



# DIOCESE OF LA CROSSE



## AUTHORIZATION AND ACKNOWLEDGEMENT OF CRIMINAL BACKGROUND CHECK & AUTHORIZATION FOR RELEASE OF FBI INFORMATION

Printed Legal Name:

\_\_\_\_\_  
Last First Middle

Home Address/City/State/Zip: \_\_\_\_\_

States of Former Residency: \_\_\_\_\_ Gender: M / F Race: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN: \_\_\_\_-\_\_\_\_-\_\_\_\_

Other Names Used: \_\_\_\_\_  
(Maiden, alias, nickname, etc.)

Email: \_\_\_\_\_ Home/Cell Phone Number: \_\_\_\_\_

Signature (**required**): \_\_\_\_\_

Please specify if: - this is an initial background check \_\_\_\_\_ or a renewal \_\_\_\_\_.  
- this position paid \_\_\_\_\_ or volunteer \_\_\_\_\_?  
- this individual be responsible for transporting children? Yes \_\_\_\_ No \_\_\_\_.

Position (check one from either school or parish – if “Other” is selected, a description **must** be provided):

### CATHOLIC SCHOOLS

\_\_\_\_ Administrator      \_\_\_\_ Child Care (DCF licensed only)  
\_\_\_\_ Teacher      \_\_\_\_ Coach  
\_\_\_\_ Teacher Aid      \_\_\_\_ Support Staff  
\_\_\_\_ Sub Teacher  
\_\_\_\_ Other [ \_\_\_\_\_ ]  
Description of Position/Duties

### PARISHES

\_\_\_\_ DRE/CRE  
\_\_\_\_ Catechist  
\_\_\_\_ Support Staff  
\_\_\_\_ Clergy  
\_\_\_\_ Other [ \_\_\_\_\_ ]  
Description of Position/Duties

### Your signature above indicates the following:

- You authorize the Employer\* to obtain a background check report, also referred to as a consumer report, which may include, among others, criminal records, Social Security traces, governmental records, driving history reports, etc., and that any such information may be used for consideration in connection with your application for a(n) volunteer/employment position, which report(s) may be received from a third party provider, the State of Wisconsin, including the Wisconsin Department of Justice and/or Department of Children and Families, and/or the Federal Bureau of Investigation, if accompanied by a completed FD-258;
- The FBI's acquisition, preservation, and exchange of information requested by this form is generally authorized under 28 USC 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub.L. 92-544, Presidential executive orders, regulations and/or orders of the Attorney General of the United States or authorized authorities. Providing the requested information is voluntary; however, failure to furnish the information may affect timely completion or approval of your application;
- Your records may be used solely for the purpose they are requested (28 CFR 51.12) and may not be disseminated outside the receiving department or other authorized entity;
- You are entitled to an opportunity to complete, challenge, or correct the information reported in your record (28 CFR 16.34 and Wis. Stats. 165.83(2)/DJ-LE-247);
- You authorize ongoing procurement of any records or information, reports and records at any time during your relationship with Employer to the extent allowed by law;
- You authorize the use of a fax, e-mail, or photocopy of this authorization as having the same authority as the original;
- You have read and fully understand this authorization;
- You certify that all the information you have provided on this form is true, complete, correct and accurate; and
- You certify you have reviewed and understand your Privacy Rights, pursuant to the Federal Privacy Act of 1974 (5 USC 552a(b)), record completeness or accuracy challenge rights under 28 U.S.C. 16.30 et seq. and corresponding Wis. Stats., and that you have received, reviewed and understand the “Summary of Your Rights under the Fair Credit Reporting Act (15 U.S.C. §1681 et seq.)” which is published by the Federal Trade Commission to help you know your rights, which may be found at: [www.dioc.org/safe-environment/library/](http://www.dioc.org/safe-environment/library/)

\_\_\_\_\_  
Parish/School

\_\_\_\_\_  
City/Unified System

\_\_\_\_\_  
Parish/School Contact Person

\_\_\_\_\_  
Contact Phone Number

\*Employer used in this form shall mean, as applicable, the Diocese of La Crosse, Parish, or School, or their agents, to which the applicant seeks a volunteer or employment position.



**DIOCESE OF LA CROSSE  
PROTECT AND HEAL EMPLOYEE AND VOLUNTEER  
CONFIDENTIAL QUESTIONNAIRE**



Sexual misconduct by personnel (including officers, employees, lay volunteers, clerics, and religious personnel) of the Diocese of La Crosse while performing the work of the Diocese of La Crosse is contrary to Christian principles and is outside the scope of the duties and employment of all Diocesan Agents.

Therefore, all persons who are involved in parish or Diocesan events must answer the following questions:

1. Have you ever been accused, arrested, charged, and/or convicted of actual or attempted physical abuse or sexual molestation/assault? ☐ Yes ☐ No

If your answer to #1 is "yes," please answer the following:

2. Has the accusation, arrest, charge, and/or conviction referenced in your answer to #1 been made in a civil or criminal forum? ☐ Yes ☐ No
3. Has the accusation, arrest, charge, and/or conviction referenced in your answer to #1 resulted in you being denied, suspended, or terminated from employment? ☐ Yes ☐ No
4. Has the accusation, arrest, charge, and/or conviction referenced in your answer to #1 resulted in you being denied or suspended or terminated from a volunteer position? ☐ Yes ☐ No
5. Has the accusation, arrest, charge, and/or conviction referenced in your answer to #1 resulted in you having any license or certificate suspended or revoked? ☐ Yes ☐ No

For any "yes" answers to questions 1-5, above, please explain in detail.:

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The information provided in this form is correct to the best of my knowledge. I understand that in signing this document, I authorize verification of this information through communication with any person or organization named herein. I release from liability any person or organization which provides such information, as well as the Diocese of La Crosse.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date