

Name of Parish/School/Organization and City _____

UNIFORM RELEASE AUTHORIZATION
FOR NEW APPLICANTS FOR EMPLOYMENT
Applicant to Complete the Following:

1. In connection with my application for employment, I understand that an investigative consumer report, including a criminal background check, may be requested that will include information as to my character, work habits, performance, and experience along with reasons for termination of past employment. As directed by Diocesan policy and consistent with the job described, I understand that the employer may be requesting information from public and private sources about my driving record, criminal records, education, credentials, credit, and references.
2. If employed, I understand that a criminal background check may be ordered at such times and frequencies as determined by the employer.
3. According to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of information obtained by my prospective employer from a consumer-reporting agency. If so, I will be notified and given the name and address of the agency or the source, which provided the information.
4. I acknowledge that a telephonic facsimile (FAX) or photographic copy of this Release shall be as valid as the original. I agree to execute a further release or releases as required by any reporting agency, whether federal, state, county, or private.
5. I hereby authorize, without reservation, any law enforcement agency, institution, information service bureau, school, employer or reference contacted by the Diocese of Buffalo or its agent to furnish the information described herein. The following information is required by law enforcement agencies and other entities for positive identification purposes when checking public records. It is confidential and will not be used for any other purposes. I hereby release the employer and agents and all persons, agencies, and entities providing information or reports about me from any and all liability arising out of the requests for or release of any of the information or reports herein.
6. I have been provided a copy of the New York State Correction Law Article 23-A, Licensure and Employment of Persons Convicted of One or More Criminal Offenses. If denied employment on the basis of my criminal background, I understand I have the right under such law to request a written statement setting forth the reasons for such denial, which written statement shall be produced within 30 days of the receipt of such request.

PLEASE PRINT CLEARLY

Last Name First Name Middle Name Suffix (Jr,Sr,II,etc.)

Please print other names you have used

Home Address

City State Zip Code

Social Security Number Date of Birth (MM/DD/YYYY)

Drivers License Number Issuing State

Name as it appears on license

Signature Today's Date

FOR PARISH/SCHOOL/AGENCY USE:

THE FOLLOWING IS NEEDED FOR REPORTING TO THE USGGB (CHECK APPROPRIATE BOX BELOW):

| | |
|---|--|
| EMPLOYEES: | Clergy and Candidates for Ordination: |
| <input type="checkbox"/> School Emp.- Teacher (Paid Educators) | <input type="checkbox"/> Priest |
| <input type="checkbox"/> School Emp.- Other | <input type="checkbox"/> Deacon |
| <input type="checkbox"/> Parish Emp. (Rel. Ed., Youth Dept., Other) | <input type="checkbox"/> Candidate for Ord. |
| <input type="checkbox"/> Diocesan Emp. (Catholic Char., BVS, etc.) | |