

SACRED HEART CHURCH
910 MAIN STREET NORTH
SOUTHBURY, CT 06488

FOR COMPLETION OF BACKGROUND CHECK FORM

Dear Volunteer,

When you select "Volunteer" on the attached background check form, please additionally select from below all that are applicable to your ministry:

- Eucharistic Minister to home and nursing facilities
(Not needed for Eucharistic Ministers who only serve at Mass)
 - Faith Formation: Please specify area in space below
(i.e. GIFT, Liturgy of the Word, ROCK _____)
 - St. Vincent de Paul
 - Mission Trip
 - Other (please explain) _____
- _____

This completed sheet and the background check form are to be returned to Mary at the Parish Office.

Thank you.

NAME: _____ (please print)

PHONE: _____

TODAY'S DATE: _____

I attended PGC at: _____

02/06/12



Archdiocese of Hartford
 Office of Safe Environment
 134 Farmington Ave.
 Hartford, CT 06105

BACKGROUND CHECK REQUEST FORM

NOTIFICATION TO APPLICANT:

This is used to inform you that an investigative report is being obtained from a background investigation agency for the purpose of evaluating you for employment, volunteer service or a contracted position, including retention as an employee, volunteer or independent contractor.

This report may contain information bearing on your character, general reputation, and personal characteristics from public or private record sources. *Please keep in mind that our background check is limited to State Crime Files, Social Security Number Verification and National Sex Offender Registry. All authorization forms will be kept in the Chancery Office in a secured location.*

A copy of which is available upon request.

AUTHORIZATION BY APPLICANT:

To Whom It May Concern:

I understand that an investigative report as described above may be obtained. All law enforcement agencies, State Police and courts are authorized to release to Mind Your Business, Inc. for the benefit of the Archdiocese of Hartford and its entity that I serve all written information about me.

I give permission for a criminal background check to be conducted on me by Mind Your Business, Inc. for the benefit of the Archdiocese of Hartford and its entity that I serve and hereby release all individuals, companies, corporations, and agencies, *public or private*, connected therewith from any and all liability associated with the proper dissemination of such information.

I have been given a copy of this form.

Print Full Legal Name: _____
 (No Nicknames) First Middle Last

Current Address: _____
 Street Town/City State Zip Code

For identification purposes only: _____
 Birth Date Sex (m or f) Social Security

If name changed (through marriage or otherwise) print former name here: _____

Signature _____

Please indicate (X): _____ Priest; _____ Deacon; _____ Employee; _____ Volunteer; _____ Contractor

Home Parish _____
 Parish Name Parish Town/City

Or

School _____
 School Name School Town/City