



## BACKGROUND SCREENING VOLUNTEER AUTHORIZATION

All information provided by me as part of my application to volunteer is accurate and true to the best of my knowledge. I understand and agree that any misrepresentation or omission of information by me may result in my rejection from volunteering or, if hired, in my discharge.

I understand and agree that as part of its evaluation of my suitability for volunteering, **Saint's Place** should receive consumer reports and/or investigative consumer reports, which will contain information and opinions pertaining to my educational background, previous work experience and work-related qualifications, behavior, and character.

I acknowledge that I have received and read the *Fair Credit Reporting Act Background Check Disclosure, A Summary of Your Rights Under the Fair Credit Reporting Act*, as well as Article 23-A of the New York Corrections Law, and this authorization. I certify that I understand the documents I have received. I further understand that I have the right to request information from **Saint's Place** about the nature and scope of any investigative consumer report on me that is requested by **Saint's Place**, provided the request is made in writing and within a reasonable period after I have received this disclosure.

I, therefore, knowingly and voluntarily, authorize law enforcement agencies, federal, state and local agencies and courts, information bureaus, licensing agencies, governmental agencies, the military, and other individuals and entities to provide all information that is requested by AUTHENTICA.

I also authorize AUTHENTICA to access criminal background inquiries, public records, public record databases, and driving records. I also authorize and consent to the disclosure by AUTHENTICA to **Saint's Place** of any information and opinions it obtains about me. I understand that if I would like additional information about the investigation that may be done by AUTHENTICA, I should contact AUTHENTICA in writing at, 250 Clinton Square, Rochester, New York 14604.

This authorization, in original or copy, shall be valid for this and any future reports and updates that may be requested. These consumer reports and/or investigative consumer reports may be obtained at any time after the receipt of my authorization and, if I am hired by **Saint's Place**, and throughout my volunteer. I intend that a copy of this Authorization be as valid as the original.

I certify that the information provided on this form is true and correct. I understand that any information that I provide in a volunteer application or that I otherwise disclose during my volunteering may be used to obtain consumer reports and/or investigative consumer reports. I also understand that the information I provide regarding my date of birth will be used for the sole purpose of accurately gathering the above mentioned information, and will not be used to discriminate against me in violation of any state or federal law. AUTHENTICA and **Saint's Place** will retain this form as required by law, in a secure location to ensure confidentiality.



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<b>Applicant Name PRINTED (First Name, MI, Last Name)</b>	<b>Social Security Number</b>	
<b>Other Last Names/Alias/AKAs used in last 7 years</b>	<b>Applicant's Date of Birth</b>	<b>Date</b>
<b>Driver License Number and State of Issue (if requested)</b>		

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

<b>Address</b>	<b>State</b>	<b>Years of Residency</b>		<b>Zip Code</b>
		From:	To:	
		From:	To:	
		From:	To:	
		From:	To:	

\_\_\_\_\_  
Applicant Signature



## **BACKGROUND SCREENING VOLUNTEER DISCLOSURE**

In connection with your volunteer application and for other volunteer purposes, **Saint's Place** may seek background information about you from AUTHENTICA, a consumer reporting agency. This information may be in the form of a consumer report and/or an investigative consumer report.

These reports may be obtained at any time after **Saint's Place** receives authorization from you, including any time during the period of your volunteer if **Saint's Place** hires you.

Consumer reports include any written, oral or other communication of information by a consumer reporting agency bearing on your character, general reputation and other characteristics that is expected to be used for volunteer purposes. Consumer reports may include criminal records and driving records, among other resources.

Investigative consumer reports include similar information as consumer reports, but they are obtained through personal interviews with those who are acquainted with you or who may have knowledge of any relevant information about you. You have the right to request information from **Saint's Place** about the nature and scope of any investigative consumer report on you that is requested by **Saint's Place**. The request must be made in writing and within a reasonable period after you have received this disclosure.

AUTHENTICA will obtain the reports for **Saint's Place**.

A summary of your rights under the federal Fair Credit Reporting Act (FCRA), and a copy of Article 23-A of the New York Corrections Law, are being provided to you with this disclosure.



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## BACKGROUND SCREENING VOLUNTEER RELEASE OF CLAIMS

I understand that the information and opinions concerning me disclosed to AUTHENTICA, and from AUTHENTICA to **Saint's Place** may include both favorable and unfavorable material. I knowingly and voluntarily release each of my current and former educators and employers, AUTHENTICA, and their respective agents and employees, and all other individuals and entities providing information, from all claims and liabilities, including but not limited to claims for defamation, retaliation, discrimination, damages, costs, and attorney's fees, which have arisen or may arise in the future related to the information and opinions provided to AUTHENTICA and from AUTHENTICA to **Saint's Place**.

I understand that my execution of this Release is a condition of my being considered for volunteering by **Saint's Place**. My execution of this Release is for the benefit of **Saint's Place**, and AUTHENTICA, and to assure that they are free to disclose information and opinions about me.

I intend that a copy of this Release be as valid as the original.

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Applicant Name PRINTED

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Applicant Signature

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Social Security Number

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Date