

DWC BACKGROUND SCREENING RELEASE FORM FOR EMPLOYEES AND VOLUNTEERS

Confidentiality Notice: All information on this form is held in the strictest of confidence. The purpose of this information is to ensure the accuracy of information pertaining to the applicant.

PLEASE PRINT THE BELOW INFORMATION

Last Name: _____ **First:** _____ **Middle:** _____

Address: _____ **City:** _____ **County:** _____

State: _____ **Zip Code:** _____

Mailing Address (if different from above): _____

Home Phone: () _____ **Cell Phone:** () _____ **Work Phone:** () _____

Social Security Number: ____ - ____ - ____ **Date of Birth:** ____ - ____ - ____
Month Day Year

Email Address: _____

Required: If you do not have a personal email address, you must enter the dwc.org email address that is assigned to your parish, school, or DWC organization.

Driver's License Number: _____ **State:** _____

Previous Address (if different from above): _____

City County State Zip Code

Please check what applies: (If you are currently employed by any Catholic organization of the Diocese of Wheeling-Charleston, you will need to check the employee box.)

____ Candidate for Employment Where: _____

____ Current Employee Where: _____

____ Volunteer Where: _____

Authorization to release criminal history information reports, private companies' dishonesty, drug offense or violence reports, or motor vehicle reports:

I hereby authorize the Diocese of Wheeling-Charleston to make inquiries to ScreeningOne, a consumer reporting agency, concerning my suitability and qualification; including any public record of any arrest or convictions for crimes of violence or dishonesty; any incidents of employment dishonesty, retail theft, or other employment related acts of dishonesty, violence or drug related offenses reported to ScreeningOne. I further authorize any governmental agency where such arrest or conviction information is on file, and ScreeningOne, to disseminate such report(s) to the Diocese of Wheeling-Charleston. During any period(s) while I may be employed by and/or volunteer, I hereby authorize the Diocese of Wheeling-Charleston to make further like inquiries to ScreeningOne as the Diocese of Wheeling-Charleston may, from time to time, deem necessary. I also hereby authorize ScreeningOne to issue such reports in response to the Diocese of Wheeling-Charleston's inquiry. I waive any future notice with respect to the Diocese of Wheeling-Charleston's inquiries or with respect to such governmental agencies, ScreeningOne's, dissemination of any such report(s) to the Diocese of Wheeling-Charleston, and hereby generally release and fully discharge the Diocese of Wheeling-Charleston and ScreeningOne from and against any and all liability with respect to, or arising from, the release or dissemination of any such information for such purposes. I understand and agree that my involvement with the Diocese of Wheeling-Charleston: its Parishes, School, Diocesan Institutions and Diocesan Services, may be determined, in whole or in part, based on the report(s) so issued to the Diocese of Wheeling-Charleston by ScreeningOne. I have been informed and I understand that I may request a copy of such report and that I may dispute the accuracy or completeness of the information reported to the Diocese of Wheeling-Charleston by writing or calling the employer of ScreeningOne and requesting a copy of the report.

(X) _____ Date: _____
Signature