

## DIOCESE OF ROCHESTER AND ITS AFFILIATED EMPLOYERS BACKGROUND 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 Seton Catholic School, 165 Rhinecliff Drive, Rochester, NY 14618

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 l	below, I certify that I have received written no	tification that Seton Catholic School, 165 Rhinecliff Drive, Rochester, NY 14618
, ,	•	Name and location of parish/institution
or its agent,	, AUTHENTICA, may obtain information for a	consumer report including checks of public records relating
to criminal	convictions, sex offender records and data asso	ociated with my Social Security Number available through
credit burea	aus to verify my Social Security Number and m	otor vehicle records.
I authorize_	Seton Catholic School, 165 Rhinecliff Drive, Rochester, NY 14618	or its agent, AUTHENTICA, to obtain such a report
·	Name and location of parish/institution	
for use in co	nnection with my volunteer service.	
This authori	ization does not include authorization to obtain	a report on my credit history or credit worthiness.
I hereby auth	norize Seton Catholic School, 165 Rhinecliff Drive,	Rochester, NY 14618 or its agent,



#### DIOCESE OF ROCHESTER AND ITS AFFILIATED EMPLOYERS

#### **BACKGROUND CHECK**

ose individuals, employers, or organization				my application and I also a e. Rochester, NY 14618
se marriduals, employers, or organization	ions to provi	ide the our		on of parish/institution
ent, AUTHENTICA, with all information	on regarding	general ch		
Signature of Volunteer		_		<u>te</u>
	Rele	ease of C	laims	
I hereby release all parties, including A furnishing such information to Seton	Catholic School	ol, 165 Rhine	ability for any damage to cliff Drive, Rochester, NY 146 tion of parish/institution	
By this release I do not relinquish my ri	ghts under th	he Fair Cre	edit Reporting Act.	
	Volunte	eer Info	rmation	
Applicant's Name PRINTED		Soci	al Security Number	Date
Other last names/Alias/AKA's used	in last 7 year	rs*	Applicant's Date of Bi	rth *+
			Applicant's Date of Bi	rth *+
*(Utili	ized for crimin	nal and aca	demic checks only)	
*(Utili	ized for crimin	in the last	demic checks only) seven (7) years including Years of Residency	
*( <i>Utili</i> Please list all <b>Addresses</b> that you have l	ized for crimin	nal and aca	demic checks only) seven (7) years includir	ng the current one.
*( <i>Utili</i> Please list all <b>Addresses</b> that you have l	ized for crimin	in the last	demic checks only) seven (7) years including Years of Residency	ng the current one.
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*(Utili Please list all <b>Addresses</b> that you have l  Address	ized for crimin	in the last a From: From: From: From:	demic checks only)  seven (7) years includin  Years of Residency  To:  To:  To:	ng the current one.  Zip Code
*( <i>Utili</i> Please list all <b>Addresses</b> that you have l	ized for crimin	in the last in the	demic checks only)  seven (7) years includir  Years of Residency  To:  To:  To:  To:  No	ng the current one.  Zip Code
*(Utilian Please list all Addresses that you have In Address  Address  NYS Department of Motor Vehicles (DMV)	ized for crimin	in the last in the	demic checks only)  seven (7) years includir  Years of Residency  To:  To:  To:  To:  No	zip Code

Verification of birth date (Parish / Institution representative must verify birth date by checking one of the following forms of



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# identification and signing below). Driver's license Birth Certificate Passport Signature of Parish/Institution Representative Date