

DIOCESE OF LA CROSSE AUTHORIZATION AND ACKNOWLEDGEMENT OF CRIMINAL BACKGROUND CHECK



Printed Legal Name:					
Last		First		Middle	
Home Address/City/State/2	Zip:				
States of Former Residency	<i>r</i> :	G	ender: M / F	Race:	
Date of Birth:/	<i>'</i>	SS	SN:	<u></u>	
Other Names Used:(Maiden, alias, nickname, etc.)					
Email:		Home/	Cell Phone Number:		
Signature (<u>required</u>):				_	
- this po - this in Position (check one from e	an initial background check osition paid or volunted dividual be responsible for transitions cschools.	er? nsporting children?	Yes No		
Administrator Teacher Teacher Aid Sub Teacher	ATHOLIC SCHOOLS Child Care (DCF lice Coach Support Staff	-	DRE/CRE Catechist Support Staff Clergy	<u>PARISHES</u>	
	otion of Position/Duties	-		Description of Position/Duties	
traces, governmental records, volunteer/employment positic Department of Children and Figure 1. The FBI's acquisition, preserva supplemental authorities inclute the United States or authorize approval of your application; Your records may be used sole You are entitled to an opportuy authorize ongoing procure You authorize the use of a fax, You have read and fully under You certify that all the information of You certify you have reviewed rights under 28 U.S.C. 16.30 et	to obtain a background check report, also driving history reports, etc., and that any on, which report(s) may be received from amilies, and/or the Federal Bureau of Invition, and exchange of information requeived Federal statutes, State statutes pursued authorities. Providing the requested in ely for the purpose they are requested (2 unity to complete, challenge, or correct thement of any records or information, repermail, or photocopy of this authorization stand this authorization; and understand your Privacy Rights, purseq. and corresponding Wis. Stats., and	y such information may be a third party provider, the estigation, if accompanies sted by this form is genewant to Pub.L. 92-544, Preformation is voluntary; he as CFR 51.12) and may not be information reported it orts and records at any the as having the same autue, complete, correct and such to the Federal Privithat you have received, it	e used for consideration in a character of Wisconsin, included by a completed FD-258; rally authorized under 28 Usidential executive orders, rowever, failure to furnish that be disseminated outside that your record (28 CFR 16.34 ime during your relationship thority as the original; diaccurate; and accurate; and accurate and understand the control of	de, among others, criminal records, Social Security connection with your application for a(n) ding the Wisconsin Department of Justice and/or SC 534. Depending on the nature of your application regulations and/or orders of the Attorney General of the information may affect timely completion or the receiving department or other authorized entity; and Wis. Stats. 165.83(2)/DJ-LE-247); to with Employer to the extent allowed by law; with Employer to the extent allowed by law; and with the fair Credit which may be found at: www.diolc.org/safe-	
Parish/School			ified System		
Parish/School Contact Person		Contac	Contact Phone Number		

*Employer used in this form shall mean, as applicable, the Diocese of La Crosse, Parish, or School, or their agents, to which the applicant seeks a volunteer or employment position.