

# The Diocese of Birmingham in Alabama Volunteer Inquiry Release Form

Parish/School/Agency \_\_\_\_\_

Last Name

First Name

Middle Name

Maiden Name

Suffix (ex. Jr., Sr., IV)

Social Security Number

\*Date of Birth (mm/dd/yy)

Gender

Street No.

Street

Type (Rd., Ave.)

Apartment/Lot

Zip

City

State

List states and counties of residence, other than above, for the past seven (7) years:

COUNTY \_\_\_\_\_ STATE \_\_\_\_\_; COUNTY \_\_\_\_\_ STATE \_\_\_\_\_; COUNTY \_\_\_\_\_ STATE \_\_\_\_\_

Please provide the names of three adults (not related to you) who can give a character reference for your role as a volunteer in a Catholic parish or school.

a. Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

b. Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

c. Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Your Phone

 Home  Cell 

Your Email

Preferred method of contact: Email  SnailMail

\*The Diocese of Birmingham in Alabama understands age to be a protected characteristic and the information requested will not be used as the basis for any employment decision.

### FAIR CREDIT REPORTING ACT DISCLOSURE

In conjunction with my application to volunteer (including contract services) with you, I understand that you intend to hire Selection.com to obtain a "Search America" Report about me as defined in the Fair Credit Reporting Act (FCRA). **This "Report" may include information concerning my character, motor vehicle record, civil litigation history and/or criminal record.**

I understand that you may rely on any or all of the above referenced information in determining whether to allow me to volunteer with a school, church, or agency in the Diocese of Birmingham in Alabama. If you contemplate making an adverse volunteer-related decision that will affect me based, in whole or in part, upon a "Report" obtained from Selection.com, I will be provided with a copy of the "Report" and a written summary of my Consumer Rights under the FCRA before you finalize that decision.

I have read the above disclosure and I hereby authorize you, Selection.com or its authorized agents to obtain the above referenced information about me. I also authorize all agencies, bureaus, employers, information service organizations and individuals to provide any of the above referenced knowledge or information they have concerning me. If I am chosen to volunteer, this authorization shall remain on file and shall serve as an ongoing authorization for you to obtain "Reports" about me from Selection.com at any time during my time with you. A photocopy or facsimile of this authorization shall be as valid as the original. I agree that any and all disputes arising from this "Report" shall be brought only in state or federal court in the State of Ohio and shall be governed by, and construed in accordance with, the laws of the State of Ohio.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

Parish/School/Agency \_\_\_\_\_

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For Office Use Only

Position \_\_\_\_\_

Youth Protection 1 Training Date \_\_\_\_\_ Online  In-Person

Youth Protection 2 Date \_\_\_\_\_

Renewal Year
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Date Completed
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