

Home of the Sparrow, Inc.

Consent For Criminal Background Check

1. Name of Employee/Volunteer: _____

2. Position Title: _____

3. Social Security Number: _____

4. Driver License Number: _____

5. Statement Regarding Criminal History

I hereby state that I have not been convicted of any of the following:

A felony or an attempt or conspiracy to commit a felony, a misdemeanor involving abuse, neglect, assault, battery or criminal sexual conduct or involving fraud or theft against an adult and/or child; or a state or federal crime that is substantially similar to a misdemeanor described in this statement.

4. Understandings and Agreements

A. I understand and agree that, in order for me to be employed by or volunteer for Home of the Sparrow, Inc., I consent to a background check through the following initialed entities:

a. _____ Department of Children and Family Services: Child Abuse and Neglect Tracking System (CANTS). Completed form to be sent to:

Department of Children & Family Services
406 E. Monroe-Station #30
Springfield, IL 62701

b. _____ Illinois Department of Public Health: Nurse Aide Registry.

Enter employee/volunteer name on website:

www.idph.state.il.us/nar/home.htm.

c. _____ Volunteer Select: Criminal Background Check. Enter employee/volunteer name on website:

<http://www.volunteersselectplus.com>

B. I understand and agree that, if I am found to have a criminal background as described in this consent that I may be denied the opportunity to work/volunteer for Home of the Sparrow, Inc.

Signature of Applicant

Date

Signature of Witness

Date