits, and/or other information relevant to volunteer service.

I understand that, if I am approved for volunteer service by the Archdiocese of Seattle, this background check authorization will be kept on file and may be used at any time during my service to procure further information when, in the judgment of the Archdiocese, such may be necessary.

I hereby release and discharge to the extent permitted by law, the Archdiocese of Seattle (including its churches, schools, and other entities), its employees, any individual or agency obtaining information for the Archdiocese of Seattle, and any personal or professional reference, from any and all claims, damages, losses, liabilities, costs, or other expenses arising from the retrieving, reporting and/or disclosure of information in connection with this background investigation.

I have read, understand and consent to the above. I further authorize that a photographic copy or a telephonic facsimile of this document shall be valid for all purposes present and future.

My signature below certifies that all information I have provided in connection with this background check is true, accurate and complete to the best of my knowledge.

Volunteer's Name (Please print)

Signature

Name of parish where I want to volunteer

City

Date