



Adults 18+

Authorization for Background Check

To the Prospective Volunteer, Service-Learning Student, or Intern:

Please read and sign this form in the space provided below. Your written authorization is necessary for completion of the application process. **Please print legibly.**

Volunteer's Legal Name _____

Current Physical Address _____

City, State, Zip _____

Date of Birth (mm/dd/yyyy)* _____

State or Military ID
or Driver's License number* _____

I _____, hereby authorize The DoSeum to investigate my background and qualifications for purpose of evaluating whether I am qualified for volunteering purposes only. I understand that The DoSeum will utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of the company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application to volunteer will not be processed further.

The DoSeum has attained a level of public trust to which every partner contributes and for which every partner is responsible. As part of our ongoing efforts to find and retain volunteers who are mindful of this responsibility, we may from time to time perform or request that an outside agency perform a consumer report and/or investigative consumer report with the volunteer's consent.

During or prior to your volunteer services, The DoSeum and/or its affiliates may also conduct an investigation concerning, and/or obtain from a consumer reporting agency a consumer report concerning your character, general reputation, personal characteristics, and mode of living, for the purposes of volunteering.

By your signature below, you are affirmatively authorizing The DoSeum and/or its affiliates to request and use your consumer report or investigative consumer report for the purposes of volunteering at The DoSeum.

Volunteer's signature

Date

* Disclaimer: Because databases are used in this process, date of birth and ID numbers are required as an identifier of individuals who may have the same or similar names. DOB and ID # are requested as an identifier to obtain this report and will not be used for any other reason during the selection process and will not appear on any other application document.