VOLUNTEERS ONLY

This document is for volunteers working one-on-one with a person with an intellectual disability, to have a background screen performed by Trusted Employees and Volunteers. You do not need to complete this form if you are a paid provider staff, a family member, or a volunteer not working in a one-on-one situation such as a meal group provider, kitchen crew, music/worship team, etc.

DISCLOSURE OF BACKGROUND INVESTIGATION

In considering your request to volunteer, Connection Ministries may request, obtain, and rely upon one or more consumer reports or investigative consumer reports about you from a consumer reporting agency. For explanation purposes: a "consumer report" is a written, oral or other communication of any information by a consumer reporting agency bearing on your character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in making a volunteer decision about you. Connection Ministries will only collect information from US, National Criminal Multistate Super Search, Nationwide Sex Offender Registry and Social Security Number verification. Such information may include, criminal history information, listings on sexual offender registries, previous addresses and other types of background information. Under the Fair Credit Reporting Act, before Connection Ministries can obtain a consumer report or investigative information about you, it must have your written authorization. If Connection Ministries considers adverse action based, in whole or in part, on information in a report on you, you will be provided a copy of that report, the name, address, and telephone number of the consumer reporting agency, and a summary of your rights under the FCRA. Consumer and/or investigative consumer report(s) about you will be obtained from the following consumer reporting agency: Trusted Employees, 701 5th Street South, Minneapolis, MN 55343, (888) 389-4023. Trusted Employees' information and privacy policy can be found at www.trustedemployees.com.

AUTHORIZATION OF BACKGROUND INVESTIGATION I have received, read, and understand The Disclosure of Background Investigation. I am aware that a summary of my rights under the fair Credit Reporting Act is available on the Connection Ministries website; http://connection-ministries.org/summary-of-your-rights-under-the-fair-credit-reporting-act/ My signature below indicates my authorization for Connection Ministries to obtain consumer and/or investigative consumer reports about me from a consumer reporting agency in considering me for a volunteer assignment, to only include information from US, National Criminal Multistate SuperSearch, Nationwide Sex Offender Registry and Social Security Number verification. By signing below, I also acknowledge that the facsimile (FAX) or photocopy of this document shall be valid and accepted with the same authority as the original. I agree that, if employed as a volunteer with Connection Ministries, this authorization will remain in effect throughout the term of my service, or to the extent allowed by law. Signature: Date: Please Print Name: ___ PERSONAL DATA NEEDED FOR BACKGROUND CHECK—PLEASE COMPLETE FOLLOWING THE SCREEN, THE DATA BELOW WILL BE REMOVED FROM THIS AUTHORIZATION AND DESTROYED First Name **Middle Name Last Name Social Security Number Date of Birth Current Street Address** City State **Zip Code**

City

State

Zip Code

Previous Street Address (if less than 1 yr)