

Witness Signature: \_\_\_\_

## Adult Volunteer Background Check Authorization

## If a Volunteer is under 18, no background check is needed

All information provided will be kept confidential

Admin Use Only - *Initial & Date when completed* 

Circle Background Check Tier - 1 2 3	Do not submit this form until you have screened the volunteer and checked with your supervisor for
Date Given to Admin Coordinator:	budget approval to run a background check. Once
Date Check completed:	this application is turned in to the Administrative
Date Volunteer Supervisor Notified:	Coordinator, a background check will be conducted.
Volunteer Background Check Consent  In considering you for volunteering and, if you are accepted, in considering retention, or discipline, TOGETHER! ("the Organization") may request and consumer reports about you that we obtain from a consumer reporting aginc. can be contacted by mail at 3000 Auburn Dr, Suite 410; Beachwood, www.intellicorp.net. For explanation purposes: A "consumer report" is a w consumer reporting agency bearing on your character, general reputation, expected to be used or collected in whole or in part for the purpose of service about you. Such information may include, for example, criminal history reports about you. Such information may include, for example, criminal history reports about you. Such information may include, for example, criminal history reports about you are considering me for volunteering. The background check in considering me for volunteering. The background check and National Sex Offenders Registry check. By signing from the background check are not satisfactory based on TOGETHER!'s Be and may be subject to termination.  I, authorize all individual institutions, military services, law enforcement agencies to provide informall of them from any liability or responsibility for doing so. I also agree that understanding that information will be sought only in relationship to my provide information will be sought only in relationship to my provide information will be sought only in relationship to my provide information will be sought only in relationship to my provide information will be sought only in relationship to my provide information will be sought only in relationship to my provide information will be sought only in relationship to my provide information will be sought only in relationship to my provide information will be sought only in relationship to my provide information will be sought only in relationship to my provide information will be sought only in relationship to my provide information will be sought only in relationship to my provide information w	ing you for subsequent promotion, assignment, reassignment, rely upon one or more consumer reports or investigative gency, such as IntelliCorp Records, Inc. IntelliCorp Records, OH 44122; or phone: 1-888-946-8355; or website: written, oral or other communication of any information by a personal characteristics, or mode of living which is used or ing as a factor in making an employment-related decision orts or driving records.  OGETHER! to obtain and rely upon consumer reports or a full check may include but is not limited to a full FBI criminal graphics form, the volunteer also understands that if the results background Check Policies their volunteering will be reviewed als, former employers, present employer, educational nation they may have about me to TOGETHER!. I also release a copy of this form is valid like the signed original. It is my possible volunteering by TOGETHER! as pertains to the
responsibilities of the position for which I have applied, and that any infor <b>Preferred Name</b> (if different):	
Legal Name:	
Last First	Middle
Any former names or aliases:	
Date of Birth (MM/DD/YYYY):/	Social Security Number:
Legal Gender: Personal Email:	:
Physical Address:	<del>-</del>
Volunteer Signature:	Date Signed:

Date Signed: \_\_\_\_\_



## Adult Volunteer Background Disclosure Statement

## **Pursuant to RCW 43.43.834**

In compliance with RCW 43.43.834 TOGETHER! requires each volunteer to disclose if they have been convicted of a crime; has had findings made against them in any civil adjudicative proceeding as defined in RCW 43.43.830; or has both a conviction of a crime and findings made against them. Definitions of RCW codes will be provided for you at your request. Please answer **YES** or **NO** to each listed item below.

If you answer **YES** to any item, explain on a separate piece of paper and attach to form, indicating the charge or finding, the date, and the court(s) involved. Failure to disclose complete and accurate information can result in dismissal from volunteer service.

2. Have adult?	No □ No	been convicted of crimes relating to fi  ☐ Yes If yes, explain on a separate sh	nancial exploitation if the victim was a vulnerab eet of paper.	ole
	_	☐ Yes If yes, explain on a separate sh	eet of paper.	
	you ever			
3. Have	□No	been convicted of crimes related to dr  Yes If yes, explain on a separate sh	•	
	lted or ex	been found in any dependency action coloited any minor or to have physicall <b>Yes</b> If yes, explain on a separate sh	•	
	lly abuse	been found by a court in a domestic red or exploited any minor or to have phare of Yes If yes, explain on a separate sh	• •	9
abuse	ed or exp	, , ,	inal decision to have sexually or physically sabled person or to have abused or financially eet of paper.	
		been found by a court in a protection ncially exploited a vulnerable adult?  — Yes If yes, explain on a separate sh	oroceeding under chapter 74.34.RCW, to have eet of paper.	
•	erstand th		ashington that the foregoing information is true and ate information may result in my dismissal from	d
Volunteer Ap	plicant	Printed Name:		
Volunteer Ap	plicant	Signature:	Date:	