

VOLUNTEER BACKGROUND CHECK REQUEST

Fair Credit Reporting Act Background Check Disclosure & Notice Statement

In connection with your employment or volunteer application and for other employment or volunteer purposes, the Archdiocese of Seattle (the "Archdiocese") may seek background information about you from a consumer reporting agency. This information will be in the form of consumer reports.

These reports may be obtained at any time after the Archdiocese receives authorization from you, including any time during the period of your employment if the Archdiocese hires you, or during any period in which you are a volunteer.

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 employment purposes or for determining whether you may become a volunteer. Consumer reports may include criminal records and driving records, among other resources.

Trak-1, our background check vendor, or another consumer reporting agency, will obtain the reports for the Archdiocese.

Signature

Date

Printed Name

Please return all completed forms to your parish/school for processing.

April 2014

Fair Credit Reporting Act Background Check Release of Liability

In consideration of the Archdiocese of Seattle (the "Archdiocese") processing my application for employment or volunteerism, I and my heirs, executors, administrators, successors and assigns, hereby release, remise and forever discharge the Archdiocese, its related affiliates, and the respective officials, administrators, parishes, schools, and employees from any causes of action, claims, liability and demands whatsoever, known or unknown, in law or equity, which I ever had, now have, may have, or claim to have against any or all of said entities or individuals arising from, or occurring as a result of, reason for the processing, investigation or any other action taken by the Archdiocese relating to the request of my consumer report.

BY SIGNING THIS FORM, I ACKNOWLEDGE I HAVE READ AND FULLY UNDERSTAND THE ABOVE AUTHORIZATION AND DO ACCEPT THE ABOVE RESTRICTIONS.

Signature

Date

Printed Name

THIS RELEASE OF LIABILITY MUST BE PRINTED ON A PAGE BY ITSELF