

# Attachment # 2

Loc. No.: 108

## CRIMINAL BACKGROUND INVESTIGATION AUTHORIZATION

The individual named below is  EMPLOYED  VOLUNTEERING in a position that requires that he/she undergo a complete FBI/State Criminal background investigation because he/she must comply with the Archdiocesan Child Protection Policy and/or the position is security sensitive.

**Name of Individual:** \_\_\_\_\_  
*First M.I. Last*

**S.S. No.:** \_\_\_\_\_ **Position Title:** \_\_\_\_\_

The individual named above understands that he/she will be asked to provide a picture I.D. and current address as proof of identity when presenting this authorization form.

**Check One:**

- A completed **Application for Employment or Volunteer Application Form** accompanies this individual.  
 An **Application for Employment or Volunteer Application Form** has been sent to the Archdiocese of Washington, Dir. of Human Resources.

\_\_\_\_\_  
*Parish, School, Social Service Agency Name*

  
\_\_\_\_\_  
**Signature of Pastor, Principal, Agency Director**

CJIS CHARGES A FEE TO PROCESS FINGERPRINTS: VOLUNTEER - \$33.25, EMPLOYEE - \$37.25

(AOW - 10/07)