



BACKGROUND INVESTIGATION CONSENT

The Roman Catholic Archdiocese of Atlanta certifies that all reports, whether oral or written, will be kept strictly confidential and, except as required by law, information will only be revealed to the applicant or a person whose duty requires him or her to participate in the decision for the transaction for which the report was ordered. The Archdiocese further certifies that the purpose of the investigation is very limited in scope and information received will be used for the sole purpose of making a determination regarding the qualifications of an individual to serve as a Clergy, Seminarian, Religious, Employee, Independent Contractor, and Volunteer.

I, _____, hereby authorize the Roman Catholic Archdiocese of Atlanta and/or its agents to make an independent investigation of my background, references, character, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications as a Clergy, Seminarian, Religious, Employee, Independent Contractor, and Volunteer.

I release the Roman Catholic Archdiocese of Atlanta and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regards to the information obtained from any and all of the above referenced sources used. The following is my true and complete legal name and all information is true and correct to the best of my knowledge:

NOTE: Please provide the information as it appears on your Driver’s License in order that the processing of your Motor Vehicle report may be expedited, or you may attach a copy of your driver’s license. *(Only For those whose position requires driving)*

Full Name Printed: _____

Maiden Name or Other Names Used: _____

Please list all residence addresses for the past seven years. (Use a separate sheet if needed)

Present Address: _____

City: _____ State: _____ Zip: _____ How long? _____

Former Address: _____

City: _____ State: _____ Zip: _____ How long? _____

Former Address: _____

City: _____ State: _____ Zip: _____ How long? _____

*Race: _____ *Sex: Male Female

Date of Birth:(for identification purposes only) _____ SSN#:(For Identification purposes only) _____

Driver’s License Number: _____ State of License: _____

Driver’s License Expiration Date: _____

Signature: _____ Date: _____

*NOTE: the above information is required for identification purposes only, and is in no manner used as qualifications for employment. The Roman Catholic Archdiocese of Atlanta is an Equal Opportunity Employer, and does not discriminate on the basis of Sex, Race, Religion, Age, Handicap or National Origin.