

Designation of Alternative Background Investigation Coordinator

In accordance with the Diocese of Las Cruces, I designate _____
Name

_____ as the Alternative Background Investigation
Position

Coordinator for _____
Name of parish/school/organization

By my signature I attest to the fact that he/she has been briefed on the procedures for background investigation submissions and confidentiality.

This designation expires when I am no longer employed in my present position.

Title (Pastor/Administrator/Principal)

Name

Signature

Date