

Archdiocese of Louisville

Parish/School/Agency

Employee/Volunteer Criminal Background Check Authorization

Consistent with Kentucky law and archdiocesan policy, all employees and volunteers who work with children must undergo a criminal background check. Please complete and sign this authorization form which will be used to obtain a criminal background check.

TYPE OR PRINT CLEARLY

Social Security Number: _____

Date of Birth: _____ Place of Birth: _____

Full Name: _____
Last First Middle

Maiden or Alias Names: _____

Street Address: _____

City, State, Zip: _____

E-mail Address: _____

Other previous addresses in last 7 years:

Driver's license #, state, and expiration date needed if you will transport clients or drive a Catholic Charities vehicle: _____

Have you ever been convicted, found guilty, entered a plea of no contest, or had adjudication withheld in a criminal offense other than a minor traffic violation?

Yes _____ No _____

I hereby give my permission for the Archdiocese of Louisville to obtain information relating to my criminal history record. I understand that as long as I remain an employee or volunteer, the criminal background check may be repeated at any time.

I hereby release the Archdiocese of Louisville and its employees from all causes of action, charges, liabilities and claims resulting from the investigation of my background in connection to my employment/volunteer assignment with the Archdiocese of Louisville.

Signature: _____ Date: _____