

**CONSENT FOR CRIMINAL BACKGROUND HISTORY CHECK
AUTHORIZATION/WAIVER/INDEMNITY**

I hereby give permission for First Unitarian Universalist Church of Austin to obtain information relating to my criminal history record. The Criminal History Record, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudication.

I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the Criminal History Record check may be repeated at any time.

I understand that I will have an opportunity to review the criminal history and a procedure is available for clarification, if I dispute the record as received.

I, the undersigned do, for myself, my heirs, executors and administrators, hereby remise, release and forever – discharge and agree to indemnify First Unitarian Universalist Church, and each of their officers, directors, employees, and agents harmless from and against any and all causes of actions, suits, liabilities, costs, debts and sums of money, claims and demands whatsoever, and any and all related attorney’s fees, court costs ,and other expenses resulting from the investigation of my background in connection with my application to become a volunteer/staff member.

Name (printed): _____

Signature: _____ Date: _____

Please return all pages to:

Laine Young
Interim Director of Lifespan Faith Development
First Unitarian Universalist Church of Austin
4700 Grover Ave., Austin, TX 78756
laine.young@austinuu.org

For office use only			
	Name	Date	Initials
Form Received by			
Drivers License and Social Security Card copied by			

CONSENT FOR CRIMINAL BACKGROUND HISTORY CHECK

AUTHORIZATION/WAIVER/INDEMNITY

Country: _____ City: _____ Date of Offense: _____

Details of conviction: _____

5. YES NO As of the date of this consent form, do you have any pending charges against you?
If yes, please provide details below.

State: _____ County: _____ Date of Arrest _____

Details of pending charges: _____

THIS SECTION IS TO BE USED TO LIST ALL COUNTIES AND STATES OF RESIDENCE SINCE HIGH SCHOOL GRADUATION OR AGE 18.

CITY/TOWN	COUNTY	STATE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I HEREBY CERTIFY THAT ALL INFORMATION PROVIDED IN THIS CONSENT FORM IS TRUE, CORRECT AND COMPLETE. IF ANY INFORMATION PROVES TO BE INCORRECT OR INCOMPLETE, I UNDERSTAND THAT GROUNDS FOR CANCELING OF ANY AND ALL OFFERS OF EMPLOYMENT WILL EXIST AND MAY BE USED AT THE DISCRETION OF THE EMPLOYER.

Signed this _____ day of _____, _____.

APPLICANT (PRINT NAME) _____

APPLICANT'S SIGNATURE _____