

Criminal Background History Check – Authorization for Release

1. EXPLANATION & INSTRUCTIONS

In order to help safeguard girls in our care, Girl Scout Commonwealth Council, Inc conducts criminal background history checks on its board members, and volunteers who come in contact with girls, money or product. Information obtained is confidential as provided by law, and will be used and retained only as authorized by law.

You must complete this release form to be considered for any position. Any volunteer appointment is contingent upon the completion and review of a criminal background check. Any question left blank may result in incorrect information about your criminal background history. Also, it may delay the processing of your application. Information about service unit, report code or area can be answered by your Service Unit Director or Field Executive. Return completed form, within 30 days to: Girl Scout Commonwealth Council, PO Box 548, Mechanicsville, Virginia 23111 ATTN: Administrative Assistant/Adult Development.

2. AUTHORIZATION TO RELEASE INFORMATION

I hereby give my permission to Girl Scouts of Girl Scout Commonwealth Council to obtain information relating to my criminal history record through Intellicorps, Inc. The criminal history record, as received from the report agencies, may include arrest and conviction data, plea bargains, deferred adjudication, as well as social security verification. It may also include information regarding driving history. I understand this information will be used, in part, to determine my eligibility for a volunteer position with this organization. I also understand that as long as I remain a volunteer here, the criminal history background check may be repeated at any time. I understand I will have a limited opportunity to review the criminal history and a process is available for clarification if I dispute the record as received.

I hereby release and agree to indemnify Girl Scout Commonwealth Council of VA, Inc. and each of their officers, directors, employees and agents harmless from and against any and all liability, expense (including court cost and attorneys' fees) and claims for damage of any nature whatsoever resulting from the investigation of my background in connection with my application to become a volunteer or employee.

First Name:	Middle Name:	Maiden Name:	Last Name:	
Date of Birth:	Social Security Number:		Driver's License Number:	
Address:		City:	State:	Zip Code:
Phone Number:		e-mail address:		
Position Applied for:				
Service Unit:			Troop Number:	
*Volunteer Supervisor:			Supervisor's Position:	
Supervisor's Address:		City:	State:	Zip Code:
Supervisor's Phone Number:		Supervisor's e-mail address:		

Applicant's Signature _____ Date: _____

- * Notification that your background check has been completed will be sent to your volunteer supervisor. If no supervisor is listed, your field executive will be notified.

To protect your confidentiality, place this page in an envelope with \$1.50 payment and mail it to: Girl Scout Commonwealth Council of VA, PO Box 548, Mechanicsville, VA 23111, ATTN: Administrative Assistant/Adult Development.