

DMACC Volunteer Authorization for Release of Information

We appreciate your interest in volunteering at Des Moines Area Community College. As part of our normal procedure for considering volunteers, we will conduct an investigation into your background. Therefore, by this document we are disclosing to you that a consumer report, including an investigative consumer report containing information as to your character, general reputation, and personal characteristics, including, but not limited to verification of credit history (except California), workers compensation, criminal history from various state and private sources along with other public records available, social search and motor vehicle records, may be obtained prior to approving your request to volunteer as part of the background investigation and at any time while you serve as a volunteer at DMACC. Should an investigative consumer report be requested, you will have the right to demand a complete and accurate disclosure of the nature and scope of the investigation requested and a written summary of your rights under the Fair Credit Reporting Act.

Please read the following statement and indicate your agreement by signing below:

I authorize all persons, investigative agencies, business organizations, schools, companies, corporations, credit bureaus and law enforcement agencies to supply Des Moines Area Community College and/or its agents with an investigative consumer report containing any information concerning my background. I authorize PreTrax, Inc., its partners, personnel, and/or agents to conduct and interpret interview procedures they believe necessary. If approved as a volunteer, this authorization shall remain on file and shall serve as an ongoing authorization for reporting agencies to procure consumer reports or investigative consumer reports at any time during my volunteer period. I hereby release all involved in obtaining, providing, and/or utilizing any consumer reports and/or investigative consumer reports from any and all claims and damages of any kind whatsoever.

Please the information below and sign this form to signify receipt of the foregoing disclosure and authorization.

Have you ever lived or worked outside the State of Iowa as an adult?		
Volunteer Candidate Last Name	First Name	Middle Name or Initial
Date of Birth	Social Security Number	
Current Street Address	City/State/Zip	
Volunteer Candidate's Signature	Today's Date	
For HR & Department Use Only:		
HR Use-Result of Criminal Background Check:	Was Volunteer Approved? Yes No Date	HR Initials
<u>Dept</u> :	Dept Index for Charging cost of backgro	ound check: