



Criminal Background Check Consent Form

I hereby give my consent to the **Texas Senior Medicare Patrol (SMP)** program to perform a comprehensive background check as required for the volunteer position for which I have applied. This check will include a criminal records check and reference checks. It may also include checks on my driver's license, driving record, employment history, and/or volunteer history.

I understand that I do not have to agree to this background check, but that my refusal may exclude me from consideration for some volunteer positions.

I understand that the **SMP** program will limit the information it collects to that needed to determine my suitability for certain types of volunteer work. I also understand that the confidentiality of information collected during volunteer screening is carefully protected and it may be shared with SMP/SHIP screening/hiring authorities as needed in the determination of volunteer suitability.

Comprehensive Background Check Information

Applicant's name: _____

Date of birth: _____

Other name(s) you may be known as (e.g., maiden name, birth name, etc.):

The **SMP** program will not automatically eliminate from consideration anyone with a criminal record, but some offenses may preclude service in some volunteer roles.

Have you been convicted of a criminal offense within the past seven years, or are you currently under a warrant or charged with any criminal offense? If "yes" please briefly give details below on the nature, location, and date of the offense. Failure to fully and accurately answer this question may lead to immediate dismissal of your application.

Signature: _____ Date: _____