

**BACKGROUND CHECK AUTHORIZATION FORM FOR THOSE
WORKING WITH MINORS
For Parish Employees Only**

**Archdiocese of San Francisco
Safe Environment Program**

Parish

City

All information will remain confidential except as set forth herein.

Name (Please. Print): _____

Home Address: _____

(If current residence is less than 5 years, please use reverse side of this form to list prior residences.)

City: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Date of Birth: _____ Social Security # _____

Driver's License # _____ or California I.D. # _____

1. Have you ever been convicted of a felony? Yes _____ No _____
2. Have you ever been convicted of child neglect, abuse or sexual misconduct? Yes _____ No _____
3. Have you ever been suspended, dismissed or asked to resign a paid or volunteer position involving children? Yes _____ No _____

If you answered "yes" to any of the above questions, please explain:

Would you agree to undergo fingerprinting if this were considered necessary? Yes _____ No _____

I understand that the information I have provided may be verified, and used to evaluate my suitability for employment with the Archdiocese of San Francisco, by contacting any agency (e.g. Department of Justice Child Molestation Registry Program) authorized by law to provide criminal records or information to the Archdiocese. I hereby release and agree to hold harmless from liability any person, parish or organization that provides information. I also agree to hold harmless the parish, the Roman Catholic Archbishop of San Francisco, the Archdiocese, and the officers, directors, employees and volunteers thereof. I affirm the foregoing is true and correct the best of my knowledge.

Signature of Applicant

Date

(PRINT) Name of Director / Supervisor of Program or Activity

Signature of Director / Supervisor of Program or Activity

Date