

# Connect2Complete: Background Check Authorization Form

Eligibility to serve with Campus Compact of Oregon's Connect2Complete AmeriCorps Program is contingent on the results of a criminal background check. Background checks will be completed either through a government agency and/or a private criminal record check screening service. All results are confidential. Candidates are entitled to receive and review the information obtained upon written request.

## CANDIDATE INFORMATION

Full Legal Name: \_\_\_\_\_

Maiden Name/Previously Used Names: \_\_\_\_\_

Permanent Home Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Oregon Address (if available): \_\_\_\_\_

City/Town: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

What state were you living in at the time you applied to Connect2Complete? \_\_\_\_\_

## CANDIDATE AGREEMENT

In connection with my service with AmeriCorps and participation in Campus Compact of Oregon's Connect2Complete (C2C) program, I hereby authorize the C2C program to conduct a criminal background check on my behalf. I understand that this check will entail all of the following:

1. National Sex Offender Public Registry;
2. State of Residence Repository; and
3. FBI Fingerprint Check

I understand that my ability to serve as a Connect2Complete AmeriCorps Member is contingent upon the results of the background check. I understand that my failure on my part to consent to the review will result in the cancellation of my participation in the Connect2Complete AmeriCorps program. I certify that the statements made by me are true, complete, and correct to the best of my knowledge and belief. Additionally, I certify that I have never been convicted of murder or a criminal sex offense.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name