



LAKE MICHIGAN
CATHOLIC SCHOOLS
BUSINESS OFFICE

**VOLUNTEER CRIMINAL
BACKGROUND CHECK
AUTHORIZATION FORM**

Nourishing the Human Spirit ~ Mind, Body, and Soul ~ through Jesus Christ

As a school, we value the safety of children in our care, our employees and volunteers and people whom we serve. We want to take prudent measures to protect our human and material resources. Therefore, the Diocese of Kalamazoo mandates that criminal history background checks be conducted for all employees and volunteers who have unsupervised contact with a child, the elderly or persons with disabilities. 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 the LMC Business Office
915 Pleasant St., St. Joseph, MI 49085 Tel: (269) 983-5529 Fax: (269) 983-5520**

Name		Date of Birth		*Sex		*Race	
Address		City		State		Zip	
Known by any other name(s) (i.e.) maiden							
Home Phone			Work Phone			Cell Phone	
Number of Years in Michigan _____	If less than 7, previous residence(s) outside of Michigan						
	Street _____	City _____	State _____	Zip _____	County _____	Dates _____	
List additional addresses on the back of form							
If you have been employed outside the State of MI in the past 7 years, please provide Name, City, State. of employer. They will not be contacted; however a background check will be done in that state(s).			Name of Employer _____				
			City _____ State _____				
List additional addresses on back of form							
Driver's License #			State		Social Security No.		
Position for which you are applying or volunteering							

Authorization

I understand that investigative inquiries on my criminal and driving background are to be made on me, to assess whether any reason exists that would suggest that I not be accepted for the position. These inquiries will be made according to practices of the hiring entity and will consist of a criminal background check and/or driving record check using the resources of the Diocese of Kalamazoo or a designated outside firm. The information received will be used only to determine my suitability for the above position.

I authorize this criminal background check and/or driving record check to be undertaken and also any party contacted to furnish any and all information requested. A photocopy of this authorization may be considered as valid as the original for purposes of conducting the necessary investigation.

Signature of Applicant/Volunteer/Employee

Date

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