



CITY OF MARSHALL
Background Check
Data Practices Advisory

Read this Advisory before completing the 'Consent for the Release of Information' and providing protected information on the next page.

As an applicant for a volunteer opportunity or as a current volunteer with the City of Marshall, you are being asked to provide information about yourself that will be used to evaluate your suitability for the volunteer opportunity you are seeking or the volunteer position you hold with the city.

The purpose and intended use of the data required on the next page is to conduct the background inquiries which this City uses to establish your suitability for a volunteer opportunity or a continued volunteer position with the City of Marshall. A complete criminal history and driver's license check are conducted to determine your suitability for the volunteer opportunity.

<i>Data We May Request</i>	<i>Intended Use</i>
Full legal Name (to include maiden and previous married names)	To conduct a complete criminal history & background check
Date of Birth	To access driver's license & criminal history data
Social Security Number	To access driver's license & criminal history data
Driver's license number(s)	To access driver's license data

This data will be used solely for the above-mentioned purposes. This data will be forwarded to the appropriate City staff and/or consultants as determined necessary for completion of the background check.

You are not legally required to provide the requested information. However, if you do not, the City of Marshall will be unable to conduct the required background inquiries and will not be able to consider you for the volunteer opportunity. Current volunteers that fail to provide the requested information may be released from voluntary service.

I, _____, have read and understand the information stated above.
 (Full Legal Name of Applicant/Volunteer)

 Applicant/Volunteer Signature

 Parent/Guardian Signature
(If Applicant/Volunteer is NOT 18 years of age or older)

 Date

 Date

For Office Use Only:	
In-House:	<input type="checkbox"/> No Record Found <input type="checkbox"/> Yes Comments: _____ Processed by: _____ Date: _____
CCH:	<input type="checkbox"/> No Record Found <input type="checkbox"/> Yes Comments: _____ Processed by: _____ Date: _____
POR:	<input type="checkbox"/> No Record Found <input type="checkbox"/> Yes Comments: _____ Processed by: _____ Date: _____

