

Volunteer Background Screening Disclosure Form

Please read the following disclosure carefully before signing. This organization may obtain a consumer report or background check for volunteer placement purposes. This report may include information regarding your character, general reputation, personal characteristics, criminal history, and driving record.

Personal Information

Please provide all requested information clearly. This information will be used solely for background screening purposes.

First Name:

Middle Name:

Last Name:

Other Names Used (Maiden, Alias):

Date of Birth (MM/DD/YYYY):

Social Security Number:

Driver's License Number:

Driver's License State:

Current Street Address:

City:

State:

Zip Code:

Phone Number:

Email Address:

Acknowledgment and Authorization

By signing below, I hereby authorize this organization to conduct a background screening check. I understand that this information will be kept confidential and used only for determining my eligibility for volunteer services.

Printed Name:

Signature (For Print):

Date (MM/DD/YYYY):