

BACKGROUND CHECK

I hereby give my permission to Greensburg Community Bread of Life (f/k/a "kitchen") to obtain information relating to my criminal history record. I understand that this information will be used, in part, to determine my eligibility for various positions within the "kitchen". I understand that while I volunteer here, the criminal history records check may be repeated at any time.

I hereby affirm that my answers to the foregoing questions are true and correct and that I have not knowingly withheld any fact or circumstance that would, if disclosed, affect my application unfavorably, any expunged offenses excepted. I understand that any false information submitted in this application may negatively affect my volunteer status.

I understand that this information will be known only to the Board of Directors and Administrative staff and will not be otherwise disclosed or disseminated.

| FULL LEGAL NAME: | | |
|---|---|--|
| MAIDEN NAME: | | |
| DATE OF BIRTH: | S.S. NUMBE | ₹: |
| STREET ADDRESS: | | |
| PREVIOUS ADDRESS IF MOVED II | N LAST 10 YEARS: | |
| DRIVERS LICENSE NUMBER: | | INDIANA: ()YES ()NO State: |
| HAVE YOU EVER BEEN CONVICTI | ED OF A FELONY? () NO () YES, what convicted of, where conviction l | happened, Are you on Probation) _ |
| | ` , |) YES, PLEASE EXPLAIN: (Where charges filed, What charges are for, |
| **Please note, Greensburg Community Bread of Life is an equal opportunity volunteer agency and that you may, at one time or another, be working side-by-side with a volunteer who has a criminal background. If this is a concern, please let our staff know. | | |
| FOR OFFICE USE ONLY: | | |
| APPROVED: | DECLINED: | FURTHER INFO NEEDED: |