

VOLUNTEER HOST HOME APPLICATION

DATE:	
FULL NAME: (PLEASE PRINT)	
BIRTHDATE:	SOCIAL SECURITY NUMBER:
DRIVERS LICENSE NUMBER:	
GENDER IDENTITY:	
RACE:	
ADDRESS:	
HOW LONG AT CURRENT ADDRESS:	
FORMER ADDRESS:	
HOW LONG AT FORMER ADDRESS:	
PHONE:	
EMAIL:	
DO YOU GIVE US PERMISSION TO DO	A BACKGROUND CHECK? YES 🗖 NO 🗖

Please read and sign the following:

I authorize United Way of Carlton & Pine County Area to conduct or hire services to conduct a background investigation. I authorize any parties contacted to release information to my employer or its agent (e.g., a consumer report ig agency) regarding your previous employment, criminal history on the federal, state, and local levels, military records, credit history, driving record, pre-employment drug testing results, academic records, licenses and certifications, and any other information. I release all persons and entities from liability for damages that may arise from the release of this information.

I waive all provisions of law prohibiting the disclosure of information.

I understand that the United Way of Carlton & Pine County Area and its agents cannot guarantee the accuracy of any information reported to it by third parties, and I release the United Way of Carlton & Pine Counties and its agents from liability for damages that arise from errors or omissions in my background investigation.

I understand that the United Way of Carlton & Pine Counties may from time to time request that a background check in the manner described above be conducted when it believes that circumstances warrant investigation.

I hereby acknowledge that I have been notified of and understand that the United Way of Carlton & Pine County Area has the right to disclosure of the information. The determination of a favorable or unfavorable criminal background check shall lie solely with United Way of Carlton & Pine Counties and that determination shall be final.



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You are hereby informed that the county sheriff, local social service agency, and local police will be contacted for information in connection with the applicant background study authorized by Minnesota Statute 245A.04, subd.3. In addition, if your residence has changed in the last five years, the following agencies may be contacted:

The Minnesota Bureau of Criminal Apprehension if you have lived in Minnesota but not the same county for the past five years;

The Federal Bureau of Investigation and law enforcement agencies in other states in which you have resided if you have not resided in Minnesota for the past five years.

NATURE OF INFORMATION TO BE DISCLOSED: Minnesota Statutes, section 245A.04, subd.3 authorizes disclosure of all criminal convictions, arrest information, reports regarding abuse or neglect, and investigation results available from local, state, and national criminal history record repositories on all individuals connected with United Way of Carlton & Pine Counties, including applicants, operators, employees, contractors and volunteers who have direct contact with persons served by the program. The disclosure of information is authorized after notice is given to the subject of the data.

DISCLOSURES

The information will be disclosed to the United Way of Carlton & Pine County Area. The applicant will be informed if the information provided would jeopardize the status of their employment.

An applicant, prospective or current employees/contractors/volunteers may request reconsideration of the United Way of Carlton & Pine Counties determination that the results of a background study require the person's disqualification. This request must be submitted in writing and accompanied by proof that the information United Way of Carlton & Pine County Area relied upon was erroneous or that the person's employment contract / volunteering does not pose a risk of harm to persons served by the program. A request for reconsideration must be mailed within thirty (30) days of the date the notice to the employee is sent.

SIGNATURE:_____

DATE:_____