DIOCESE OF LA CROSSE



AUTHORIZATION AND ACKNOWLEDGEMENT OF CRIMINAL BACKGROUND CHECK

&

AUTHORIZATION FOR RELEASE OF FBI INFORMATION



Printed Legal Name	:					
	Last	Firs	st		Middle	
Home Address/City,	/State/Zip:					
States of Former Re	<mark>sidency:</mark>		Gender	<mark>:</mark> M / F	Race:	
Date of Birth:	/	/	SSN:			
Other Names Used: (Maiden, alias, nickname						
Email:			Home/Cell Pl	Home/Cell Phone Number:		
Signature (<u>requi</u>	red):					
	- this position pai - this individual b	oackground checkor dor volunteer e responsible for transportin	_? g children? Yes_	No		
Position (check one	from either scho CATHOLIC S	ol or parish – if "Other" is sel <u>CHOOLS</u>	ected, a descript	ion must be p:	<u>rovided):</u> <u>PARISHES</u>	
Administrator Teacher Teacher Aid Sub Teacher		Child Care (DCF licensed or Coach Support Staff	Ca	atechist upport Staff		
Other [Chape	Perone or Classroo Description of Positi		0	ther [Description of Position/Duties	_]
 traces, governmenta volunteer/employme Department of Childi The FBI's acquisition, supplemental author the United States or approval of your app You records may be You are entitled to ai You authorize ongoir You authorize the usi You have read and ft You certify that all the You certify you have rights under 28 U.S.C. 	nployer* to obtain a ba I records, driving histor ent position, which repu- ren and Families, and/or preservation, and excl ities include Federal st authorized authorities. lication; used solely for the pur n opportunity to compi- g procurement of any e of a fax, e-mail, or ph ully understand this aut e information you have reviewed and understa . 16.30 et seq. and cor S.C. §1681 et seq.)" wh	ckground check report, also referred to y reports, etc., and that any such infor- ort(s) may be received from a third par- or the Federal Bureau of Investigation, i hange of information requested by this atutes, State statutes pursuant to Pub. Providing the requested information is pose they are requested (28 CFR 51.12 etc, challenge, or correct the informati records or information, reports and reco toccopy of this authorization as having horization; provided on this form is true, comple- and your Privacy Rights, pursuant to the responding Wis. Stats., and that you ha	mation may be used firty provider, the State f accompanied by a co form is generally aut L. 92-544, Presidential s voluntary; however, 2) and may not be diss ion reported in your re- cords at any time during the same authority as te, correct and accurate e Federal Privacy Act ve received, reviewed	or consideration in of Wisconsin, inclu ompleted FD-258; horized under 28 L executive orders, failure to furnish t seminated outside ecord (28 CFR 16.3 ng your relationshi s the original; te; and of 1974 (5 USC 552 and understand th	de, among others, criminal records, Social Se connection with your application for a(n) iding the Wisconsin Department of Justice a JSC 534. Depending on the nature of your a regulations and/or orders of the Attorney G he information may affect timely completio the receiving department or other authorize 4 and Wis. Stats. 165.83(2)/DJ-LE-247); p with Employer to the extent allowed by la 2a(b)), record completeness or accuracy cha he "Summary of Your Rights under the Fair G 5, which may be found at: www.diolc.org/sa	and/or application, General of on or ed entity; aw; ullenge Credit

Columbus Catholic Schools	Marshfield / Columbus Catholic Schools		
Parish/School Kris Nielsen	City/Unified System 715-387-1177 x3300		
Parish/School Contact Person	Contact Phone Number		

*Employerusedinthis formshall mean, as applicable, the Diocese of La Crosse, Parish, or School, ortheiragents, towhichthe applicant seeks avolunteeroremployment position.