

Maiden, Alias or Former (please list all):

Date of Birth

Gender (M/F)

Drivers License # _____

State: _____

Expires

I authorize Village of hope to receive information from and provide information to:

Agency or Specific Individual: Dru Sjodin National Sex Offer (US Department of Justice) and BCA

Information Regarding: criminal history/complaints

For purposes of: completion of a background check to insure safety of clients

Counties and states that I have resided in within the last five years include:

1.

2.

3.

(please attach another sheet of paper if more space is needed)

I understand that no other uses or release will be made of the data except as otherwise authorized by law. I understand I am under no obligation to consent to this release and that there will be no adverse consequences to me if I choose not to sign this consent. I understand that this authorization applies to records prepared before and after the date of this authorization. I understand that I may later revoke this consent only if the new use or the dissemination, which I am authorizing here, has not taken place.

The expiration of this authorization shall be for no longer than one year from the date of my signature.

Signature of Applicant

Date of signature

Signature of Witness

Date of Witness Signature

Volunteer Agreement:

I understand that any information about specific families that I become aware of through my serve at Village of Hope is confidential and should not be discussed outside this agency. I understand that children and their families are experiencing a stressful time in their lives and that information about their situations is of a sensitive and personal nature. I agree to keep all such information strictly confidential.

I realize that by providing my signature below, I am making a commitment to the families and children of Village of Hope and understand that consistent volunteer service is of the utmost importance to Village of Hope and that I am making a commitment to serve.

I certify that all of the information I have provided on this application is correct.

Signature_____Date_____