



**Volunteer and Church Personnel  
Criminal Background Check  
Authorization Form**

**Diocese of Marquette**

**Parish/School/Diocesan Office** \_\_\_\_\_

(Where do you work/volunteer?) **Parish/School/Diocesan Office City** \_\_\_\_\_

**What is your Position?** \_\_\_\_\_

(at the parish/school/Diocesan office) **Your Position** \_\_\_\_\_

As a church we value the safety of children in our care, our employees and volunteers and the people whom we serve. We want to take prudent measures to protect our human and material resources. Therefore, the diocese mandates that criminal history background checks be conducted for all employees and volunteers. A volunteer is defined as an unpaid person working at a school or parish who on a regular basis, sees, works with or is around children in an unsupervised situation, or has the potential to be alone with children, or in a position to observe those who are. Please complete this form of basic information about you, which assures the best possible program and safety for all.

**Please complete your responses to the following questions and return this form to your Parish/School Safe Environment Program Coordinator.<sup>1</sup>**

Name: \_\_\_\_\_  
Last First Middle Initial

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Known by any other name(s): \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

\*Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_ (Only required if resident outside of Michigan in the last 7 years)

Number of years in Michigan: \_\_\_\_\_ If less than 7 years, please list all previous residence(s) outside of Michigan in the past 7 years:

a. \_\_\_\_\_  
Street City State Zip County

b. \_\_\_\_\_  
Street City State Zip County

Driver's license #: \_\_\_\_\_ State: \_\_\_\_\_ \*Sex: Male \_\_\_\_\_ Female \_\_\_\_\_  
(only required if resident outside of Michigan in the last 7 years)

**Authorization:**

I understand that investigative inquiries on my background are to be made about me, to assess whether any reason exists that would suggest that I not be accepted for the position. These inquiries will consist of criminal history background checks and/or driving record check using the services of the Diocesan Department of Ministry Personnel or a designated outside firm according to the policies of the hiring entity. The information received will be kept confidential and will be used only to determine my suitability for the above noted position.

I authorize without reservation, any party contacted to furnish any or all of the above-mentioned information. Further, I will allow a photocopy of this authorization to be as valid as the original for purposes conducting the necessary investigation.

In addition, I agree to abide by the policies, procedures and code of conduct that currently exist or may be amended in the future.

\_\_\_\_\_  
**YOUR SIGNATURE**

\_\_\_\_\_  
(Date)

\*Note: Date of birth and sex are being requested only for purposes of identification in obtaining accurate retrieval of records.

<sup>1</sup> Parish/School Safe Environment Program Coordinator will forward this Authorization Form to the Diocesan Safe Environment Program Coordinator, 1004 Harbor Hills Drive, Marquette, MI 49855