

CATHOLIC DIOCESE OF SPOKANE
SAFE ENVIRONMENT BACKGROUND CONSENT & TRAINING SUMMARY

(Form for those age 18 & Older)

Select one: Initial Renewal (5 Year Washington State/Out of State Background Check)

SECTION 1: To be completed by clergy/employee/volunteer

Legal Name: _____

First

Middle

Last

Maiden or Alias Name(s): _____

First

Middle

Last

Home Address _____ City _____ State _____ Zip _____ Phone Number _____

Date of Birth: _____ Male _____ Female _____ Social Security Number: _____

Volunteer Employee Clergy E-Mail Address: _____

Job Title if Employee: _____ Name of Parish/Entity/ School, City _____

Consent for Background Check

I authorize the **Catholic Bishop of Spokane or his representative** to make an independent investigation of my background, criminal or police record(s) at the start of my work or volunteering with the diocese, and at other times as deemed necessary. I release the **Catholic Bishop of Spokane** and any person or entity that provides information pursuant to this authorization, from any and all liabilities, claims or lawsuits in regard to the information obtained from any and all sources used. The above information is my true and complete legal name and all the information is true and correct to the best of my knowledge.

Signature: _____ Date of Signature: _____

SECTION 2: To be completed by Safe Environment Coordinator

_____/_____/_____
Person completing this section Parish/School/Entity City

List date of training & date each form was signed by clergy/employee/volunteer:

Safe Environment/Code of Conduct Training _____

Code of Conduct signed (Form 203) _____

Disclosure Statement signed (Form 206) _____

List date the background check was completed: _____

Select one: No Exact Match A Possible Match (Must complete area below & send a copy of findings)

Pastor was notified of possible match findings: Date: _____

Notification letter to Applicant (Form 309/309B): Date: _____

List any action taken/restrictions/limitations resulting from possible match:

