



St. Joseph Catholic Church

In connection with my request to serve as an unpaid volunteer or Independent Contractor, I understand that investigative inquiries on my background, in accordance with all state and federal laws, will be made on me, and may include information as to my personal character, mode of living, general reputation, and other qualities pertinent to my service. I understand that the Diocese of Joliet and/or **First Advantage** may make inquiries about any criminal history and driving history.

Furthermore, I understand that the Diocese of Joliet and/or **First Advantage** may request information from various federal, state and other agencies that maintain such records.

I authorize, without reservation, any party, including, but not limited to, law enforcement agencies, state agencies and/or **First Advantage** to furnish any and all of the above-mentioned information. In addition, I hereby release the Diocese of Joliet and **First Advantage** from any and all liability for damages arising from the investigation and disclosure of the requested information. I further release and discharge all liability from all companies, agencies, officials, officers, employees, and other persons, who, in good faith, provide to the Diocese of Joliet and/or **First Advantage** the above-mentioned information as requested, in order to successfully complete a criminal background investigation for my request to serve as an unpaid volunteer and/or Independent Contractor. I will allow a photocopy of this authorization to be as valid as the original for purposes as determined necessary by the Diocese of Joliet and/or **First Advantage**.

***I understand that date of birth, sex and race are being requested only for the purpose of identification in obtaining accurate retrieval of records and will not be used for discriminatory purposes.**

Check here if you do not have a middle name

FIRST NAME _____ FULL MIDDLE NAME (not just initial) _____

LAST NAME _____

ADDRESS _____

City _____, IL ZIP CODE _____

TELEPHONE (HOME) _____ TELEPHONE (CELL) _____

SOCIAL SECURITY NUMBER _____

(Please print clearly)

*DATE OF BIRTH ____/____/____ *SEX _____ *RACE _____

SIGNATURE: _____ DATE: _____

Diocese of Joliet _____
(Designated Official)

Agency _____